We have meanwhile set up a process and there are also independent institutions monitoring which objectives of our G7 meetings we actually achieve. When it comes to these goals we have a compliance rate of about 80%, according to the University of Toronto. Germany, with its 87%, comes off pretty well. That means that next year too, under the Japanese G7 presidency, we are going to check where we stand in comparison to what we have discussed with each other now. So a lot of what we have resolved to do here together is something that we are going to have to work very hard at over the next few months. But I think that it has become apparent that we, as the G7, want to assume responsibility far beyond the prosperity in our own countries. That’s why today’s outreach meetings, that is the meetings with our guests, were also of great importance.”

Chancellor Angela Merkel, Schloss Elmau, 8 June 2015
# Contents

Preface .................................................................................................................................................. 3  
Research Team .................................................................................................................................... 4  
Executive Summary ................................................................................................................................. 6  
  Table A: 2017 Priority Commitments Selected for Assessment* ......................................................... 7  
  Table B: 2017 G7 Taormina Interim Compliance Scores .................................................................... 9  
  Table C: 2017 G7 Taormina Interim Compliance Scores by Country ............................................... 10  
  Table D: 2017 G7 Taormina Interim Compliance Scores by Commitment ........................................ 10  
1. Terrorism: Aviation and Border Security ......................................................................................... 11  
2. Terrorism: Combating Online Extremism ....................................................................................... 25  
3. Non-proliferation: Nuclear Weapons and Disarmament ............................................................... 40  
4. Trade: Protectionism and Trade Practices ...................................................................................... 60  
5. Gender: Human Trafficking and Exploitation .............................................................................. 73  
6. Gender: Encouraging Women in the Private Sector ..................................................................... 88  
7. Migration: Addressing the Drivers of Migration ........................................................................... 101  
8. Climate Change: Energy and Clean Technology ........................................................................... 128  
9. Climate Change: Paris Agreement ................................................................................................. 142  
10. Food and Agriculture: Food Security and Nutrition ................................................................... 165  
11. Development: African Union Agenda 2063 ............................................................................... 176  
12. Health: Mental Health ................................................................................................................ 189  
13. Trade: Internationally Recognized Environmental Standards ..................................................... 202  
15. Macroeconomics: Inclusive Growth ............................................................................................. 234  
16. Regional Security: Ukraine ......................................................................................................... 250
12. Health: Mental Health

“[We are committed to pursuing policies that advance] mental health [improvements across the globe.]”

*G7 Taormina Leaders’ Communiqué*

### Assessment

<table>
<thead>
<tr>
<th>Member</th>
<th>No Compliance</th>
<th>Partial Compliance</th>
<th>Full Compliance</th>
</tr>
</thead>
<tbody>
<tr>
<td>Canada</td>
<td>−1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>France</td>
<td>−1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Germany</td>
<td>−1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Italy</td>
<td>−1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Japan</td>
<td>−1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>United Kingdom</td>
<td>−1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>United States</td>
<td>−1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>European Union</td>
<td></td>
<td></td>
<td>+1</td>
</tr>
<tr>
<td><strong>Average</strong></td>
<td></td>
<td>−0.75</td>
<td></td>
</tr>
</tbody>
</table>

### Background

The 2016 G7 Ise Shima Summit marked a recent shift in the global health agenda to include mental health.\(^{1083}\) At that summit, G7 leaders committed to “promoting women’s, children’s, and adolescents’ mental and physical health, ensuring sexual and reproductive health and rights without discrimination of any kind.”\(^{1084}\) At the 2017 G7 Taormina Summit, leaders reaffirmed their commitment the health of young women, children and adolescents.\(^{1085}\) There is a knowledge and resource gap between developed countries and those developing regarding mental health diagnosis, treatment and prevention. Narrowing this gap of knowledge and resources in mental health is often the secondary focus of other international, healthcare-oriented organizations, such as the World Health Organization (WHO).\(^{1086}\)

Mental health refers to a humans emotional, psychological and social well-being according to the Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition (DSM-5) published by the American Psychiatric Association (APA) in 2013. The 2013 DSM-5 is the standard tool used in many developed countries for psychiatric diagnostics. The APA claims that the DSM-5 consists of “more than 10 years of effort by hundreds of international experts … their dedication and hard work have yielded an authoritative volume that defines and classifies mental disorders in order to improve diagnosis, treatment, and research.”\(^{1087}\)

---


Mental health disorders often go undiagnosed and threaten to significantly reduce the quality of life of a sufferer with increased stigma.\textsuperscript{1088} Although the overall death rate due to mental health disorders is low compared to communicable diseases, mental health disorders continue to affect both developed and developing populations across the world.

