

BOSNIA AND HERZEGOVINA  
FEDERATION OF BOSNIA AND HERZEGOVINA  
FEDERAL MINISTRY OF HEALTH



# THE POLICY AND STRATEGY

FOR THE PROTECTION AND PROMOTION  
OF MENTAL HEALTH (2012-2020.)





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**THE POLICY AND STRATEGY  
FOR THE PROTECTION AND PROMOTION  
OF MENTAL HEALTH  
IN THE FEDERATION OF BOSNIA AND HERZEGOVINA  
(2012-2020)**

**The Policy And Strategy  
for the Protection and Promotion of Mental Health in the  
Federation of Bosnia and Herzegovina  
(2012-2020)**

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## FOREWORD



More than 450 million people suffer from mental disorders, and it is assessed that every fourth person might have certain problems with mental health during their life. According to the forecasts of the World Health Organization, depression will be the second cause of overall illnesses and one of the leading public health problems by 2020.

If in addition to these global trends, we also consider specific risk factors for the worsening of mental health of the population of the Federation of Bosnia and Herzegovina, such as the war period traumas, the difficult socio-economic situation, then we have clear indicators that we are facing numerous challenges when it comes to mental health protection of the population of the Federation of Bosnia and Herzegovina.

The mental health protection reform in Bosnia and Herzegovina started in 1996 by focusing on the community care, as opposed to the approach which had mostly been based on the traditional hospital treatment of persons with mental disorders, so that significant results have been achieved in this sense.

However, the health system of the Federation of Bosnia and Herzegovina is facing numerous difficulties that hinder further implementation of reforms in this direction, and at the same time we have higher needs of the population for services in mental health protection.

That is sufficient evidence of the need for a strategic approach to mental health protection of the population in the Federation of Bosnia and Herzegovina. By drafting and adopting this document, we have defined strategic directions of operations over the coming period, and all this for the purpose of continuing the reform and further improvement of the quality and availability of mental health protection services for all citizens of the Federation of Bosnia and Herzegovina.

The mental health protection strategy in the Federation of Bosnia and Herzegovina specifies operational directions that will ensure the establishment of a system promoting mental health, preventing mental disorders, early detection and action, psychological and sociological rehabilitation and recovery and reduction of stigma and discrimination. This system enables a more efficient system of mental health services in the community for all citizens of the Federation of Bosnia and Herzegovina.

When we speak about the mental health protection system, the challenges faced by the Federation of Bosnia and Herzegovina are similar to those of most European countries: low allocations of funds for mental health, insufficient recognition of the importance of mental health promotion and prevention of mental disorders and the necessity of multi-sector activities in this field.

Defining policies and strategies is a step further in creating a more efficient system for protection and improvement of mental health and safeguarding of human rights of persons with mental problems and disorders.

The development of high-level services in the field of mental health requires active participation of citizens and cooperation of all relevant service providers and different levels of government.

The Federation of Bosnia and Herzegovina ensures continuous support to service reform in the field of mental health with a focus on community mental health protection service development.

Defining policies and strategies of operation in this document emphasizes the determination of the Federation of Bosnia and Herzegovina to continuously improve the mental health protection system.





***MENTAL HEALTH PROTECTION AND  
IMPROVEMENT POLICY  
IN THE FEDERATION OF BOSNIA AND  
HERZEGOVINA (2012-2020)***



## INTRODUCTION



According to the 2001 report of the World Health Organization, around 450 million people in the world suffer from mental disorders or behavioral disorders, around 10% of adults have developed, and around 25% of them can develop a mental disorder at any period of their life. Mental disorders are frequent in all countries of the world and they occur evenly in case of all persons irrespective of their age, sex/gender, color of skin, race, nation, socio/economic status and origin. Out of the total global illness burden, 13% relates to mental disorders, and it is expected that by 2030 this burden will amount to 15%. Mental disorders are related to more than 90% of suicides out of a total of one million of suicides committed in the world per year. Also, persons with mental disorders, due to lower immunity, unhealthy life style and behavior, non-compliance with medical treatment recommendations and social obstacles in obtaining treatment, are exposed to a higher risk of contracting physical illnesses. Economic and social costs of mental disorders are high. In developed countries of the world a significant percentage of the GDP is spent on direct treatment costs, with around twice to six times higher indirect costs. In developing countries, families bear a significant part of the economic and social burden and they frequently face the problem of social exclusion and stigmatization. Mental disorders have an impact on the overall functioning of individuals and cause not only emotional suffering but also a deterioration of quality of life, exclusion, stigma and discrimination.

Due to all this, the prevention of mental disorders and improvement of mental health are of key importance for every community. In order to alleviate the burden of mental disorders, it is necessary to focus more on the prevention and improvement of mental health as part of national policies, legislation, management and financing.

Mental health is national capital and crucial for the overall wellbeing of individuals, companies and countries due to which mental health protection has to be a necessary and significant aspect of the overall health protection and public health system. The protection of mental health and reform of mental health institutions require development of partnerships and inspection cooperation, inclusion of the civil society, education, ministries for social issues, ministries of justice, NGOs and the media.

