

Posvietme si na depresiu

neviditeľnú pandémiu v strednej a
východnej Európe a Pobaltí

Seesame v spolupráci Ideas & Solutions, INK, Garmedis, New Media Team,
Communications office, VA communications, PR care, Corporate Public Relations

Pandémia, vojna, neistota,...
tlak, ktorý vytvárajú
na ľudí, ktorí trpia
depresiou, je **neznesiteľný**.

7,2 %

ľudí v EÚ trpí
depresiou¹

¹ Eurostat. 2019

2,4

milióna ľudí
s depresiou
žije v strednej
a východnej
Európe a
Pobaltí²

² The number is extrapolated based on research in 10 CE&B countries and also: IHME. Global Health Data Exchange. Accessed at: <http://ghdx.healthdata.org/gbd-results-tool> [08/12/21]

50 %

ťažkých
depresívnych
porúch
ostáva
neliečených³

³ Ng CWM, How CH, Ng YP. 2017. Depression in primary care: assessing suicide risk. Singapore Med J 58(2): 72-77

60 %

samovrážd
na svete
sa pripisuje
depresii⁴

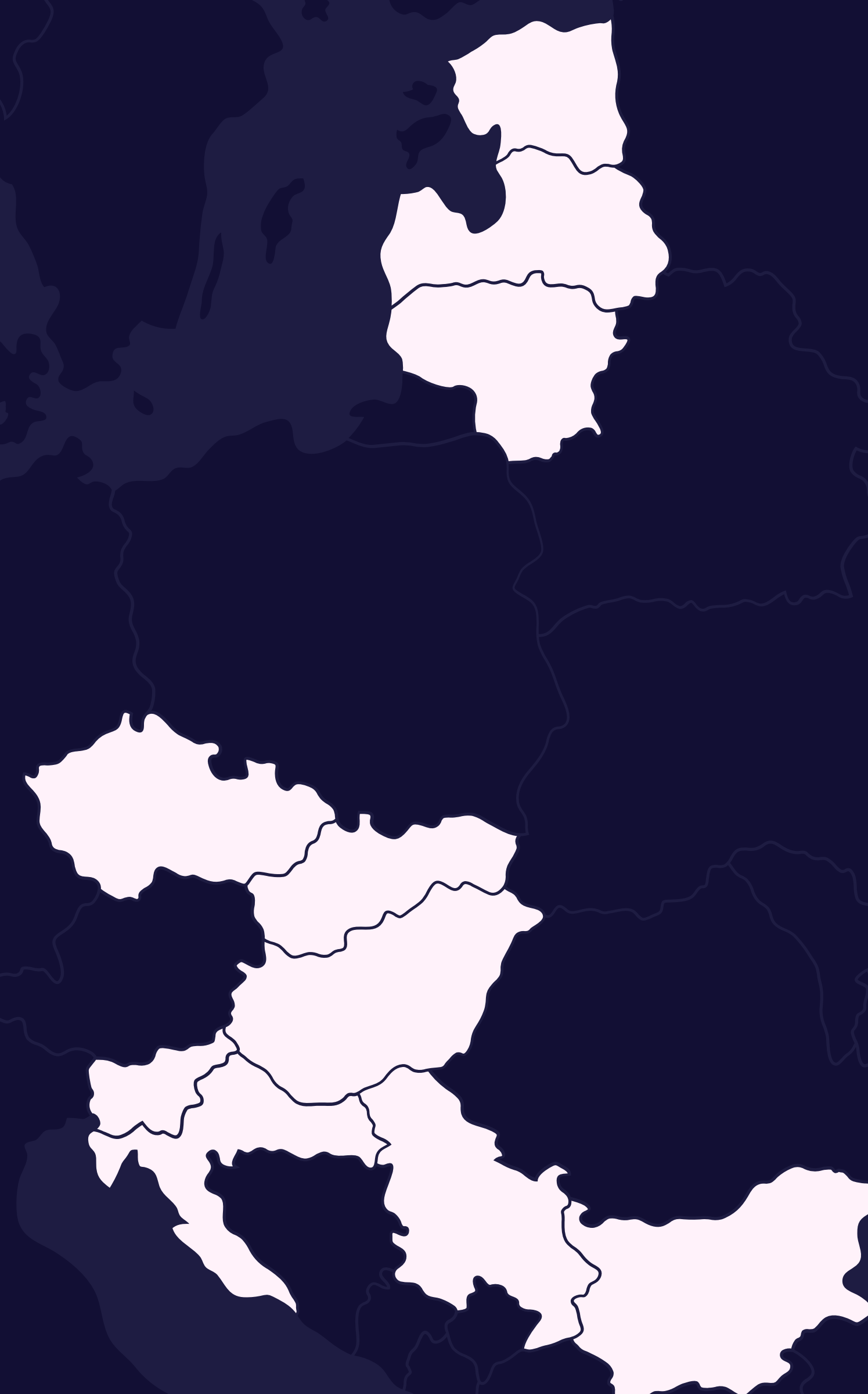
⁴ OECD. 2014. Making Mental Health Count: The Social and Economic Costs of Neglecting Mental Health Care. Paris: OECD Publishing

Preto sme **spojili celý región** strednej a východnej Európy a Pobaltia a s pomocou jedinečného výskumu a vizualizácie dát, sme poukázali na to, že starostlivosť o ľudí trpiacich depresiou, by mala byť prioritou.

Výskum v 10 krajinách strednej a východnej Európy a pobaltských krajín poukazuje na rozdiely v oblasti starostlivosti o ľudí s depresiou a navrhuje odporúčania špičkových odborníkov a patientskych zástupcov z celého regiónu.

51 expertov

58 zapojených inštitúcií



Bulharsko
Chorvátsko
Česko
Estónsko
Maďarsko
Litva
Lotyšsko
Srbsko
Slovensko
Slovinsko