In 2001, WHO reported that one in every four individuals would suffer from mental or neurological conditions.\textsuperscript{1089} The report continues, stating that “treatments are available, but nearly two-thirds of people … never seek help [due to] stigma, discrimination and neglect, preventing both care and treatment.”\textsuperscript{1090}

In 2016, the G7 countries committed to improve mental health policy, including in the areas of healthy and active ageing.\textsuperscript{1091}

Compliance with the G7’s mental health commitments have not before been assessed by the G7 Research Group, nor by any major international organization.

**Commitment Features**

The G7 members committed to “[pursuing policies that advance] mental health [improvements across the globe].”\textsuperscript{1092} In 2013, WHO, of which all G7 countries are members, released a report entitled Mental Health Action Plan 2013–2020 that addressed the necessity of more targeted practices to support the improvement of mental health.\textsuperscript{1093} The overall goal of this action plan is “a world in which mental health is valued, promoted and protected.”\textsuperscript{1094} This identifies the core intent of the relevant commitment. Thus, this commitment requires that G7 member countries take actions to support policy prescriptions and other measures recommended in this action plan. The G7 Research Group defines “advance,” as a “move or push forward, to make progress, give active support to, promote, cause an event to occur at an earlier date.” To “pursue,” is to “follow in order to catch or capture, to try to get a do over a period of time.”

The action plan draws from WHO’s regional action plans and strategies for mental health and substance abuse to identify the most important policy prescriptions and actions necessary to promote global mental health improvements. Environmental, social, cultural, political and economic factors were taken into account in the development of this action plan.

There are two parts to this commitment.
Part One: National/Domestic Component: Implementation of National/Domestic Mental Health Initiatives

In order to be considered as implementing national mental health initiatives, G7 members must take action in one or more of the following ways:

1. Ensure that national policies on mental health are developed and implemented in line with evidence and best practices, such as the Convention on the Rights of Persons with Disabilities or other internationally recognized standards.  \(^{1095}\)

2. Measure and allocate budget necessary to implement evidence-based mental health plans and actions on a national level.  \(^{1096}\)

3. Engage with stakeholders from all levels to guarantee nuanced, evidence-based policy prescriptions and actions. \(^{1097}\)

4. Formalize the role of people with mental health diseases in the process of developing, assessing, monitoring, and implementing mental health plans and actions. \(^{1098}\)

5. Prioritize the protection of vulnerable and marginalized populations by ensuring access to mental health resources, health care, clean water, and other factors necessary to promote mental health. \(^{1099}\)

Part Two: International Component: Mental Health Promotion as a Member of an International Organization

1. Support the implementation of WHO’s Mental Health Action Plan 2013–2020 and other mental health initiatives by international organizations. \(^{1100}\)

2. Provide regional support to developing countries to develop their healthcare infrastructure to include mental health policy and actions. \(^{1101}\)

---


3. Encourage opportunities for information exchange between countries to further develop best practices.\footnote{1102}

4. Work with international organizations to provide mental health support during humanitarian emergencies or natural disasters.\footnote{1103}

5. Contribute to the development of health information system to monitor mental health emergencies and to improve the delivery of mental health resources.\footnote{1104}

To achieve full compliance for this commitment, G7 members must implement policies and take actions on a national level and as a member of an international organization (to fulfill the requirement of global implementation), with more weight placed on actions that emphasize improvements across the globe.

**Scoring Guidelines**

<table>
<thead>
<tr>
<th>Score</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>-1</td>
<td>G7 member does not implement national actions towards mental health improvements AND does not partake in international actions.</td>
</tr>
<tr>
<td>0</td>
<td>G7 member implements at least THREE of FIVE actions towards mental health improvements on BOTH a national and international level.</td>
</tr>
<tr>
<td>+1</td>
<td>G7 member implements at least THREE of FIVE national actions towards mental health improvements AND at least FIVE of FIVE international actions; OR at least TWO of FIVE national actions AND at least FOUR of FIVE international actions.</td>
</tr>
</tbody>
</table>

**Canada: -1**

Canada has not complied with its commitment to pursuing policies that advance mental health improvements across the globe.