A significant number of inhabitants of the Federation of Bosnia and Herzegovina is suffering from mental problems directly or indirectly or suffering from consequences of mental disorders. War destructions and post-war transition period have led to significant consequences for the demographic and health situation in Bosnia and Herzegovina. Due to all this, the Federal Ministry of Health gives priority to development of mental health protection policy and strategy as compared to a series of other, equally important segments of health protection.<sup>1</sup>

Prior to the declaration of independence and the 1992 war conflict, the mental health protection system in Bosnia and Herzegovina had been based on the hospital care system that included hospital departments as part of general hospitals, psychiatric clinics within three clinical

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*1 Demographic indicators for the Federation of Bosnia and Herzegovina*

*On the territory of the Federation of Bosnia and Herzegovina in 2007, on an area of 26,110,5 km<sup>2</sup>, according to the data of the Federal Institute for Statistics (FZS), there were 2,328,359 inhabitants. The average population density amounted to 89 inhabitants/km<sup>2</sup>. As during previous years as well, the inhabitants of the Federation of Bosnia and Herzegovina belong to the category of regressive inhabitants with a smaller percentage of children aged 0-14 (18.1%) as compared to previous years, and with an increase in the percentage of persons aged 65 or above (14.1%). As regards sex composition, women constituted 51% of inhabitants. In 2007, 21,715 children were born on the territory of the Federation of Bosnia and Herzegovina, or 113 more than in 2006. 19,428 inhabitants died in the same period, and 193 of them were nursing children. The Federation of Bosnia and Herzegovina has been ranked among low birth rate countries for a longer period of time. In 2007, the birth rate amounted to 9,3‰, i.e. was identical to the one from 2006. The rate of general mortality had the average value of 8,3‰ and it has been slowly and continuously growing over the past years, as a consequence of population aging. The rate of nursing children mortality was low in 2007, amounting to 8,9‰, and was somewhat lower than in 2006, including significant differences among cantons (from 3,6‰ in Posavina Canton to 17,3‰ in Bosna-Podrinje Canton). As a result of birth rate and fertility decrease and slight mortality increase, the natural population increase is declining and has an expressed negative value (1,0‰ in 2007) leading to natural depopulation, i.e. a higher number of deceased than born persons. Socio-economic indicators for the Federation of Bosnia and Herzegovina:*

*The unemployment rate was high in 2007 and it amounted to 47.24%. Out of the total number of population of working age in the Federation of Bosnia and Herzegovina, 42.3% of them are women, and only one third of them (29.2%) was employed. The annual average of the number of employed persons in the Federation of Bosnia and Herzegovina in 2007 is higher than during past years, there were 413,676 registered employed persons, which is an increase of 6.2% as compared to last year. However, in the same period there were 370,459 of unemployed persons or 4.3% more than in 2006. However, the situation is further complicated by the fact that the number of unemployed persons in the Federation of Bosnia and Herzegovina increased by more than 80,000 in the period 2001-2007 and this phenomenon was present in all cantons. The average net salary in the Federation of Bosnia and Herzegovina increased in 2007 as compared to the year before and it amounted to KM 662.10, but the amount of the value basket of the necessary products increased at the same time and it amounted to KM 508.65 in 2007. The GDP has been continuously increasing over the past years, and in 2007 it amounted to KM 4,821 per capita, which is an increase of 12.9% as compared to 2006.*

*Mental health indicators for the Federation of Bosnia and Herzegovina:*

*Mental disorders represent an important public health problem due to a possible chronic development and significant participation in the use of health protection. The most frequent illnesses registered in the primary health care are neurotic, stress-related and somatic disorders (41,3%). Mental health care provision to the population is particularly important due to the low socio-economic status of the population, continuous increase in unemployment rates and poor life habits (alcoholism, psychotropic substances). (Source: Institute for Public Health of the Federation of Bosnia and Herzegovina).*

centers, large psychiatric hospitals such as "Jagomir", "Sokolac" and "Domanovići", the psychiatric colony "Jakeš" near Modriča, Institution for Alcoholism and Other Toxicomanies in Sarajevo, clubs of treated alcoholics and neuropsychiatric departments at health clinics.