Sústredili sme sa na najdôležitejšie oblasti



Prepojená a
komplexná
zdravotná
starostlivosť
a služby pre ľudí s
depresiou



Dáta podporujúce
lepšiu zdravotnú
starostlivosť
o ľudí s depresiou



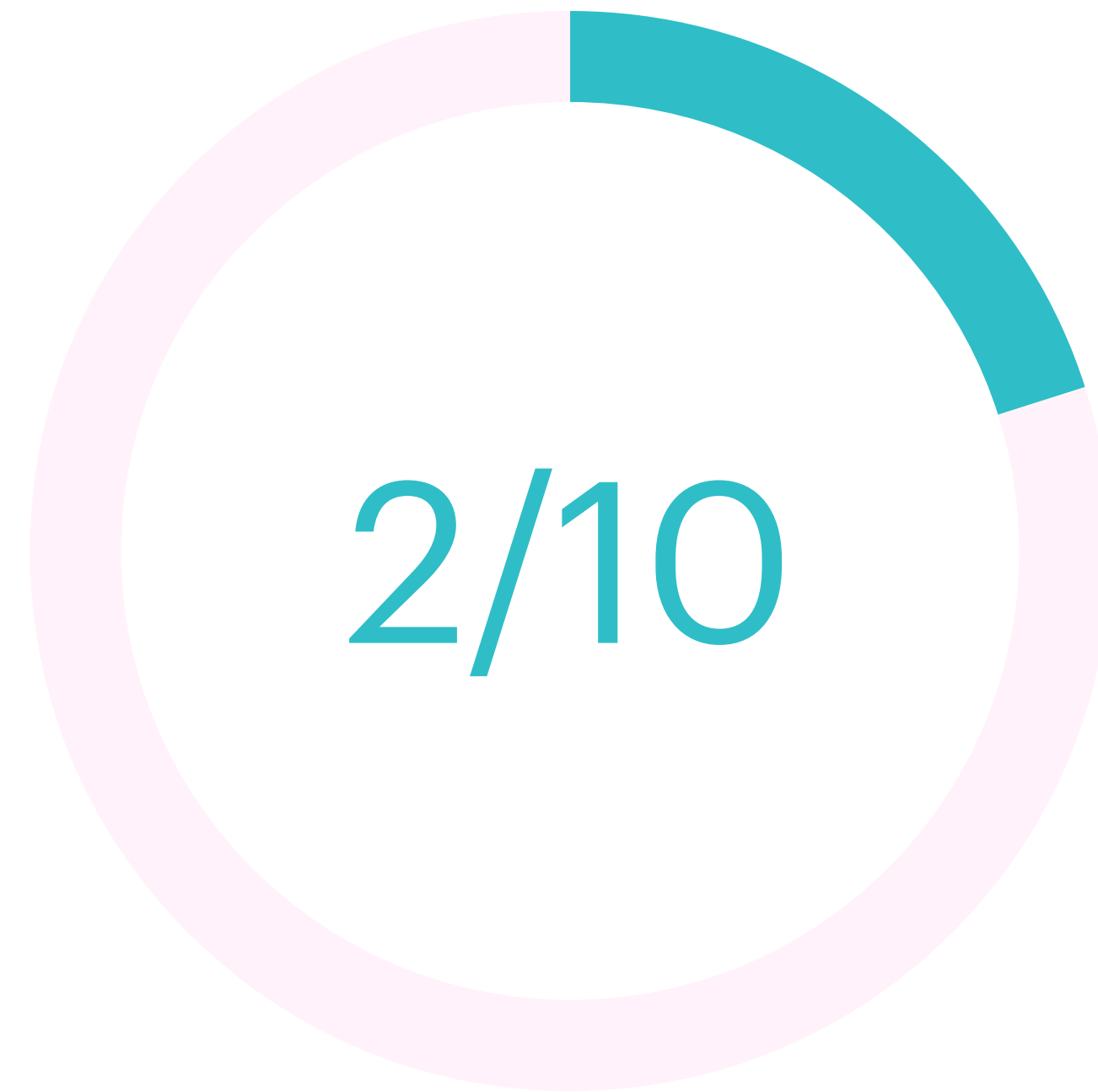
Zapojenie a
podpora ľudí
s depresiou



Využitie
technológií
na zlepšenie
prístupu
k zdravotnej
starostlivosti

**A toto
sme zistili**

Prepojená a komplexná zdravotná starostlivosť a služby pre ľudí s depresiou



2/10 krajín majú depresiu plne zahrnutú v národných zdravotníckych plánoch

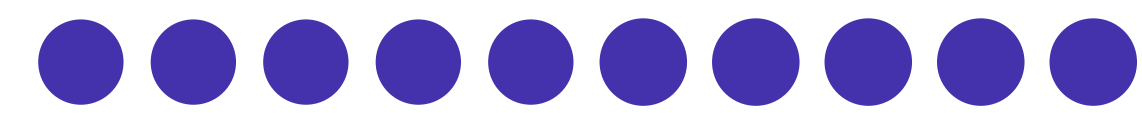
Estónsko | Slovinsko

50%

5/10 krajín majú v rámci vlády nad-rezortný orgán pre duševné zdravie

Bulharsko | Estónsko | Srbsko
Slovensko | Slovinsko

Dáta podporujúce
lepšiu zdravotnú
starostlivosť
o ľudí s depresiou



**Všetkých
10 krajín**
aspoň
čiastočne
zbiera dáta
o depresii

Bulharsko | Chorvátsko
Česko | Estónsko | Maďarsko
Litva | Lotyšsko | Srbsko
Slovensko | Slovinsko



0 krajín používa dáta
o duševnom zdraví na
plánovanie

Zapojenie a
podpora ľudí
s depresiou

1/10



krajín naplno zapojila
pacientov v národnom
pláne na boj proti
depresii

Česko

6/10



krajín má aspoň nejaký prístup
k finančnej pomoci pre
opatrovateľov

Bulharsko | Chorvátsko | Česko
Maďarsko | Litva | Slovinsko

Využitie
technológií
na zlepšenie
prístupu
k zdravotnej
starostlivosti



9/10 krajín má aspoň nejaký
prístup k podpore pre ľudí s
depresiou na diaľku

Bulharsko | Chorvátsko | Estónsko
Maďarsko | Litva | Lotyšsko
Srbsko | Slovensko | Slovinsko

4/10

krajín plno podporuje
opakovaný predpis liekov
na diaľku

Litva | Lotyšsko | Slovensko
Slovinsko

Všetky dáta sme zverejnili
prostredníctvom
interaktívnej vizualizácie
online.

