



“ARGO” - NGO NETWORK FOR PSYCHOSOCIAL REHABILITATION AND MENTAL HEALTH

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The collapse of mental health services in Greece

In Greece, a social and humanitarian crisis is taking place that calls for European collaboration and support. Across Europe, the economic crisis is having devastating effects on the economic, political and social structures that have been constructed in our societies over the last decades. We all know that social inequalities, unemployment or unsafe workplaces, and lack of social support determine our physical and mental health. Individuals already experiencing mental health problems or suffering from psychiatric illness are all the more at risk, finding themselves in a vicious circle where poverty nurtures psychiatric problems and vice versa.

The reform of mental health services in Greece has been evaluated by various groups of experts over the last decade (2001, 2007, 2011) – the latest by Maudsley International / Institute of Psychiatry - and presented in scientific journals (Journal of Mental health, Psichiatria di comunità, L’Information Psychiatrique, Journal of Mental Health Policy and Economics). Despite their many positive remarks underlining the progress accomplished both in policy and in public attitudes towards mental illness, these reports have systematically identified a series of structural problems that were already obvious long before the current economic crisis.

These problems include:

- Lack of specific data regarding the budget for mental health within the total health expenditure
- The Mental Health Law (1999) and Policy decisions are not implemented
- Two systems (old asylums & new community services) are operating in parallel.
- The services system is fragmented, inconsistent and lacks coordination
- There are major gaps in service provision for children and adolescents
- There is inequality regarding access to services, with different types of services in different areas and few areas with a full range of services.
- The Greek Government is not respecting its commitments to the European Union that instigated a large part of the mental health reform policy: this is particularly true for the “*Spidla Agreement*” that was signed in 2009 by the Ministry of Health and the European Commission regarding:
 - o Continuing to reform the system (closing down psychiatric hospitals and building networks of services in the community)
 - o Providing sufficient funding
- Putting into place monitoring and evaluation mechanisms.

Why are we facing now the fear of collapse?

The problem is not only financial or administrative. It is mainly political. In Greece, we are experiencing the “no model” / “no answer” paradigm. There is a complete absence of a systematic public approach to mental health and policy planning, even though the W.H.O. and various scientific associations offer technical support for addressing increased needs in low resource environments (e.g. the WHO mhGap project). Pressure on individuals and the services system (public, nonprofit and private) is immense.

- 1.2 million people are currently unemployed, an unemployment rate of 25,4% (August 2012); unemployment rate for ages 15-24: 58%
- 20.1% of the population is at risk of poverty; 11.6% are severely materially deprived (2010)
- 1 out of 6 Greeks 18-70 (1.2 million people) develop clinically important psychopathology and 1 out of 12 severe psychopathology (600.000 people) (2010)
- In 2011, the one-month prevalence rate of major depression was found to be 8.2%, as compared to the corresponding rate in 2008, which was 3.3%
- 75% of the population with at least one common mental disorder does not receive any treatment at all for their condition (2010)
- 17% increase in suicides, 36% increase in self-reported suicide attempts from 2007 to 2011.

What are the latest threats?

➤ For individuals:

- Reduction or suspension of disability pensions: e.g. i) a proposal for reducing allocations for people with severe disabilities was withdrawn a few hours before the third memorandum was voted; ii) 70.000 people with disabilities have been waiting for up to 7 months without being paid for re-approval of social welfare benefits by the Centers for Certification of Disability
- Reduction in salaries of both people with disabilities and their carers.
- Reduction in service provision for people with disabilities: e.g. for months, transportation of students with disabilities was suspended.
- Serious problems in accessing psychiatric medication due to the conflict between the National Organization for Health Care (EOPYY), pharmacists and pharmaceutical companies that has led to shortages and repeated strikes by pharmacists.
- 50% rise in to the number of people seeking care in *Doctors of the World* clinics (for people with no social security)
- The price of the ticket for accessing hospital care rising from 0€ in 2009 to 25€ in 2014.
- Special committees record and report violations of rights regarding procedures during involuntary admissions of people with mental health problems.

➤ From the public service point of view:

- Psychiatric services are working at 120% of bed capacity.
- Involuntary admissions to psychiatric services have reached 60 % (European mean: 8%)

- Cutbacks in salaries of staff: up to 20%.
 - Restriction of hiring new staff.
 - Mental Hospital administrations and staff complaining about supplies shortages.
 - For political and bureaucratic reasons, less than 4% of available European Union funds for mental health have been used. Consequently, the European Commission has already reallocated more than 230 million to other priority areas. The Greek Government has been officially informed that if the targets concerning the rates of legal commitments and absorption set to be achieved by the end of 2012 have not been entirely and laboriously met, the remaining €50 million will be taken from the mental health budget for Greece.
- Regarding the services provided by nongovernmental – nonprofit organizations (216 units):
- Available budget for 2012: 46m. €, only 49% of the required budget
 - Staff of community mental health services have been left unpaid for up to 6 months
 - In 18 different units, staff have made use of their right to stop work.
 - no funding has been received for running costs for the second half of 2012.
- Private for profit sector problems:
- By 2013, 30-50% of hospital care costs will have to be paid out directly by the patient.
 - Continuous changes to numbers of psychiatric beds in the private sector

Need for action!

We are collaborating with the National Confederation of People with Disabilities, the Pan-Hellenic Federation of Associations for Mental Health and all local Authorities.

Actions taken:

- Official reports have been sent to: the European Commission, the Greek Prime Minister, Greek political parties, the Greek Ombudsman, the Public Prosecutor's Office, the Special Committee for the Protection of Human Rights, and European mental health organizations.
- The World Association for Psychosocial Rehabilitation General Assembly (24 member-countries) voted for a resolution calling for action.
- Legal actions against the Ministry of Health and the Ministry of Finance.
- Petitions, protest rallies, strikes.
- More than one hundred media releases; press conferences at national and European level;

The next action will be a report to European Ombudsman regarding the breach of the Spidla Agreement.

We are calling for coordinated actions by all European associations of users, families, carers and professionals! The aim is to protect our social welfare and security systems at European level. Implementing the UN Convention on the Rights of Persons with Disabilities must be the cornerstone of our efforts.

Resources: National Confederation of People with Disabilities, Medcins du Monde, Ministry of Health – Department of Mental Health, Athens Medical Association, Department of Psychology, Panteion University, Greek Psychiatric Association, Econocou et al. 2011, 2012, Giotakos et al. 2010, Kentikelenis et al 2011, Mavreas et al. 2010, Stylianidis et. al, 2011, 2012