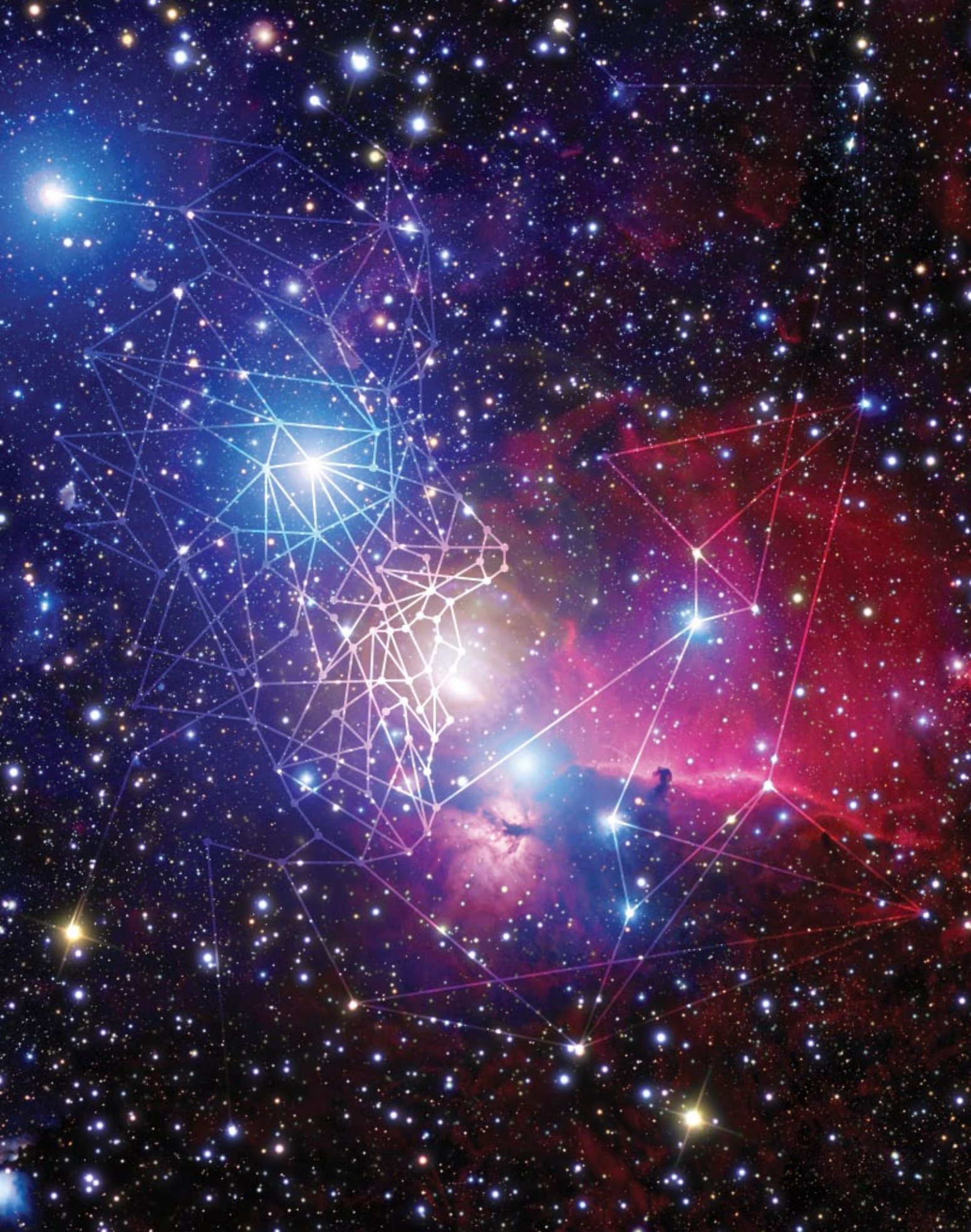
Immediately after the war, the current territory of the Federation of Bosnia and Herzegovina disposed of 1,547 beds at neuropsychiatric institutions that were mostly occupied by psychiatric patients taken care of by 196 specialists in neuropsychiatry, 485 nurses and a relevant number of senior medical nurses. During that period, mental health services included very few clinical psychologists, social workers and occupational or work therapists, and the focus and basis of the overall system of psychiatric protection were based on psychiatric institutions, and only partly on rehabilitation and reintegration of persons suffering from psychic disorders. The role of the community in the implementation of mental health and support to persons with mental disorders and problems was unknown or non-existent.

The war on the territory of Bosnia and Herzegovina (1992-1995) had consequences not only on the health state of the population but on the overall health system, too. War damages impacted also psychiatric services, so that the health protection system was significantly damaged throughout the country, and in some areas even completely destroyed.

In 1995, the Dayton Peace Agreement established entity administrative units, the Federation of Bosnia and Herzegovina and Republika Srpska, which were given the responsibility of organizing health protection of the population. The health protection system for the population, and therefore also the mental health protection system in the Federation of Bosnia and Herzegovina is decentralized in such a manner that cantons as administrative units assume the responsibility for ensuring health protections services for the population of cantons within the health policy of the Federation of Bosnia and Herzegovina in coordination with the Federal Ministry of Health.

During the war on the territory of the Federation of Bosnia and Herzegovina, several remaining mental health services, with the assistance of international organizations, constituted the nucleus of the new decentralized and deinstitutionalized mental health protection system. In 1994, the local experts, with the support of the World Health Organization (WHO) and the then Ministry of Health of Bosnia and Herzegovina designed and implemented the project "Regional Model of New Mental Health Organization Structure". The main elements of this model were coordination, data gathering, education and retraining of professionals at all levels and the promotion of new principles and a new approach towards the organization of mental health services. Based on the positive







local experiences from this project and based on good practice and positive international experiences, the Federal Ministry of Health initiated activities aiming at the development of a comprehensive national mental health protection and improvement plan in 1996. These activities were included in the mental health service reform by drafting and implementing short-term and long-term projects of establishing and developing mental health protection system based on community care principles.