On 6 June 2017, the Government of Canada announced CAD 4.8 million in funding to mobilize international research networks to address gaps in mental health research. The research will focus primarily on youth mental health addiction services, prisoner mental health practices, and best practices in health supply chains.\footnote{1105}

On 13 June 2017, the Mental Health Commission of Canada (MHCC) and HealthCareCAN launched the Declaration of Commitment to Psychological Health and Safety in Healthcare.\footnote{1106} This


document commits hospitals and related institutions to promoting staff mental health by recognizing its importance to patient safety and workplace culture.

On 7 September 2017, the MHCC announced a pilot project to “teach students how to better understand and manage their mental health.”\textsuperscript{1107} The program involves students sharing personal experiences, discussing coping strategies, and watching videos of peers in recovery. Canada has protected students vulnerable to mental illness by ensuring their access to adequate mental health resources.

On 16 November 2017, Canada and China jointly funded EMBED for CAD 2.15 million. EMBED is a five-year project to integrate mobile applications, text messaging and electronic medical records in improving mental health. This project is intended to address, in both countries, “a shortage of mental health care professionals, especially in remote areas, as well as time constraints for psychiatrists and other experts.”\textsuperscript{1108} This project aims to use apps to identify symptoms and provide assistance in the absence of a mental health professional.

Canada has taken steps towards implementing national health initiatives. Canada has prioritized access to mental health resources for vulnerable populations, namely students and healthcare workers. In addition, Canada has engaged with healthcare workers to develop relevant mental health policy. However, Canada has engaged minimally on implementing mental health initiatives on an international level.

Additionally, Canada has made progress in promoting mental health as a member of an international organization. It has encouraged information exchange with China, and contributed to a health information system for monitoring and delivery of mental health resources. However, Canada has not supported the implementation of the World Health Organization’s Mental Health Action Plan 2013-2020, worked with international organizations to provide mental health support during emergencies, or provided regional support to developing countries’ mental health initiatives.

Thus, Canada receives a score of $-1$.

\textit{Analyst: Frederick Zhang}

**France: $-1$**

France has not complied with its commitment to implement national mental health initiatives and not complied with its commitment to promote mental health as a member of an international organization.

On 8 September 2017, a decree on territorial mental health projects was added to the modernization law, setting out six priorities to be met by each territorial mental health project in the country: 1) early identification of mental disorders, diagnoses, and improvement of access to care and social or medico-social support; 2) the organization of a pathway for people, especially those with serious, at-risk or psychologically-handicapped disorders, to navigate their recovery and social integration; 3)

\textsuperscript{1107} New Student Mental Health Program to be Piloted on Seven Canadian Campuses, Mental Health Commission of Canada (Ottawa) 7 September 2017. Access Date: 16 November 2017. https://www.mentalhealthcommission.ca/English/news-article/13284/new-student-mental-health-program-to-be-piloted-seven-canadian-campuses.

access to somatic care for people with mental disorders; 4) prevention and management of crisis and emergency situations; 5) the promotion of and respect for the rights of persons with mental disorders; 6) action and the fight against the stigmatization of these disorders.\footnote{Les projets territoriaux de santé mentale sont lancés, Ministère des Solidarités et de la Santé (Paris) 8 September 2017. Access Date: 20 November 2017. http://solidarites-sante.gouv.fr/actualites/presse/communiques-de-presse/article/les-projets-territoriaux-de-sante-mentale-sont-lances.}

On 18 September 2017, the French Ministry of Health released the first draft of its 2018-2022 National Health Strategy, which identifies 10 priority mental health goals to be addressed in the coming years. This includes the adoption of interdisciplinary approaches to mental health, the reduction of time required for mental health care, and the strengthening of suicide prevention efforts, among others.\footnote{Stratégie nationale de santé 2018-2022, Ministère des Solidarités et de la Santé (Paris) 18 September 2017. Access Date: 20 November 2017. http://solidarites-sante.gouv.fr/IMG/pdf/dossier_sns_2017_vdef.pdf.}

France has demonstrated efforts to comply with its mental health commitments at the national level, it has not fulfilled any of its mental health commitments to the international community. Thus, France has received a score of $-1$.

Analyst: Sabrina Lin

**Germany: $-1$**

Germany has not complied with its commitments for improving its policies to improve mental health care across the globe.

