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Patient Journeys and Outcomes in Mental Healtcare Systems in Europe – Narrative Review and Study Protocol for a Trans-European Comparison

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Introduction: Mental healthcare systems in Europe differ greatly in terms of access and care settings. Whereas comparisons of the structures partly exist (e.g. REFINEMENT project), not much is known neither about the patient journeys for specific disease entities nor about outcomes of these differently organized systems.
Objectives: The first objective is to review the existing literature on structural differences in mental healthcare sytsems in Europe. The second objective is to discuss options for studies that gather differences in patient journeys and outcomes for specific disease entities.
Methods: Narrative review about structural differences in mental healthcare in Europe and discussion of a study protocol for assessing patient journeys for 6 important disease entities (Severe Major Depressive Disorder, Schizophrenia, Behavioural disorders in Dementia, Borderline Personality Disorder, PTSD, Alcohol Addiction).
Results: European mental healthcare systems differ greatly in terms of structures of mental healthcare provision. E.g. Belgium had 141 hospital beds per 100,000 inhabitants, Germany 131, the Netherlands 112, Switzerland 95, Austria 75, and Denmark 5 (eurostat, 2024a). However, what these numbers mean for the patient journeys and for the systems outcomes is unclear. We discuss an approach for examining prototypical patient journeys for the above-mentioned disorders and for comparing their outcomes in terms of quality of life and global psychosocial functioning.
Conclusions: We are looking for European partner institutions for establishing a mental health systems research network. The goal is to set up studies that allow to compare patient journeys and outcomes within the differing European Mental Healthcare Systems as a basis for mutual learning from best practice examples.

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Prevention of Mental Disorders

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Studying loneliness and its impact on mental health among University students: the SONDEU Project

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Introduction: The challenge of loneliness underlines the need for studies that allow us to analyse and understand this phenomenon, particularly in vulnerable groups. Although loneliness can occur at any stage of life, it seems to be more prevalent during phases of transition, where changes in social relationships are frequent (Mund et al., 2020). In the younger population, a significant restructuring of social life is observed, with peer relationships becoming more central while family ties become less prominent. This often coincides with key life transitions such as change of residence, first romantic relationships, work experiences, etc. (von Soest et al., 2020). This is especially noticeable during the university stage, a period often accompanied by academic pressure due to personal, familial or societal expectations and/or needs. Furthermore, this stage is especially critical from a mental health perspective, as most mental health problems appear for the first time before the age of 25.
Objectives: 1) To analyse the impact that loneliness has on the student community at the Complutense University of Madrid (UCM). 2) To find out the prevalence and types of loneliness as well as its association with different problems of mental health.
Methods: This study follows a two-phase mixed-methods approach. In the first phase, two focus groups were conducted to explore the definition and characteristics of loneliness in-depth. The convenience sample consisted of 8 to 10 students per focus group from different educational levels and academic disciplines. A pre-designed guide with open-ended questions facilitated the session (e.g., "Reflecting on your university experience, what situations or experiences have made you feel lonely?"). In the second phase, a cross-sectional observational study was conducted. While we estimated a sample size of 246 participants to explore the prevalence of loneliness, we aim to obtain a representative sample of students from the UCM. The following measures were included: loneliness (frequency, type), mental health (depression, anxiety, psychotic experiences, suicidal behaviour), well-being and social relationships, academic performance, non-behavioural addictions and lifestyle. Data is being processed and analysed using appropriate statistical and qualitative analysis software. This study has received ethical approval from the participating institution.
Results: Data from the focus groups and the online survey were compared from different educational levels and academic disciplines to explore characteristics of loneliness and mental health problems.
Conclusions: This study seeks to gain a deeper understanding of loneliness among university students. These findings aim to promote changes that integrate a new form of care and promotion of mental health in this group (i.e., identification, prevention and management of loneliness) as well as to encourage further research in this area.

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Comparing mental health levels between caregivers of patients with severe mental disorders and caregivers of patients with rare genetic diseases

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