The establishment of care system reform and change of context of mental health service provision started in 1996 with the design and implementation of the project "Physical and Psycho-Social Rehabilitation of War Victims in Bosnia and Herzegovina". The project was supported by the World Bank, WHO, SWEBiH, HealthNet International, and it was implemented in several phases. The reconstruction was implemented and the infrastructure of 38 mental health centers in primary health protection was adjusted during the first phase, their role was defined, standards were designed, and the critical mass of professionals for reform support was created. During the coming phases, the activities focused on strengthening the new system through the promotion of new services, promotion of mental health, strengthening of mental health center management, adoption of legislation and regulations. Particular activities were directed towards protection of human rights of persons with mental disorders, which also resulted in the adoption of the Law on Protection of Persons with Psychological Difficulties in 2002 and establishment of associations of users. A crucial change of the context of provision of mental health services implied limited use of psychiatric hospital beds, introduction of a network of mental health centers, development of other services in the community, a multi-disciplinary approach and team work and establishment of inter-sector cooperation. The goals of these processes were to build effective, efficient and high-quality services for mental health protection that will be integrated in the primary health protection system and meet the needs of the users and be readily available for most of the inhabitants in the areas they cover.

The today reformed mental health services system in the Federation of Bosnia and Herzegovina ensures services in the field of mental health through the network consisting of 31 centers for community mental health. Every mental health center disposes of 10 psychiatric beds at the psychiatric departments of general hospital of the canton it belongs to and is aimed at taking care of patients in crisis. Mental health services at the secondary and tertiary level are provided at psychiatric clinics of clinical centers in Sarajevo, Tuzla and Mostar, psychiatric hospital in Jagomir and at 9 psychiatric departments of cantonal hospitals (694 beds). Also, some psychiatric patients

are accommodated at social protection institutions together with persons with special needs. According to a special report of the Office of the Ombudsman for Human Rights in Bosnia and Herzegovina, the institution for accommodation of mentally challenged persons "Drin" in Fojnica includes 520 users, the institution for accommodation of mentally challenged persons "Bakovići" Fojnica 375 users, the institution for protection of children and youth in Pazarić 384 (out of this number, there are only 20 minors) and the Center for Accommodation of Old and Weak Persons and Homeless Persons "Duje" in Doboj-Istok 101 persons with mental disorders (out of a total of 324 users).

The existing mental health service reform in Bosnia and Herzegovina served as a good example for other countries of South-east Europe, and Bosnia and Herzegovina also became the leader of the six-year mental health project as part of the Stability Pact as a good example of practice in the region in 2002. Since 2002, the activities in the field of mental health have followed the goals of the regional project of the Stability Pact for Southeast Europe "Enhancing Social Cohesion through Strengthening Community Mental Health Services". Further strategic activities for the development of reformed community mental health services were implemented in the Federation of Bosnia and Herzegovina under this project.

The Federal Ministry of Health, with the support of the project of the Stability Pact for Southeast Europe, the Swiss Development and Cooperation Agency, and in cooperation with the Ministry of Health and Social Protection of Republika Srpska, designed a research project in 2008 entitled "Analysis of Situation and Assessment of Mental Health Center Needs in Bosnia and Herzegovina". The results of the implemented analysis point to the fact that the existing network of mental health centers cannot meet the increasing needs of the population and the deficiency in the management and financing of mental health centers, insufficient standards, regulations applicable to services and other legislation applicable to mental health center operations, poor human resources management, poor inter-sector cooperation, insufficient cooperation with other mental health institutions and insufficient participation of the civil society.

Data obtained in the conducted analysis were the basis for drafting revised mental health policies and mental health protection strategies in the Federation of Bosnia and Herzegovina. The revised mental health policy will be the framework for further process of strengthening the health system institutions that will be available and efficient in the early detection of mental problems and disorders, early intervention and provision of a comprehensive treatment of persons with mental disorders and strengthening of community mental

health institutions for support of persons with mental disorders for the purpose of their participation in the life of a community promoting the recovery. The mental health policy ensures support for the system in promoting mental health, prevention of mental disorders, reducing stigma and discrimination of persons with mental disorders, improvement of treatment and achieving recovery from mental disorders. This will ensure requirements for overcoming the current processes of transinstitutionalization and strengthening the process of deinstitutionalization.

Social care of mental health protects and improves exercise of human rights and ensures meeting of needs of the population for preserving mental health, especially in case of children, teenagers, elderly and other vulnerable groups.

### Organization of institutions

The Federation of Bosnia and Herzegovina will advocate strengthening of primary health care with a special focus on the development of community mental health institutions, without neglecting the development of other levels of mental health protection, and all this in order to reduce inequalities, increasing the availability of services and ensuring continuous mental health protection.