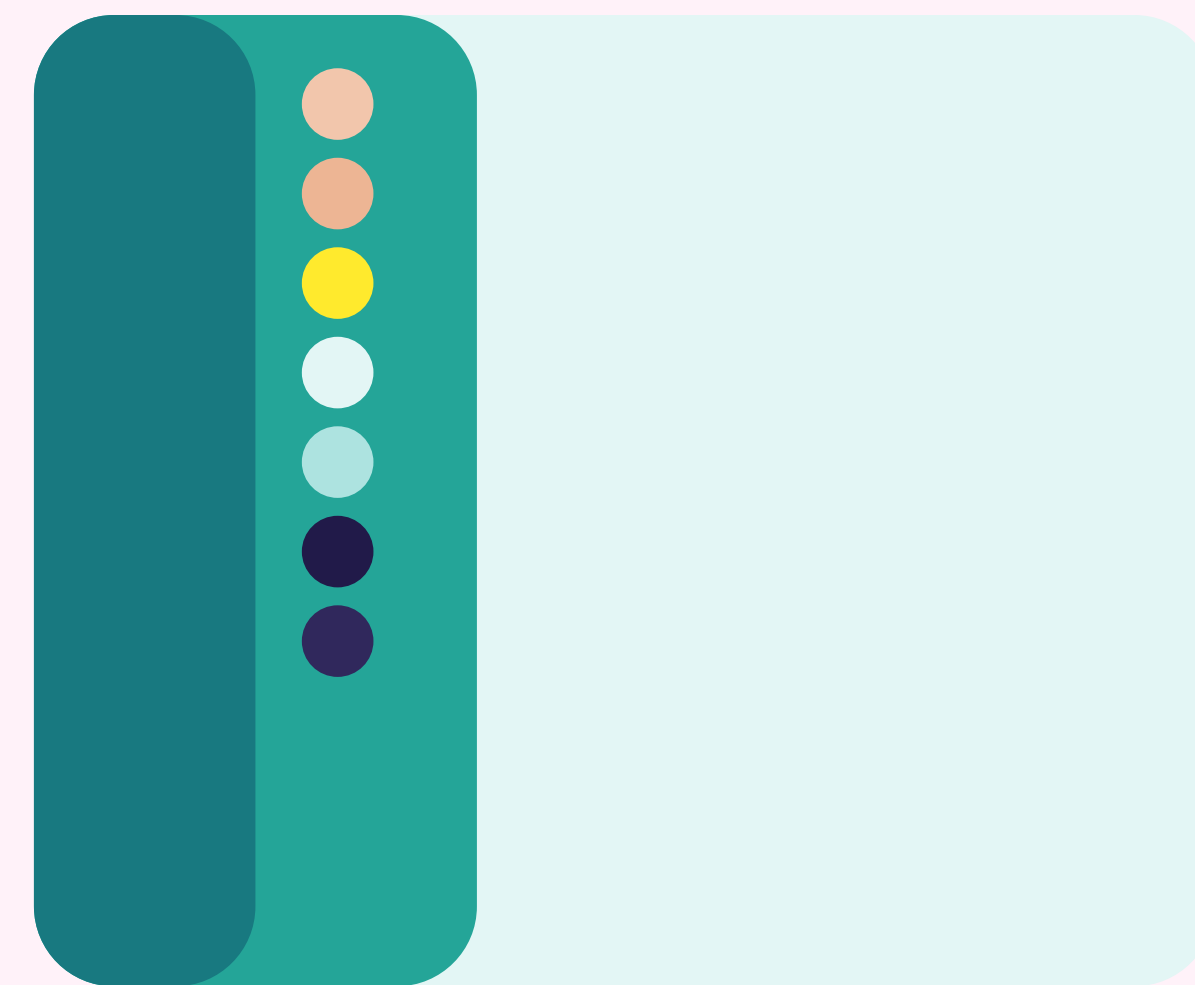
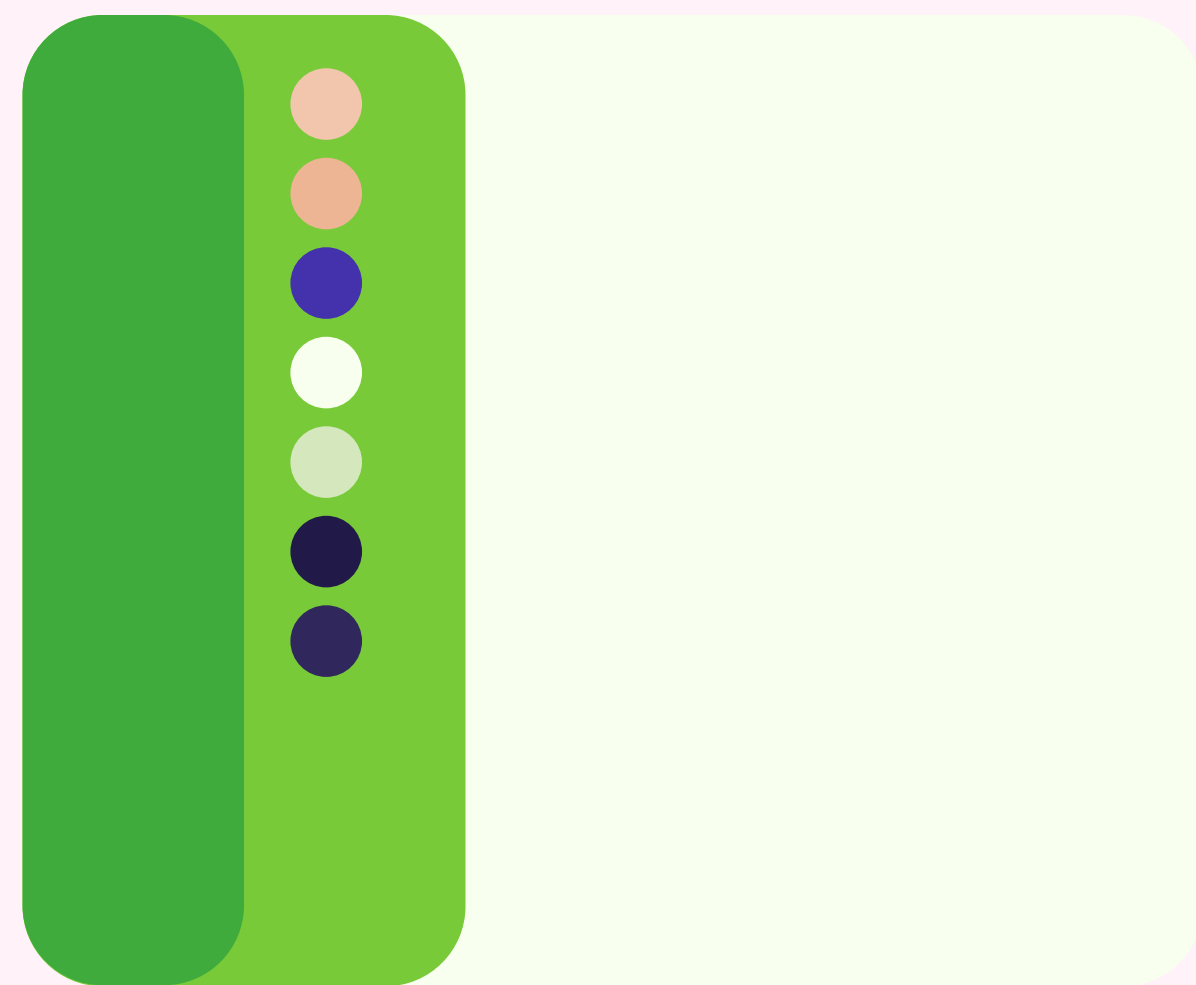
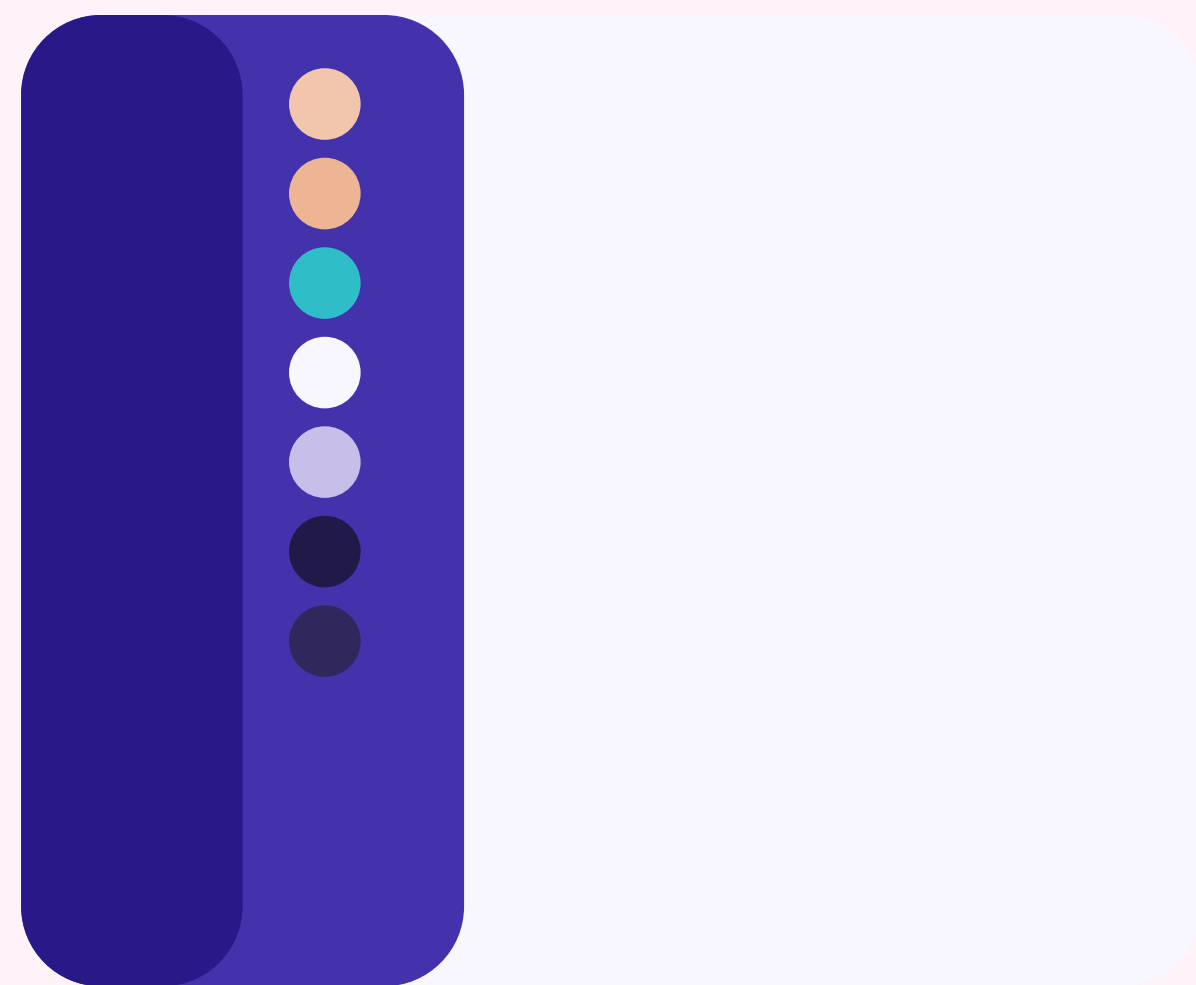
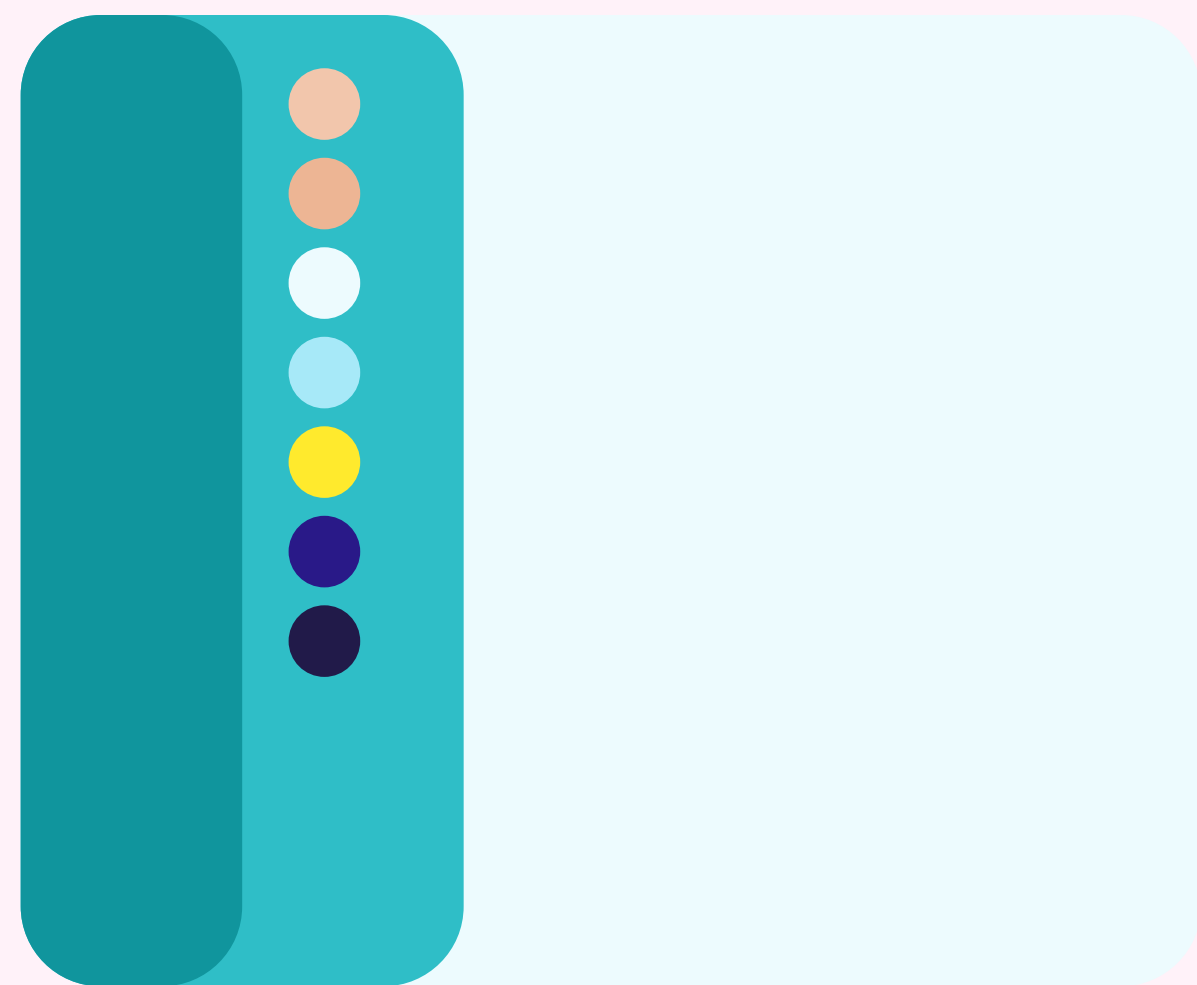
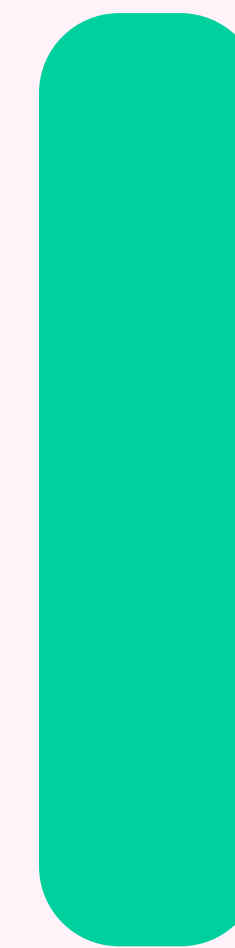