On 2 June 2017, a report was released acknowledging Germany’s leadership in Europe for supporting those affected with mental health illnesses, citing their inpatient and outpatient services where general practitioners are able to play key roles in diagnosis. Patients can also seek direct help from psychiatrists, clinical psychologists and psychosomatic medicine specialists. Germany also provides partial inpatient treatment to ease transition from clinic to home.\footnote{Understanding Mental Health Care in Germany, Stripes Europe (Berlin) 2 June 2017. Access Date: 17 November 2017. http://europe.stripes.com/health/understanding-mental-health-care-germany.}

On 3 September 2017, the non-profit Doctors Without Borders in partnership with the German Government outlined a mental health project for refugees. The project trains refugees to counsel their peers with coping skills and stress management and matched them with others who came from similar backgrounds. The initiative is to make up for the shortage of mental health services available to asylum seekers.\footnote{In Germany Refugees are being Trained as Mental Health Counselors for Peers, Haaretz (Israel) 3 September 2017. Access Date: 15 November 2017. https://www.haaretz.com/world-news/europe/1.809949.}

On 4 October 2017, German appointment procedures and waiting times for mental health services were reported. The average admission rate for depression in German hospitals has increased while, the waiting times have been stagnant. On average, a person must wait three months for an initial appointment with a registered psychotherapist. For some of these cases, this long wait time is fatal.\footnote{How Foreigners in Berlin are turning to a Black Market in Mental Health for Treatment, The Local (Berlin) 4 October 2017. Access Date: 20 November 2017. https://www.thelocal.de/20171004/how-foreigners-in-berlin-are-turning-to-a-mental-health-black-market-to-treat-their-needs.}
Germany has taken steps to improving access to mental health issues. It has implemented campaigns to help bring awareness to mental health as well as tackling inpatient and outpatient services. It now offers services such as short diagnostic consultations, faster approval from health insurers, more flexibility for relapse prevention and faster telephone scheduling.\textsuperscript{1114}

Many of the changes in Germany are of an informational nature, rather than a proactive initiative.

Germany has demonstrated efforts to comply with its mental health commitments at the international level, it has not fulfilled its mental health commitments to the nationally.

Thus, Germany receives a score of \(-1\).

\textit{Analyst: Salsabila Ahmed}

\textbf{Italy: \(-1\)}

Italy has not complied with its commitment to implement national mental health initiatives and to promote mental health as a member of an international organization.

On 13 September 2017, Italy and the World Health Organization signed a country cooperation strategy for the first time that defines a strategic framework for cooperation between the partners.\textsuperscript{1115} Covering the period from 2017 to 2022, the strategy aims to promote well-being by addressing and mitigating the impact of the risk factors for noncommunicable diseases, including mental health, women’s and children’s health.

On 26 September 2017, Italy launched its first official migrant integration plan, in which the government pledges to acknowledge the vulnerability of asylum seekers, and pay particular attention to mental health, among other things.\textsuperscript{1116}

On 5 October 2017, the Italian city of Lodi held a Mental Health Week, an initiative meant to support women suffering from anxiety, depression, mood and sleep disorders, psychosis and eating disorders. The event consisted of a variety of workshops and services to bring primary mental healthcare to the level of the citizens.\textsuperscript{1117}

On 12 October 2017, the Committee on Social Policy and Health, headed by Rodolfo Lena, held an annual hearing with the Regional Mental Health Consultation chaired by Daniela Pezzi.\textsuperscript{1118} Mental health strategies in the past and present were discussed in an effort to improve health service delivery in the coming year.

\textsuperscript{1114}In Germany Refugees are being Trained as Mental Health Counselors for Peers, Haaretz (Israel) 3 September 2017. Access Date: 15 November 2017. https://www.haaretz.com/world-news/europe/1.809949.


Italy has demonstrated efforts to comply with its mental health commitments at the national level, but has not fulfilled any of its mental health commitments to the international community. Thus, Italy has received a score of −1.

Analyst: Sabrina Lin

Japan: −1

Japan has not complied with its commitment to pursue policies that advance mental health improvements and to promote mental health as a member of an international organization.

On 25 July 2017, Prime Minister Shinzo Abe’s government approved a plan aimed at reducing the country’s suicide rate by 30% over the next decade.\(^{1119}\) This plan calls for excessive working hours, postpartum depression and high teen suicide rates to be addressed.\(^{1120}\) The government has pledged to focus on ensuring workers’ mental health, assessing the mental state and living conditions of a mother after childbirth through health checkups and promoting educational efforts to better inform students on how they can seek help.\(^{1121}\)

On 1 September 2017, the Japanese government set up a 24/7 telephone counselling service for children and parents on the first day back to school after the summer holidays.\(^{1122}\) The first day back is a day where teen suicide rates tend to be three times higher than any other day of the year.\(^{1123}\)