Community mental health institutions ensure the promotion of mental health, prevention and treatment of mental problems and disorders and psycho-social rehabilitation. The key role in ensuring protection is played by mental health centers that should also be the link between the health sector and other sectors in local communities and beyond aiming at establishing of links and facilitating access to other services for the purpose of protecting mental health.

The Federation of Bosnia and Herzegovina will support structural and process adjustment of the current institutions for care of mentally disabled persons into institutions of intermediary type<sup>2</sup> for the purpose of individual psycho-social preparations of users for their inclusion in the community.

### Services

The Federation of Bosnia and Herzegovina will support the development of promotional and preventive activities, modern diagnostics, treatments and psycho-social rehabilitation of persons

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<sup>2</sup> *An intermediary institution is an institution engaging in mental health protection, occupational therapy, professional rehabilitation and other types of rehabilitation treatments for the purpose of ensuring support for users and aiming at social inclusion after the completion of hospital treatment.*

with mental problems and disorders at the level of community institutions. Particular attention will be devoted to development of services for vulnerable, gender and age specific groups. Services provided by multidisciplinary teams will be available, comprehensive, of high quality, continuous, relevant and evidence-based.

### **Human resources**

The Federation of Bosnia and Herzegovina will support the development and planning of human resources in the health sector, but also in other sectors, as well, for the purpose of achieving high-quality services and meeting the needs of citizens in the field of mental health protection.

Human resources planning will be based on the true needs of the community and will include mental health protection institutions, public health institutes and the competent ministries and services financiers..

### **Management**

Having in mind the importance of management for the purpose of self-sufficiency, efficiency and effectiveness in mental health protection, the Federation of Bosnia and Herzegovina will continuously work on the improvement of management skills of all stakeholders participating in mental health protection.

### **Quality**

Mental health service provision system will be efficient, acceptable and evidence based.

For the purpose of raising the quality of health services at all levels, the Federation of Bosnia and Herzegovina will work on establishing service safety and quality standards, introduction of clinical guidelines and directives, and accreditation of institutions providing mental health services to the citizens.

The health sector will work on the improvement of services contributing to mental health protection and improvement together with other sectors.

### **Training**

The Federation of Bosnia and Herzegovina will initiate numerous



activities for the purpose of informing and educating citizens and raising awareness of the public about the importance of mental health.

The primary goal is to reduce obstacles for mental problem and disorder treatment and mental health protection by raising awareness about the frequency of mental disorders, possibilities for treatments, recovery process and human rights.

Continuous training provided to the public will reduce stigma, discrimination and social exclusion of persons suffering from mental problems and disorders, and increase the use of mental health services.

At the same time with raising the awareness of citizens of all age groups, there will be continuous efforts to improve expertise and skills of multi-disciplinary expert teams and all other stakeholders from the mental health sector in order to improve the level and quality of health protection.

### **Inter-sector cooperation and coordination**

The Federation of Bosnia and Herzegovina will promote and support the cooperation between local communities, health sectors and other sectors with particular focus on education, labor and social protection, judiciary, NGO and associations of users and families in order to achieve better conditions for mental health protection and social inclusion.

What is particularly expected is the support of all sectors in reintegration, promotion and protection of human rights of persons with mental problems and disorders and support for their families.

The coordination of activities between the sectors and services engaging in mental health protection imposes itself as an imperative for the purpose of the most rational consumption and use of resources, and more efficient protection of mental health.

### **Association of users and families**

The associations of users have been recognized as strong initiators of changes. The Federation of Bosnia and Herzegovina will support strengthening of associations of users and their role in the protection and improvement of mental health. The Federation of Bosnia and Herzegovina will include associations of users and their families in decision making on organization of institutions, assessment of treatment standards, and the development and implementation of mental health policies and strategies. A particularly important role is

expected in advocacy and promotion of changes of attitudes towards persons with mental problems and disorders for the purpose of reducing stigma, discrimination and social exclusion.

Families are frequently primary for health protection and wellbeing of their members, and the exchange of knowledge between health experts, family and users is vital for the development of trust and achievement of a positive treatment result.

Community mental health protection services will ensure the necessary assistance in understanding an illness, acquisition of the necessary knowledge and skills, recognition of signs indicating worsening of the illness, and all this for the purpose of better recovery and reintroduction in the society.

### **Advocacy**

The Federation of Bosnia and Herzegovina will intensively encourage the development of advocacy expertise and skills of all stakeholders in the field of mental health for the purpose of understanding the importance of mental health, introduction of changes in the legislation and policies, reduction of stigma and discrimination, and ensuring resources for the implementation of different activities..

### **Information systems**

The Federation of Bosnia and Herzegovina will work on establishing of a single information system for monitoring population's mental health indicators and the quality of mental health services. Particular attention will be devoted to linkage of all sectors included in mental health protection for the purpose of monitoring and assessing efficiency, rationality and successfulness of activities and planning in the field of mental health.