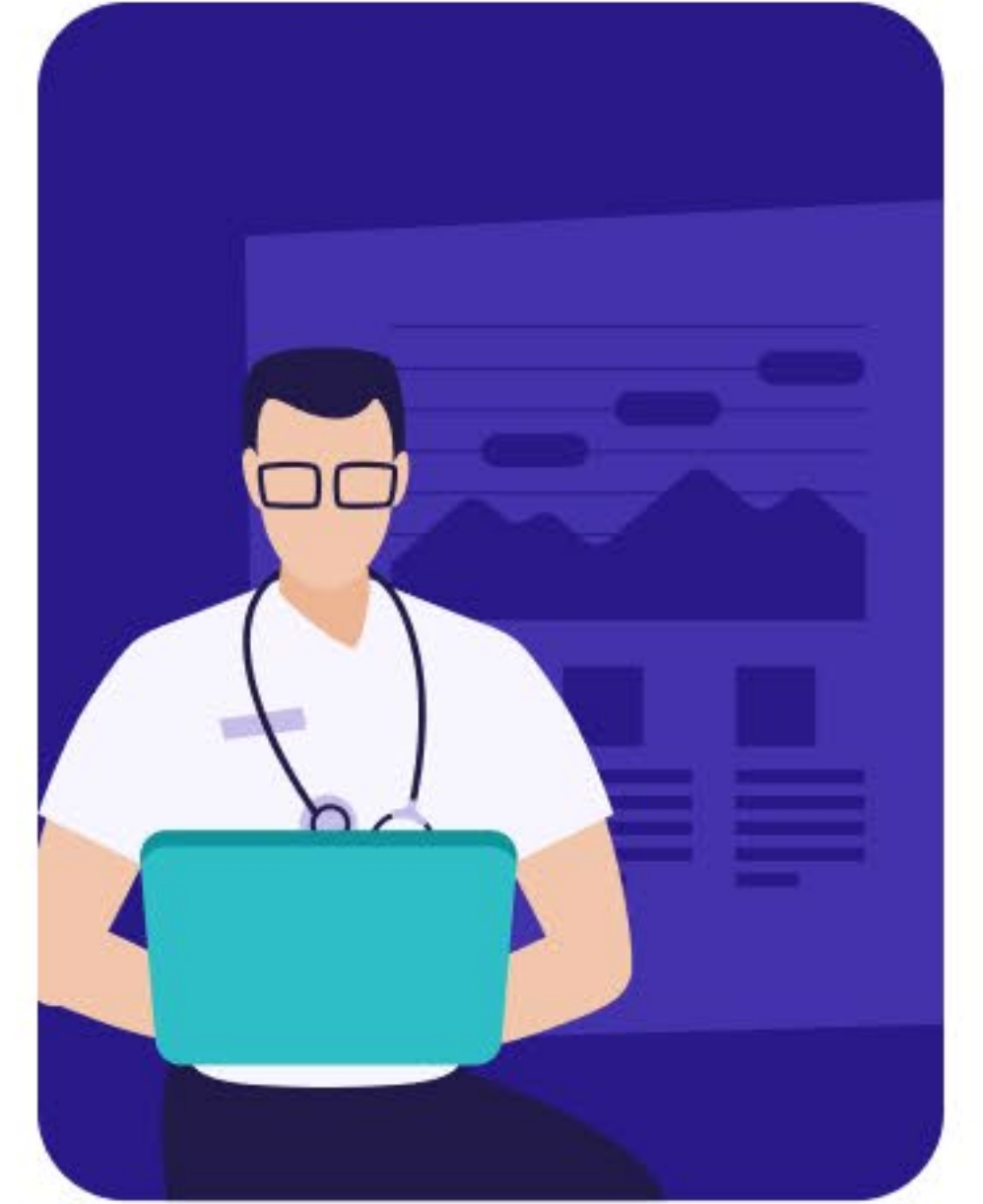
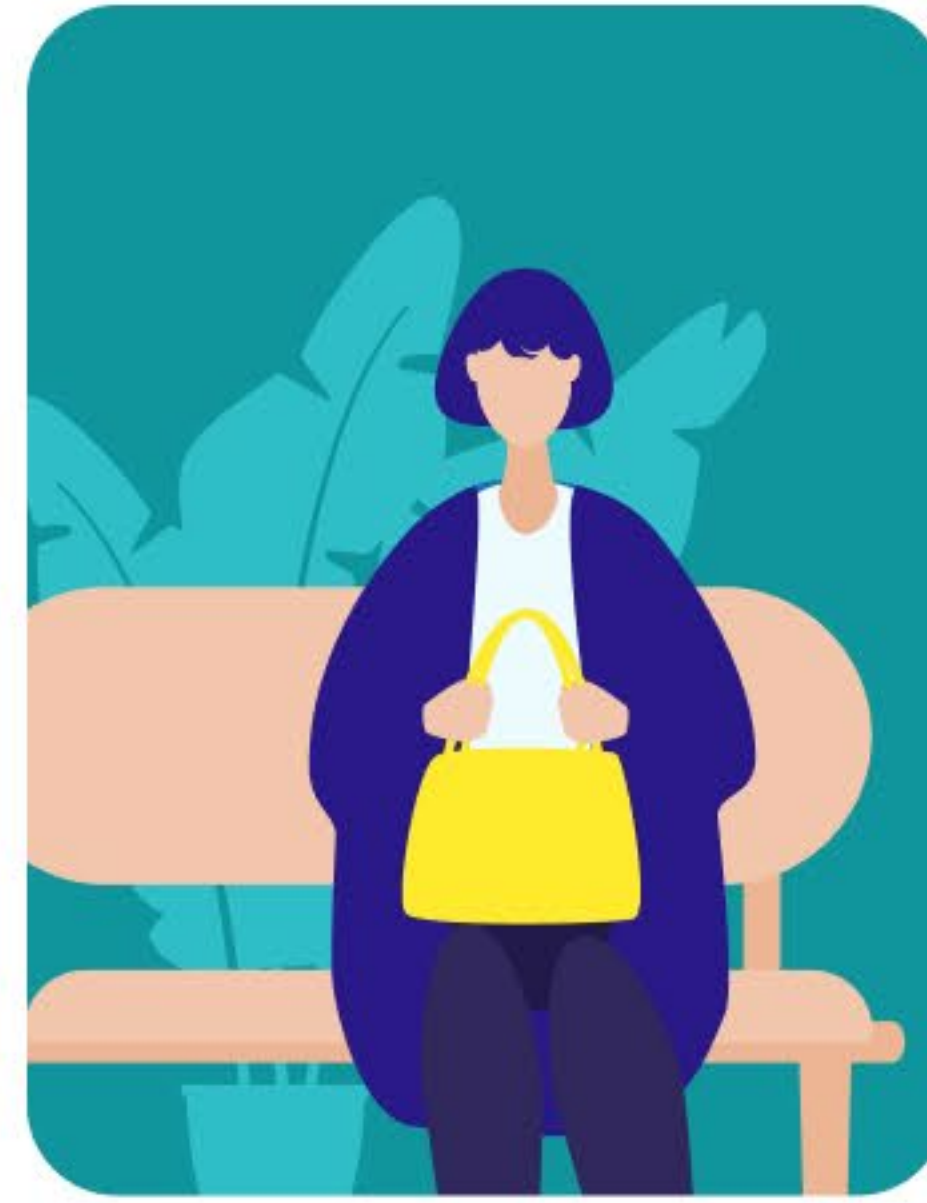
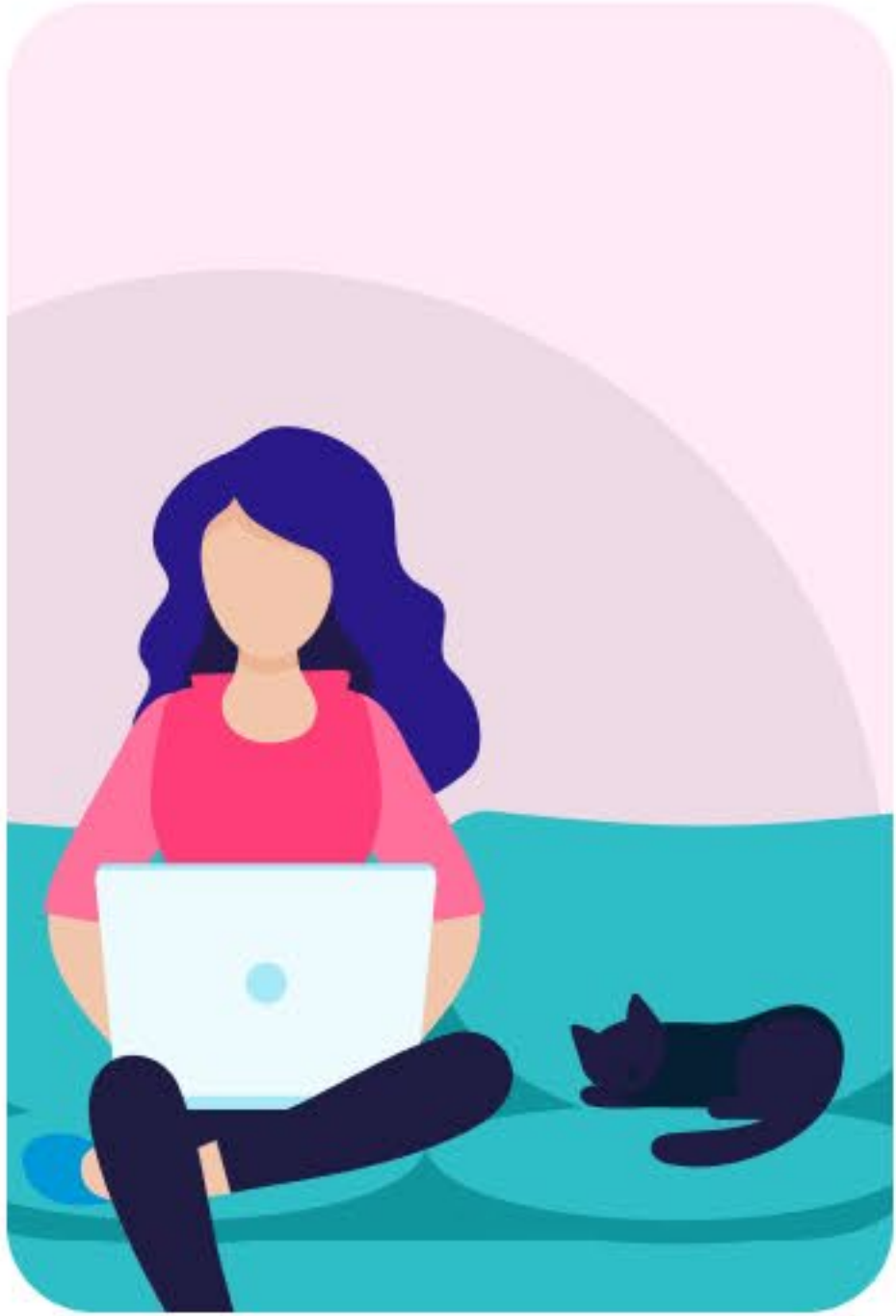
www.depressioncare.eu