On 5-6 November 2017, Japan’s Minister of Health attended the G7 health ministerial meeting, where the group agreed that it will seek to improve access to mental health services and respect, protect and fulfil women’s, children’s and adolescent’s right to the highest standard of mental health.\(^{1124}\) A further emphasis was placed on adolescents as the group invited the Organisation for Economic Co-operation and Development to judge mental health performance by specifically focusing on adolescents.\(^{1125}\)

On 19 December 2017, the Japanese government announced that the Internet Hotline Centre Japan would monitor online postings and comments which expressed a desire to commit suicide, in an


effort to help and stop the individuals behind these social media postings.\textsuperscript{1126} This plan also intends on providing further mental health care to individuals by displaying contact information of suicide prevention organisations on a device, whenever a suicidal comment or post is made from it.\textsuperscript{1127}

Japan has made effort to comply with it’s commitment on both a national and international level, but has not taken enough action to receive a partial score.

Thus, Japan receives a score of –1.

\textit{Analyst: Tasmiyah Randeree}

\textbf{United Kingdom: –1}

The United Kingdom has not complied with its commitment to pursuing policies that advance mental health improvements across the globe.

On 23 June 2017, the National Health Service (NHS) announced 11 new websites to help redesign mental health services. This is to help reduce the number of people travelling long distances for mental health care, increasing overall accessibility.\textsuperscript{1128}

On 29 June 2017 the National Audit Office published a report on current mental health in the England prison system. This report states that previous mental health care service plans were ambitious and will be difficult to achieve in practice. The report also states the the British government does not record sufficient data regarding mental health in prisons, making it difficult to plan policy interventions that will be effective in the future.\textsuperscript{1129}

In July 2017, the NHS published Stepping Forward to 2020/21: Mental Health Workforce Plan for England in response to and in support of the commitments made in the Five Year Forward View for Mental Health.\textsuperscript{1130} The workforce plan was agreed to across the NHS and is based off the most comprehensive and robust study of the mental health workforce to date.\textsuperscript{1131}

On 19 July 2017, the Mental Health Units (Use of Force) Bill 2017-2019 was presented. This bill is seeking to make provision about the oversight and management of use of force in relation to patients in mental health units and similar settings by introducing statutory requirements regarding the use of force upon patients in mental health units.\textsuperscript{1132}


On 21 July 2017, the Queen’s Speech confirmed that mental health legislation will be reformed. The reformation is in relation to current legislation in which people with severe mental illness can be detained for assessment and treatment.\textsuperscript{1133}

On 31 July 2017, Health Secretary Jeremy Hunt launched a plan to expand the mental health workforce in England. This plan includes adding 21,000 mental health-related jobs to accomplish treating 1 million extra patients by 2020/21, providing services 24 hours a day and seven days a week and integrating physical and mental health.\textsuperscript{1134}

On 12 October 2017, the Northern Ireland Department of Justice Office posted a report on new horticultural initiatives being placed in prisons to improve mental health of elderly prisoners.\textsuperscript{1135}

On 6 November 2017, the House of Commons resolved on a debate to consider an e-petition regarding mental health in school curriculums.\textsuperscript{1136}

On 22 November 2017, the Autumn 2017 Budget from HM Treasury was published. In this budget, it is stated that GBP 5 million from bank fines in Northern Ireland, Scotland and Wales will go to various projects, including towards mental health initiatives for veterans in the Scottish Highlands.\textsuperscript{1137} The Budget also allocates GBP 28 million to victims of the Grenfell Tower tragedy, including mental health services.

In December 2017, the Department of Health and Social care and the Department for Education presented a joint green paper entitled Transforming Children and Young People’s Mental Health Provision.\textsuperscript{1138} The green paper recognizes children and youth as an underserved and vulnerable population. It includes plans to improve access to services and mental health support in schools such as training a senior mental health lead in every school and creating mental health support teams to work directly with schools and colleges. Post consultation, funding of over GBP 300 million will be made available.\textsuperscript{1139}

The United Kingdom implements national mental health initiatives, but does not partake in mental health promotion as a member of an international organization.


\textsuperscript{1136} Mental Health Education in Schools, House of Commons Hansard (London) 6 November 2017. Access Date: 12 November 2017. https://hansard.parliament.uk/commons/2017-11-06/debates/C0BDFB2D-549E-4881-9EFB-F7BFF023888A/MentalHealthEducationInSchools.


Thus, the United Kingdom receives a score of –1.

Analyst: Bailey McMaster

United States: –1

The United States has not complied with its commitment to pursue mental health policies on both a national and international level.