### **Legislation**

The Federation of Bosnia and Herzegovina will work on the implementation of international conventions and documents in the field of mental health and will continuously ensure compliance with laws and other regulations. The Federation of Bosnia and Herzegovina will actively involve associations of users and their families in all activities of drafting, analysis and adoption of legal documents.

### **Medication**

The Federation of Bosnia and Herzegovina will ensure conditions for the purchase, supply and distribution of efficient, safe and high-quality psycho-pharmaceuticals.

The Federation of Bosnia and Herzegovina will introduce single and obligatory positive lists of efficient, safe and high-quality psycho-pharmaceuticals in compliance with EU standards and financial possibilities.

### **Research**

The Federation of Bosnia and Herzegovina is determined to implement and support continuous mental health research in compliance with its financial possibilities and based on good research practice. Particular attention will be devoted to strengthening research work capacities of both professionals and users.

### **Funding**

The Federation of Bosnia and Herzegovina will ensure the development of a sustainable financing system of mental health services.

The Federation of Bosnia and Herzegovina will continuously insist on greater participation of all stakeholders in the financing of mental health protection and improvement, having in mind that there is no health without mental health, and therefore also no social wellbeing.

Through the system of health protection financing, the Federation of Bosnia and Herzegovina will ensure a relevant scope and structure of services in mental health of standard quality and equal availability in the whole area.

Public health reports, health research and indicators and new scientific and experiential knowledge will be the basis for real allocation of funds for the purpose of improving mental health..

### **Monitoring and evaluation**

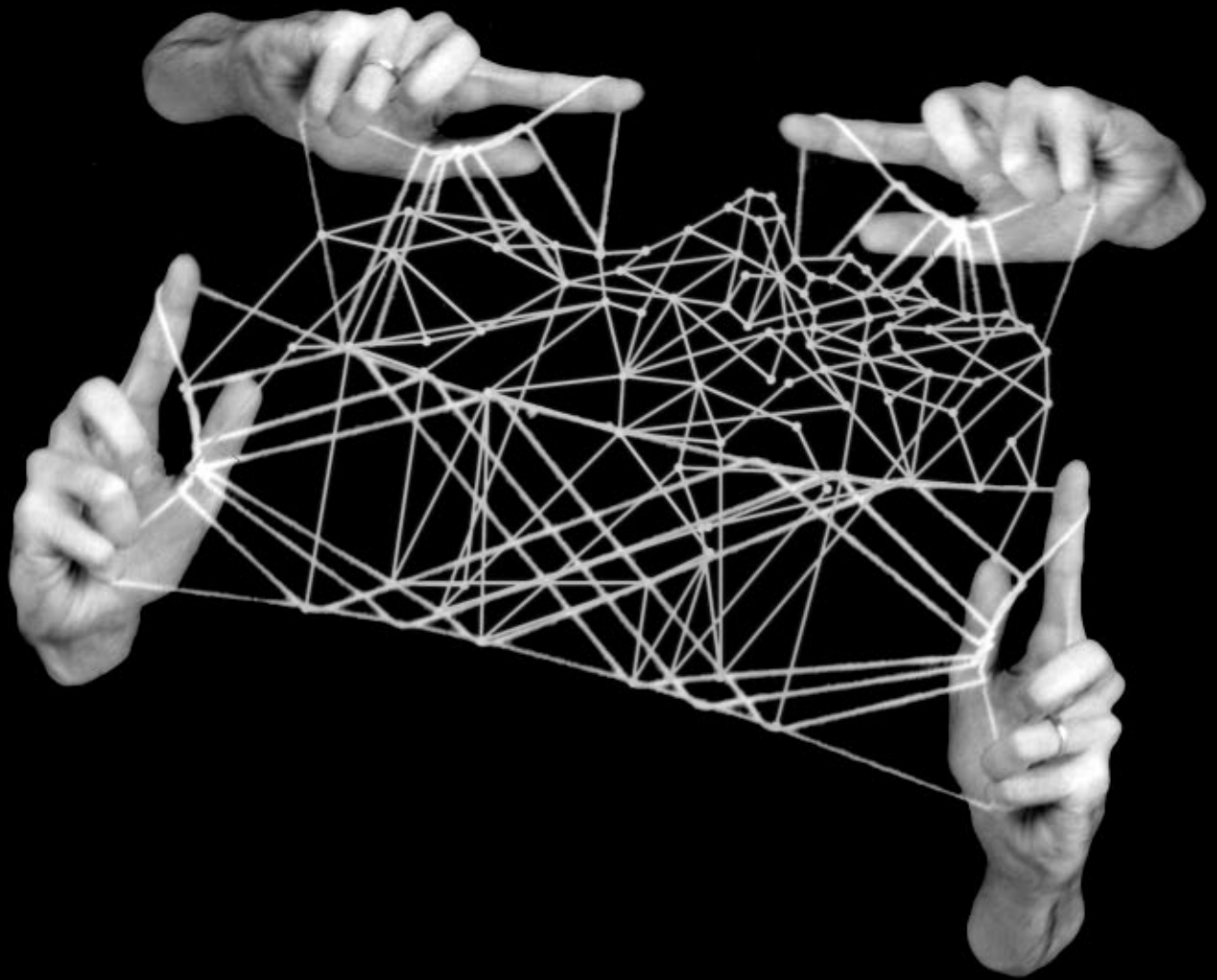
The Federation of Bosnia and Herzegovina will develop a monitoring and evaluation system for the purpose of measuring the successfulness of the mental health protection strategy implementation.