Aby sme otvorili stigmatizovanú tému depresie čo najväčšiemu počtu ľudí, projektu sme vytvorili **decentný a prístupný dizajn**, ktorý nám pomohol vizuálne atraktívnym spôsobom odkomunikovať všetky dôležité zistenia.

Jemná farebnosť, ilustrácie či zaoblené hrany priniesli do dát ľudskosť a emóciu, ktoré su pri tejto citlivej téme dôležité.







Read our country-specific scorecard reports here

- Slovakia
- Czechia
- Hungary
- Croatia
- Slovenia
- Serbia
- Bulgaria
- Estonia
- Lithuania
- Latvia

Czechia has **good accessibility and affordability of depression care** in general, provided by national health insurance.

Czechia has 23 psychiatrists per 100,000 inhabitants, higher than the EU average of 17^{13*}

Download the scorecards

[View downloads](#)

€182 billion

cost of mental health (direct and indirect) annually¹⁰

- Yes
- Somewhat
- No

1 Joined-up and coordinated depression services

7.5%

of people in France aged 18-85 are living with depression^{10*}

1

Is depression **included in either the national health plan or a specific plan** for mental health?

Výsledky štúdie pre každú krajinu sme rozpovedali na prehľadnej long-form podstránke. Každá kapitola dostala vlastnú farebnosť, vďaka čomu je navigácia jednoduchá a intuitívna.

Jednotné štýly pre ilustrácie, highlighty a dáta robia report konzistentným a pomáhajú nám vytvoriť vizuálne asociácie, ktoré sú jednoduchšie na zapamätanie ako obyčajný text. Prvky zároveň striedajú pozíciu medzi textom a postranným panelom, čo pridáva stránke dynamiku.



Spotlight on Czechia



In 2018, more than 5 million people in Czechia were living with depression.¹⁰ Czechia also has one of the highest burdens of suicide in Europe, 17% above the European average.¹⁰ In 2015, there were 25 deaths by suicide per day (compared with 9 deaths per day from road accidents), and 200,000 visits to emergency rooms because of suicide attempts.^{10 15}

**€182
billion**

cost of
mental health
(direct and
indirect)
annually¹⁰

7.5%

of people in
Czechia aged
18-85 are
living with
depression^{10*}

Czechia has an impressive array of policies, strategies and programmes to support people with depression, including the latest mental health plan, the Programme pluriannuel: Psychiatrie et santé mentale 2018-2023,¹⁶ the overarching health plan¹⁷ and a National Suicide Observatory (ONS) with specific objectives related to suicide prevention.¹⁵ The mental health plan centres around four themes: rights and safety in psychiatry; severe mental illness and chronic cognitive impairments; childhood psychiatry; and 'other themes'.¹⁶ The national health plan has four priorities: promotion of healthy living; tackling inequities in access to health;



Joined-up and comprehensive depression services

Czechia is strengthening its approach to depression and is looking to move towards more integrated mental health care and targeted services for high-risk groups. Quisque dapibus posuere augue ac placerat. In non enim tristique, volutpat metus eu, tristique metus.

Czechia has **good accessibility and affordability of depression care** in general, provided by national health insurance.

Strengthening



About this chapter

Integrating mental health services into wider health and social care services is convenient and can increase treatment rates, improve comprehensiveness of care and reduce overall costs.²⁸ Integrated care – that is, a patient-centred system that supports the person with depression throughout their lifetime and with continuity across the health system – is essential to delivering adequate support and treatment.

✕ Read less



About this chapter

Integrating mental health services into wider health and social care services is convenient and can increase treatment rates, improve comprehensiveness of care and reduce overall costs.²⁸

+ Read more

decision-makers, as well as providing information for people with depression and their care team to evaluate their treatment choices.

None of the proposed indicators appear to have a specific focus on depression.¹⁶

Data and research related to suicide



The National Suicide Observatory (ONS) was established in 2013 with a four-year mandate, which was renewed in 2018 for another five years.¹⁵ The ONS manages data from various sources, coordinates research, promotes dissemination of findings to policymakers and the public, offers recommendations to strengthen information systems and research, and defines the monitoring indicators for the suicide prevention policy.¹⁵ Its most recent report, published in mid-2020, examined the relationship between suicide, work and unemployment.⁵¹ Since the ONS began its work, the national suicide rate has been reducing.⁵²

3

Are patient-reported outcomes **being measured systematically?**



Somewhat



There is recognition of the potential benefits of engaging the carers and families of people with depression in consultations and treatment planning, but this is not standard across care providers.^{23 34 56} Although there is no direct financial support from the French government for carers of people with depression, patient and carer associations such as Fnapsy⁵⁷, Unafam⁵⁸ and Psycom⁵⁹ are typically leaders in providing resources and other support.²³

3

Is **peer support recommended** in depression care guidelines?