On 31 May 2017, Veteran Affairs Secretary Shulkin announced that by the end of the year all Veteran Affairs (VA) outpatient centers will offer same day primary mental health services. Currently out of the 168 VA primary care centers, 10% do not meet this standard. Wait times are available for all centers across the country, this electronic health records system will be further updated.\textsuperscript{1140}

On 3 August 2017, three initiatives were announced that would increase access to health care for American Veterans nationwide. These initiatives use telehealth technology and mobile applications to aid Veterans with mental health as well as suicide prevention.\textsuperscript{1141}

On 12 October 2017, the House Judiciary Committee approved the Law Enforcement Mental Health and Wellness Act of 2017. The bipartisan bill is set to improve mental health services for law enforcement officers. Studies have shown that police officers have high rates of stress and mental illness. The bill equips local law enforcement agencies to help address mental health challenges, peer mentoring pilot programs and studying usefulness of crisis hotlines and annual mental health checks.\textsuperscript{1142}

On 26 October 2017, President Donald Trump declares a nationwide public health emergency to address the opioids crisis. The action enables telemedicine services to remotely prescribe medicine for mental health treatment, this is important for providing mental health services to remote communities.\textsuperscript{1143}

The United States of America has taken steps to help vulnerable and marginalized populations to receive mental health care, and formalized the role of mental health patients with monitoring and implementing mental health plans. However, the budget has reduced the funding for mental health spending, and the United States fails to comply with the international partnering component of this commitment and has not taken action as a member of an international organization.

Thus, the United States receives a score of –1.

Analyst: Nam Topp-Nguyen


European Union: +1

The European Union has fully complied with its to implement mental health initiatives and to promote mental health as a member of an international organization.

From 8 to 9 June 2017, the EU hosted its second Mental Health Compass Forum. The forum is designed to bring policymakers, state representatives, non-governmental organizations such as advocacy groups and care organizations, and service professionals providers and users together. The three main topics discussed were mental health in schools, workplaces, and suicide prevention. During the forum, attendees recognized the need for greater inclusion of marginalized populations such as those of lower socioeconomic status.  

On 9 June 2017, at the end of the Mental Health Compass Forum, a consensus paper on Mental Health in the Workplace in Europe was endorsed. The paper emphasizes the costs of poor mental health, the cost-effectiveness of mental health intervention programmes and health as well as examples of best practices and relevant activities from across EU member states.  

From 12 to 13 October 2017, the European Commison, the European Social Fund, and the European Social and Investment Funds, in conjunction with the Republic of Estonia Ministry of Social Affairs, hosted the Dignity+Independent Living Conference. The goal of the conference was to discuss the transition from institution-based care to community-based support. The conference examined the mental health impacts of living in institutions, showing an implementation of national mental health initiatives. This is also in accordance with the World Health Organization Mental Health Action plan to provide mental health services in community settings.  

On 18 October 2017, the EU posted its Good Practice collection survey. Anyone can respond to the survey, but the questions require a level of knowledge regarding efficacy of said practice. The survey’s content deals with the efficacy of the practise, the level of involvement in developing the practise from mental health service users, and the geographic scale of the project.  

On 17 November 2017, the EU pledged EUR 313,135 to STRENCO. The aim of this project is to strengthen collaboration between academics and students, service users and practitioners and to develop tools to assess multi-professional competences for mental health students in an international


context. The project will run over three years with collaborating partners from Tampere University of Applied Sciences, Finland; Jyväskylä University of Applied Sciences, Finland; Vives University (Zuid), Belgium; the Technological Educational Institute of Athens, Greece and the University of Salford University in the UK.150

On 14 December 2017, the EU pledged EUR 10.9 million to fund Libyan health care, with a focus on mental health services.151

On 22 December 2017, the EU posted its budget for 2018. In it, it is confirmed that EUR 360,000 would be allocated for a pilot project — severe mental disorders and the risk of violence: pathways through care and effective treatment strategies, a continuation of a previous year’s project. The goal of promoting health, including mental health, in particular among adolescents, preventing diseases and fostering supportive environments for healthy lifestyles is also stated.152

The EU has increased research and data collection across its member states, involving mental health service users and opening surveys to the public. In addition, it has allocated budget toward mental health initiatives domestically. On an international level, it has facilitated international collaboration and knowledge sharing, while providing funds and expertise to other countries to develop infrastructure.

Thus, the EU has fully complied with its commitment and receives a score of +1.

Analyst: Heather Wong