The Federation of Bosnia and Herzegovina will develop a set of key indicators for the purpose of establishing a monitoring and evaluation system for the operations of mental health institutions and institutions and key result indicators.



***MENTAL HEALTH PROTECTION AND  
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*(2012-2020)*

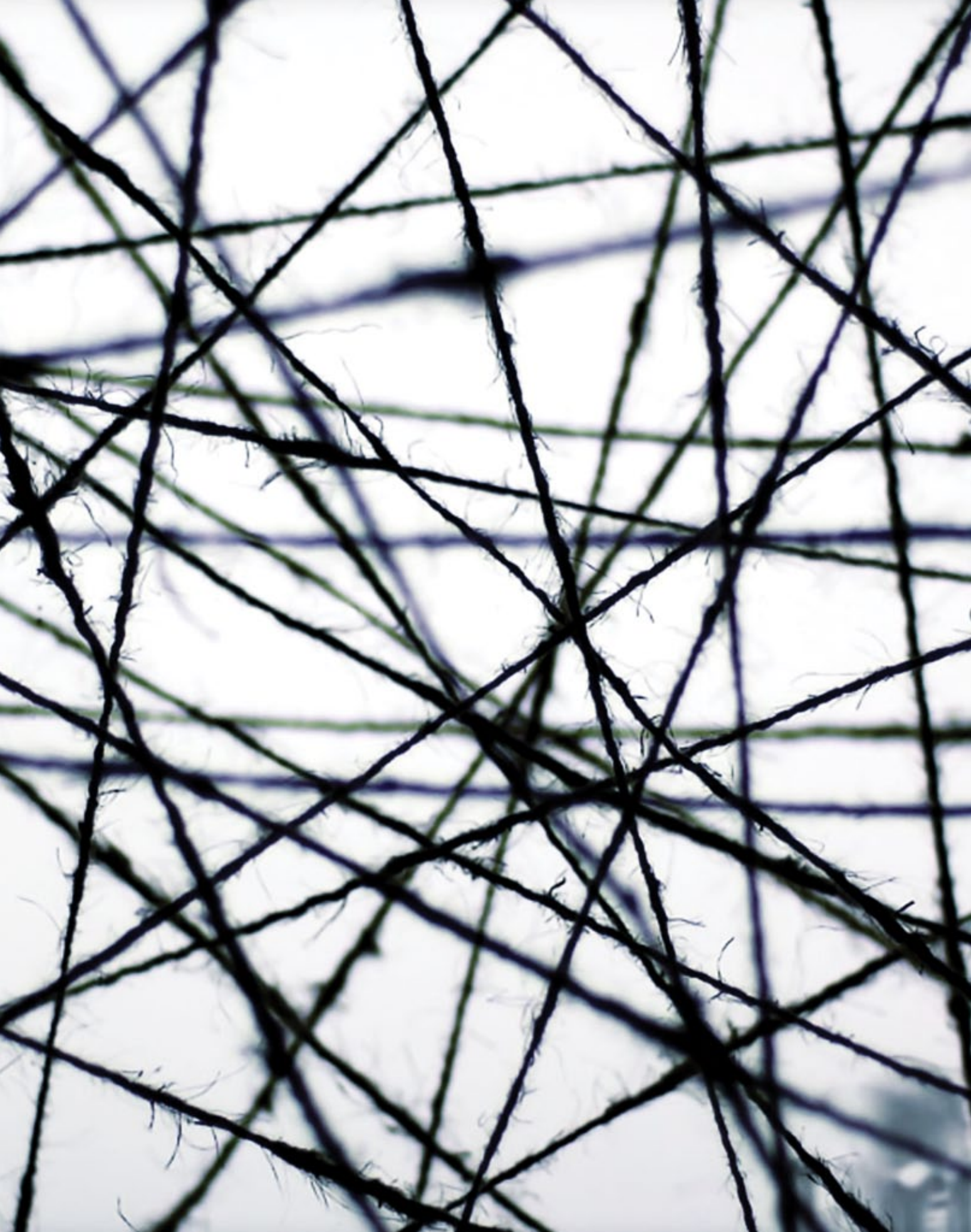




## **VISION**

*A society appreciating and promoting mental health, free from stigma and discrimination and rendering possible full social inclusion of persons with mental problems.*





## VALUES AND PRINCIPLES

Mental health protection strategy is based on basic principles and values that make part of all policies and strategies adopted so far, and as such it should render possible the achievement of the defined vision.