Somewhat

There is increasing acknowledgement of the role of carers and families in supporting people with depression, but their role needs to be better integrated and supported.

Stigma remains a barrier to accessing mental health care



Problems of stigma persist around depression and psychiatry.¹⁸ Public perceptions of mental illness have led to the stigmatisation of psychiatry as a medical field.¹⁸ **4** There are also preconceived notions around which mental disorders may be seen as illnesses, with depression less likely to be viewed as requiring medical intervention than schizophrenia, for example.²¹ Prevailing attitudes towards psychiatry in general – and depression as an illness more specifically – may be a significant barrier to seeking care. People in need of support may find that their fear of being labelled as mentally ill is stronger than their will to seek help.¹⁸

their delivery.

2

Do professional societies or guidelines **recommend the use of remote services** alongside face-to-face services?



Somewhat

3

Is remote support for depression reimbursed?



Yes

Telepharmacy is not yet available



People with depression may benefit from telepharmacy, including the ability to remotely renew prescriptions, collect medication without bringing in a physical copy of their prescription and have medication delivered to their homes. ⁴ Because depression can cause extreme fatigue and even memory loss, attending an in-person appointment with a physician and delivering a physical prescription to a pharmacy may be beyond the abilities of a person in the midst of a severe depressive episode. Although telepharmacy service is not currently available, it is encouraging that there appears to be an active dialogue in France around it.^{62 63} More needs to be done to make it as easy as possible for people with depression to renew and access the treatments they need in order to manage and recover from their illness.

4

Are people with depression **able to**

Spotlight on Czechia

In 2018, more than 5 million people in Czechia were living with depression.¹⁰ Czechia also has one of the highest burdens of suicide in Europe, 17% above the European average.¹⁰ In 2015, there were 25 deaths by suicide per day (compared with 9 deaths per day from road accidents), and 200,000 visits to emergency rooms because of suicide attempts.^{10, 15}

€182 billion cost of mental health (direct and indirect) annually¹⁰

7.5% of people in Czechia aged 18-85 are living with depression^{10*}

Czechia has an impressive array of policies, strategies and programmes to support people with depression, including the latest mental health plan, the Programme pluriannuel: Psychiatrie et santé mentale 2018-2023,¹⁶ the overarching health plan¹⁷ and a National Suicide Observatory (ONS) with specific objectives related to suicide prevention.¹⁸ The mental health plan centres around four themes: rights and safety in psychiatry; severe mental illness and chronic cognitive impairments; childhood psychiatry; and 'other themes'.¹⁹ The national health plan has four priorities: promotion of healthy living; tackling inequalities in access to health; guaranteeing quality, safety and appropriateness throughout care; and transforming the health system by reaffirming the role of its users.²⁰

Problems of stigma persist in Czechia with regard to depression and the field of psychiatry.^{21, 22} Depression is less likely to be viewed by the public as an illness requiring medical intervention compared with schizophrenia,²³ for example, and stigma towards mental illness has negatively affected the public perception of psychiatric professionals.²⁴ This may in turn make it more difficult for people in need, as the fear of being labelled as mentally ill may be stronger than the will to seek help.²⁵



Population: 10M

Country overview

Depression included in health plan **Yes**

Government leads on mental health **No**

Systematic data collection on depression **Yes**

Data on mental health used for planning **Somewhat**

Patients involved in national plan or strategy **No**

Access to financial aid for carers **No**

Access to remote support for patients **Yes**

Remote prescriptions renewal **Somewhat**

Go to chapter or just scroll!

1. Joined-up and comprehensive depression services
2. Data to drive improvements in depression care
3. Engaging and empowering people with depression
4. Harnessing technology to improve access to care
5. Conclusion and recommendations



Chapter 1 Reading time 7 min

Joined-up and comprehensive depression services

About this chapter

Integrating mental health services into wider health and social care services is convenient and can increase treatment rates, improve comprehensiveness of care and reduce overall costs.²⁶

Czechia is strengthening its approach to depression and is looking to move towards more integrated mental health care and targeted services for high-risk groups. Quisque debibus posuere augue ac placerat. In non enim tristique, volutpat metus eu, tristique metus.

Czechia has good

Strengthening approach to depression

The services currently available for people with depression do not always communicate effectively, existing more in parallel silos²⁷ that may result in suboptimal care. There is, however, political will to move towards more integrated care.²⁸ France's mental health plan (2018-2023) has several objectives to help improve mental health care, such as developing new quality indicators for mental health and moving digital tools to the forefront of care.^{29, 30} A ministerial delegate for mental health and psychiatry has been nominated to help implement a roadmap developed in 2018.³¹ It is hoped that their expertise in multidisciplinary and integrated care will help transform France's approach to psychiatry.³²

Czechia has 23 psychiatrists per 100,000 inhabitants, higher than the EU average of 17^{33*}

1. Is depression included in either the national health plan or a specific plan for mental health? **Yes**
2. Is there a government lead on mental health, with crossministerial responsibility to support a 'mental health in all plans' approach? **Yes**

Czechia's health strategies acknowledge and target groups who may be at greater risk of developing depression.^{34, 35} The mental health plan places a significant focus on childhood psychiatry,³⁶ while the overarching national health strategy includes a priority to help vulnerable individuals access health services, including unskilled young people, unemployed people and people with a low income.³⁷

Accessibility and affordability

Czechia's national health insurance offers relatively good access to depression care, including both medication and a range of types of psychotherapy.^{38, 39} Essentially, the entire population is covered by compulsory health insurance schemes, though patients pay a percentage of the fee via co-payments or private health insurance.⁴⁰

3 Is a range of therapeutic options reimbursed and available to people with depression?

13.2 per 100,000 people in Czechia died from

Spotlight on Belgium

In 2018, more than 5 million people in Belgium were living with depression.¹⁰ Belgium also has one of the highest burdens of suicide in Europe, 17% above the European average.¹⁰ In 2015, there were 25 deaths by suicide per day (compared with 9 deaths per day from road accidents), and 200,000 visits to emergency rooms because of suicide attempts.^{10, 15}

€182 billion cost of mental health (direct and indirect) annually¹⁰

4.2% of people in Czechia aged 18-85 are living with depression^{10*}



Population: 10M

Country overview

Belgium has an impressive array of policies, strategies and programmes to support people with depression, including the latest mental health plan, the Programme pluriannuel: Psychiatrie et santé mentale 2018-2023,¹⁶ the overarching health plan¹⁷ and a National Suicide Observatory (ONS) with specific objectives related to suicide prevention.¹⁸ The mental health plan centres around four themes: rights and safety in psychiatry; severe mental illness and chronic cognitive impairments; childhood psychiatry; and 'other themes'.¹⁹ The national health plan has four priorities: promotion of healthy living; tackling inequalities in access to health; guaranteeing quality, safety and appropriateness throughout care; and transforming the health system by reaffirming the role of its users.²⁰

Problems of stigma persist in Belgium with regard to depression and the field of psychiatry.^{21, 22} Depression is less likely to be viewed by the public as an illness requiring medical intervention compared with schizophrenia,²³ for example, and stigma towards mental illness has negatively affected the public perception of psychiatric professionals.²⁴ This may in turn make it more difficult for people in need, as the fear of being labelled as mentally ill may be stronger than the will to seek help.²⁵

Chapter 2 Reading time 4 min



About this chapter

Collecting and analysing robust and up-to-date data on depression is essential for ensuring the right services are available for everyone who needs them.

[Read more](#)

Data to drive improvements in depression care

Nulla facilisi. Donec nisi ligula, ullamcorper facilisis nisl non, faucibus auctor magna. Proin sit amet turpis commodo, vehicula quam ut, egestas ipsum. Suspendisse tincidunt, arcu ut ornare dictum, leo turpis vulputate eros, ut suscipit felis erat nec lorem. Morbi placerat ultricies vehicula. Nullam convallis tortor at volutpat ultricies.

Despite the strengths of the national health data system, **there is no systematic collection of detailed data on depression**

Strengthening approach to depression

The services currently available for people with depression do not always communicate effectively, existing more in parallel silos²⁷ that may result in suboptimal care. There is, however, political will to move towards more integrated care.²⁸ France's mental health plan (2018-2023) has several objectives to help improve mental health care, such as developing new quality indicators for mental health and moving digital tools to the forefront of care.^{29, 30} A ministerial delegate for mental health and psychiatry has been nominated to help implement a roadmap developed in 2018.³¹ It is hoped that their expertise in multidisciplinary and integrated care will help transform France's approach to psychiatry.³²

Czechia has 23 psychiatrists per 100,000 inhabitants, higher than the EU average of 17^{33*}

1. Are data on people with depression systematically collected by the health system? **Somewhat**
2. Are data on mental health services being used for planning? **Somewhat**

Quality indicators on mental health is a policy priority

One of the five overarching themes of France's latest mental health plan is the development of new quality indicators (IQSS) on psychiatry and mental health.³³ However, none of the proposed indicators appear to have a specific focus on depression.³⁴ Specific indicators on depression, including patient-reported outcomes and service usage and effectiveness, would help inform health system planning for healthcare decision-makers, as well as providing information for people with depression and their care team to evaluate their treatment choices.

None of the proposed indicators appear to have a specific focus on depression.¹⁶

Data and research related to suicide

The National Suicide Observatory (ONS) was established in 2013 with a four-year mandate, which was renewed in 2018 for another five years.³⁵ The ONS manages data from various sources, coordinates research, promotes dissemination of findings to policymakers and the public, offers recommendations to strengthen information systems and research, and defines the monitoring indicators for the suicide prevention policy.³⁶ Its most recent report, published in mid-2020, examined the relationship between suicide, work and unemployment.³⁷ Since the ONS began its work, the national suicide rate has been reducing.³⁸



Chapter 3

Chapter 3 Reading time 4 min

Somewhat



About this chapter

It is essential that people with depression - along with their families, friends and carers - are actively empowered to participate in depression care plans at all stages.

[Read more](#)

Chapter 3 Reading time 4 min

Engaging and empowering people with depression

Fusce tincidunt felis ut elit venenatis molestie. Donec ut pretium magna. Sed aliquet finibus elementum. Nunc scelerisque interdum libero, in aliquam magna volutpat non. Integer sit amet mollis sem. Aenean dictum erat et magna elementum dignissim. Sed quis sapien tortor. Curabitur nec nunc eget lorem bibendum imperdiet vel a leo. Ut nec nibh ante.

There is increasing acknowledgement of the role of carers and families in supporting people with depression, **but their role needs to be better integrated and supported.**

Efforts are slowly advancing



People with depression may benefit from telepharmacy, including the ability to remotely renew prescriptions, collect medication without bringing in a physical copy of their prescription and have medication delivered to their homes.³⁹ Because depression can cause extreme fatigue and even memory loss, attending an in-person appointment with a physician and delivering a physical prescription to a pharmacy may be beyond the abilities of a person in the midst of a severe depressive episode. Although telepharmacy service is not currently available, it is encouraging that there appears to be an active dialogue in France around it.^{40, 41} More needs to be done to make it as easy as possible for people with depression to renew and access the treatments they need in order to manage and recover from their illness.

4 Are people with depression able to use telephone or online platforms that allow them to renew their prescriptions from home? **No**

Next steps Reading time 7 min

Marie-Jeanne Richard UNAFAM

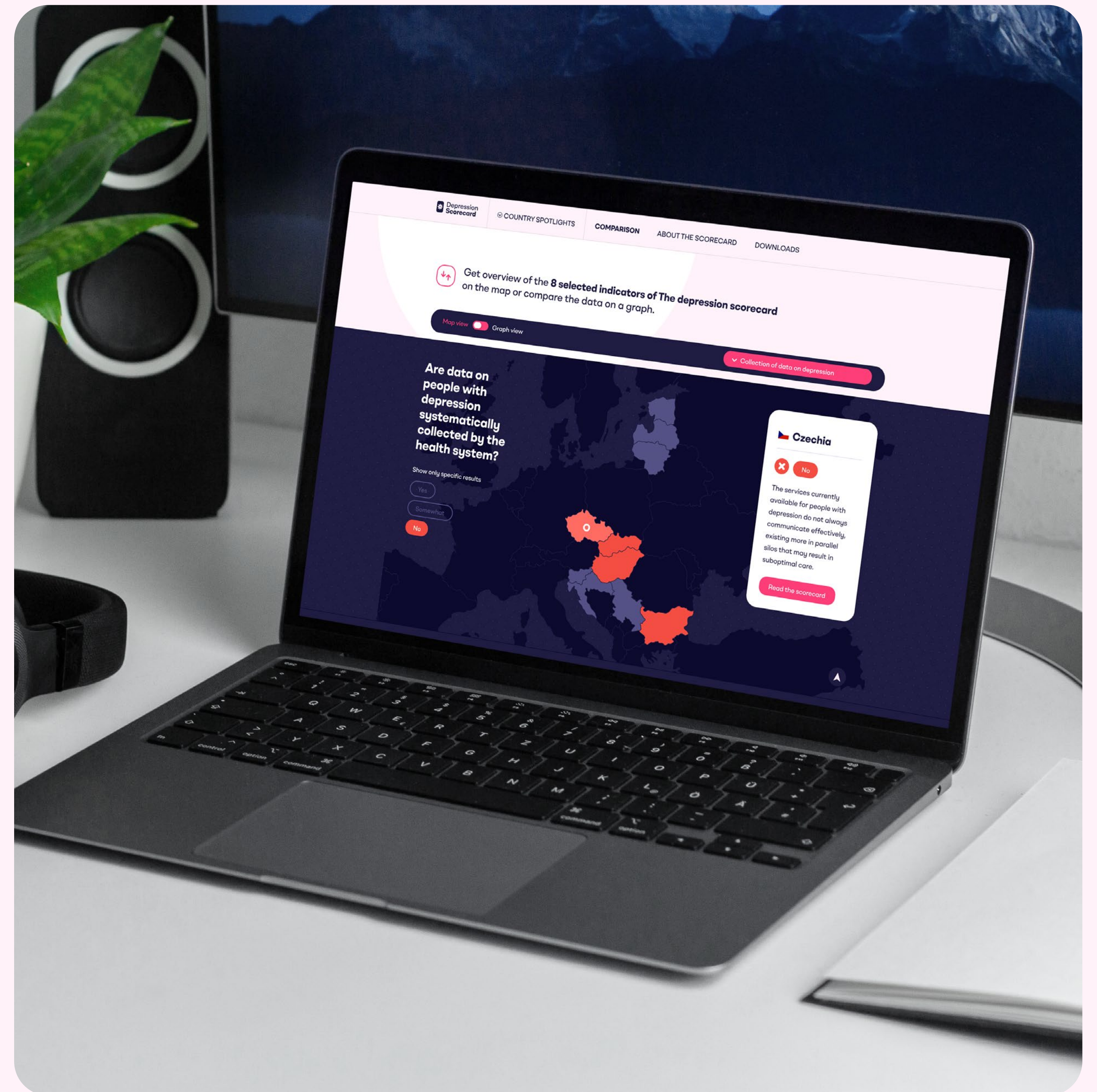
"France has very good doctors, welltrained clinically - that is not where the problem is. The problem exists in knowing that the patient has something to say about their experience, and the important role that carers, family and friends play as well, especially with depression. We need to listen when they raise concerns."



Conclusion and recommendations

France seems to have a vision for improving mental health care, including the desire to move towards integrated and multidisciplinary services that promote shared decision-making and harness the benefits of digital tools. Strengths of current service delivery include the established peer-support programme, Médiateurs de santé pair, which offers compassionate care and empathy to people with depression and other mental illnesses, as well as the comprehensive and free-of-cost care available at CMPs.

Na mieru vytvorený
porovnávací modul dát
prináša rýchly prehľad
výsledkov regiónu na mape
vo vybranej kategórii. Nechýba
filtrovanie dát s preklikom na
kompletný report.





Get overview of the **8 selected indicators of The depression scorecard** on the map or compare the data on a graph.

Map view Graph view

Choose the indicator

Depression in national health plans

Support for mental health in all plans

Collection of data on depression

Using data for planning

Patient and carer involvement

Access to financial aid for carers

Remote access to depression support

Remote access to depression support



Get overview of the **8 selected indicators of The depression scorecard** on the map or compare the data on a graph.

Map view Graph view

Collection of data on depression

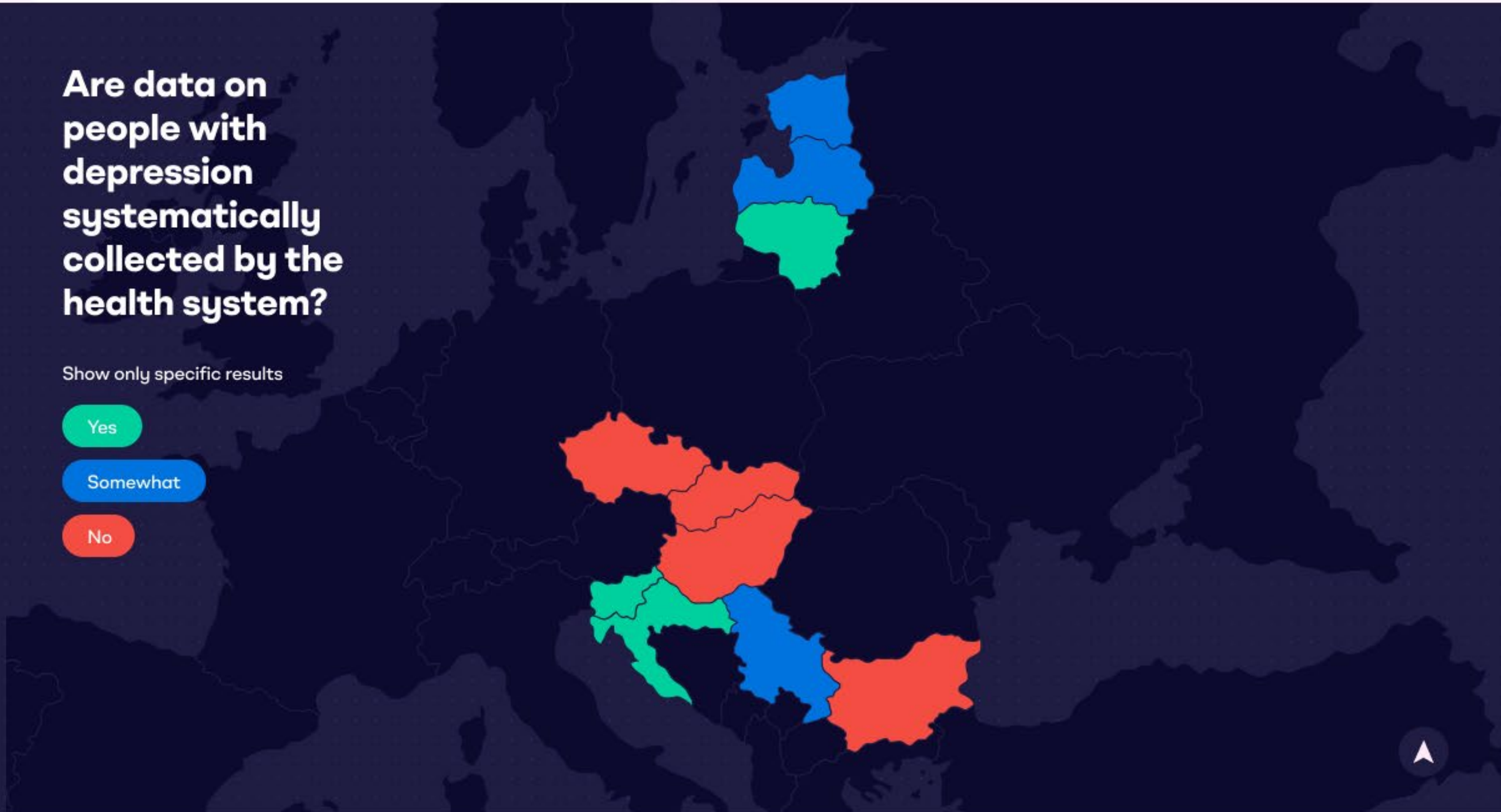
Are data on people with depression systematically collected by the health system?

Show only specific results

Yes

Somewhat

No





Get overview of the **8 selected indicators of The depression scorecard** on the map or compare the data on a graph.

Map view Graph view

Collection of data on depression

Are data on people with depression systematically collected by the health system?

Show only specific results

Yes

Somewhat

No

Czechia

No

The services currently available for people with depression do not always communicate effectively, existing more in parallel silos that may result in suboptimal care.

Read the scorecard

Dáta sme zobrazili aj vo forme **prehľadného grafu**. Pre analytikov a novinárov, ktorí budú výsledky analyzovať z rôznych pohľadov sme pridali filter krajín. Vďaka nemu si môžete vybrať konkrétne výsledky pre špecificky zvolený región.



Get overview of the **8 selected indicators of The depression scorecard** on the map or compare the data on a graph.

Map view



Graph view

Choose the indicator

Depression in national health plans

Support for mental health in all plans

Collection of data on depression

Using data for planning

Patient and carer involvement

Access to financial aid for carers

Remote access to depression support

Remote access to depression support

Select all countries

Slovakia

Czechia

Slovenia

Serbia

Bulgaria

Estonia

Bulgaria

Croatia

Czechia

Estonia

Hungary

Latvia

Lithuania

Serbia

Slovenia

Slovakia



Get overview of the **8 selected indicators of The depression scorecard** on the map or compare the data on a graph.

Map view Graph view

Collection of data on depression

Are data on people with depression systematically collected by the health system?

Show only specific results

Yes

Somewhat

No

Select the countries you want to compare

Deselect all countries

Slovakia

Czechia

Hungary

Croatia

Slovenia

Serbia

Bulgaria

Estonia

Lithuania

Latvia

Bulgaria

Croatia

Czechia

Estonia

Hungary

Latvia

Lithuania

Serbia

Slovenia

Slovakia





Get overview of the **8 selected indicators of The depression scorecard** on the map or compare the data on a graph.

Map view Graph view

Collection of data on depression

Are data on people with depression systematically collected by the health system?

Show only specific results

Yes

Somewhat

No

Select the countries you want to compare

Select all countries

Slovakia

Czechia

Hungary

Croatia

Slovenia

Serbia

Bulgaria

Estonia

Lithuania

Latvia

Bulgaria

Croatia

Czechia

Estonia

Hungary

Latvia

Lithuania

Serbia

Slovenia

Slovakia

Read the scorecard

Are data on people with depression systematically collected by the health system?

Show only specific results

Yes

Somewhat

No

Choose the indicator

- Depression in national health plans
- Support for mental health in all plans
- Collection of data on depression
- Using data for planning
- Patient and carer involvement
- Access to financial aid for carers
- Remote access to depression support
- Remote access to depression support

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Depression Scorecard

ABOUT THE SCORECARD
PRIVACY POLICY & COOKIES

For more information about this scorecard, please contact Jody Tate at The Health Policy Partnership jody.tate@hpolity.com

The Health Policy Partnership
68-69 St Martin's Lane
London WC2N 4JS
United Kingdom

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Collection of data on depression

Czechia

Yes No

The services currently available for people with depression do not always communicate effectively, existing more in parallel silos that may result in suboptimal care.

[Read the scorecard](#)

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Bulgaria

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Czechia

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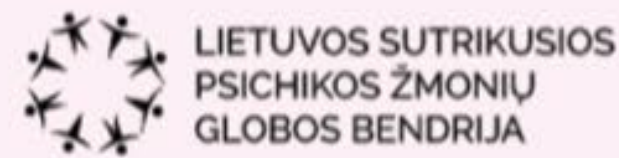
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Premyslená farebná paleta a jasne definované grafické elementy nám pomohli oddeliť jemný úvod do projektu od dátovej časti s výsledkami štúdie a zachovať pritom konzistentnosť.

Čistý dizajn a prehľadná štruktúra vnáša do problematiky starostlivosti o ľudí s depresiou svetlo a pozýva ľudí dozvedieť sa o tejto téme viac.

Na základe výsledkov štúdie sme mobilizovali **viac ako 13 patientskych organizácií** zo všetkých krajín regiónu.



Spoločne sme formulovali **memorandum**, ktoré sme zaslali všetkým politickým lídrom v oblasti zdravotníctva a duševného zdravia.

*** Patient Memorandum**
on the improvement of
depression care in the region
of Central- Eastern Europe
& the Baltics

Depression is the most common mental health condition affecting people today.¹ In the region of Central- Eastern Europe, and the Baltics, around 2.4 million people suffer from depression² and the number is increasing in light of the psychological effects of the COVID-19 pandemic.³

Depression puts a significant burden on society
economy

European countries. Apart from the direct cost of depression represents an even

Výsledky štúdie sme prezentovali aj na **GLOBSEC** fóre, kde si ich vypočuli politickí zástupcovia z celého regiónu, aj generálny riaditeľ WHO, Tedros Ghebreyesus.



A výsledky?

Generálny riaditeľ WHO **dal** **pacientskym organizáciám** **verejný prísľub**, že vytvorí v rámci WHO regionálnu platformu pre starostlivosť o pacientov s depresiou

Politickí zástupcovia z regiónu sa vyjadrili, že **starostlivosť o ľudí s depresiou by mala byť regionálnou prioritou** vzhľadom na socio-ekonomickú záťaž, ktorú toto ochorenie spôsobuje, ako aj na záťaž na pacientov a ich rodiny.

Dokázali sme, že **story-telling založený na silných dátach a ich premyslenej vizualizácii** vie spojiť celý región a má potenciál viesť k reálnym zmenám.

Ďakujeme!