Mental health protection strategy is:

- **Value based:** mental health reforms have to be based on the principles of human dignity, equality, solidarity and professional ethics.
- **Health oriented:** all strategic decisions will be linked to clear goals aiming towards achievement of health benefits. Mental health protection and promotion have to be the primary motive of the whole society.
- **People oriented:** mental health interventions/activities have to deal with citizens' needs, considering their health and health protection expectations through a democratic process. They should render possible that the voice and choice of citizens decisively impact the manner of health services design and provision. At the same time, citizens have to assume their part of responsibility.
- **Quality oriented:** The goal of the strategy will be continuous improvement of health protection quality, including its cost-effectiveness.
- **Based on a sustainable financing system:** The financing of mental health sector should ensure sustainable health protection of all citizens. The basic goal is universal coverage and equal access to mental health protection. On the other hand, that requires efficient use of health resources, whereby governments have to play a crucial role in mental health protection financing system regulation.
- **Primary health protection and community services oriented:** mental health reforms should ensure that health services at all levels protect and promote mental health, and thereby also health in general. They should strengthen the system of joint decision making by users and service providers and promote comprehensiveness and continuity of mental health protection together with other sectors.









## **GENERAL GOAL**

Improvement and protection of mental health of citizens of the Federation of Bosnia and Herzegovina in compliance with European standards and human rights.







## AREAS OF ACTIVITIES

### CONSCIENTIOUS MANAGEMENT

#### *Legislation*



#### General goal:

**Harmonization and adoption of legislation in the field of mental health in compliance with European directives and standards.**

The issue of legislation in the field of mental health must be resolved by using international standards and principles. All relevant principles and regulations from international or European charters, declarations, directives and WHO documents will be incorporated in the legislation.

The associations of users, families and civil society will be included in the preparation of all legal documents and monitoring of their implementation.

#### Specific goals:

- Harmonization of mental health laws and secondary legislation in force with EU standards
- Adoption of missing laws and secondary legislation
- Establishment of committees for protection of human rights of persons with mental problems and disorders.

#### Implementation period

The analysis and harmonization of legislation with EU standards will be completed within three years, at the same time as the adoption of the missing secondary legislation, and primarily those related to standards, norms and nomenclature of services provided by mental health institutions at all health protection levels. Activities related to monitoring of human rights protection will be implemented continuously both on the federal and cantonal level.

#### Institutions responsible

The institutions responsible are the Federal Ministry of Health, cantonal ministries of health and local communities with the participation of all other stakeholders in the field of mental health.

#### Expected results

Legislation harmonized with EU standards and necessary laws and secondary legislation adopted.

## AREAS OF ACTIVITIES

### CONSCIENTIOUS MANAGEMENT

#### *Mental health services management*



#### Goal:

**Strengthening management skills for the purpose of efficient implementation of mental health policies and strategies.**

An important precondition for sustainability, efficiency and quality of services at mental health institutions is enabling managers to manage these institutions. A mental health institution manager is responsible for strategic planning of the institution in cooperation with team members and other participants, human resources management, internal and external coordination. An important obligation of a manager is financial management and raising of funds for the implementation of activities.

Considering the central role of mental health centers in the mental health protection system, the establishment of good managerial coordination and communication with other management structures of health clinics and other health institutions has particular importance.

#### Aims:

- Strengthening strategic management skills
- Strengthening human resources management skills
- Strengthening financial management skills.

#### Implementation period

Continuous

#### Competent institutions

Health management center, education centers at health clinics, Agency for Health Quality and Accreditation of the Federation of Bosnia and Herzegovina (AKAZ).

#### Expected results

Improved management skills of mental health service managers.

## AREAS OF ACTIVITIES

## CONSCIENTIOUS MANAGEMENT

### *Coordination*



#### Goal:

Improvement of coordination and cooperation between all relevant mental health protection sectors.

Coordination is an important pre-requisite for the success of implementation of activities of mental health services. The more relevant stakeholders are included in planning, the higher are the possibilities for a successful implementation of mental health service programs. At the same time it is necessary to include the wider community for the purpose of reducing the stigma and discrimination of persons with mental disorders and their families. The goal is to improve coordination and lead to better planning, implementation, more rational and efficient consumption and use of financial and all other resources.

Strengthening coordination at all levels does not mean taking away of leadership and responsibility from managers or experts in this field, but rather an important step in meeting the community rehabilitation principles.

The goal of the planning and advocating process is to build and strengthen multidisciplinary teams and include all sectors, community and civil society. All partnerships should be formalized through agreements that give a guarantee for a fair and correct relationship and creation of a greater feeling of belonging. This implies activities supporting promotion of cooperation, creation of equal opportunities or chances, improving the quality of life, providing support to persons with mental disorders and problems and engagement of the community for the purpose of their social inclusion and reduction of poverty.

#### Aims:

- Establishment of coordination in the health sector
- Establishment and strengthening of coordination between other sectors
- Establishment and strengthening of coordination with the civil society and associations of users
- Establishment and strengthening of coordination with the local community
- Awareness raising on efficient coordination mechanisms.



### **Implementation period**

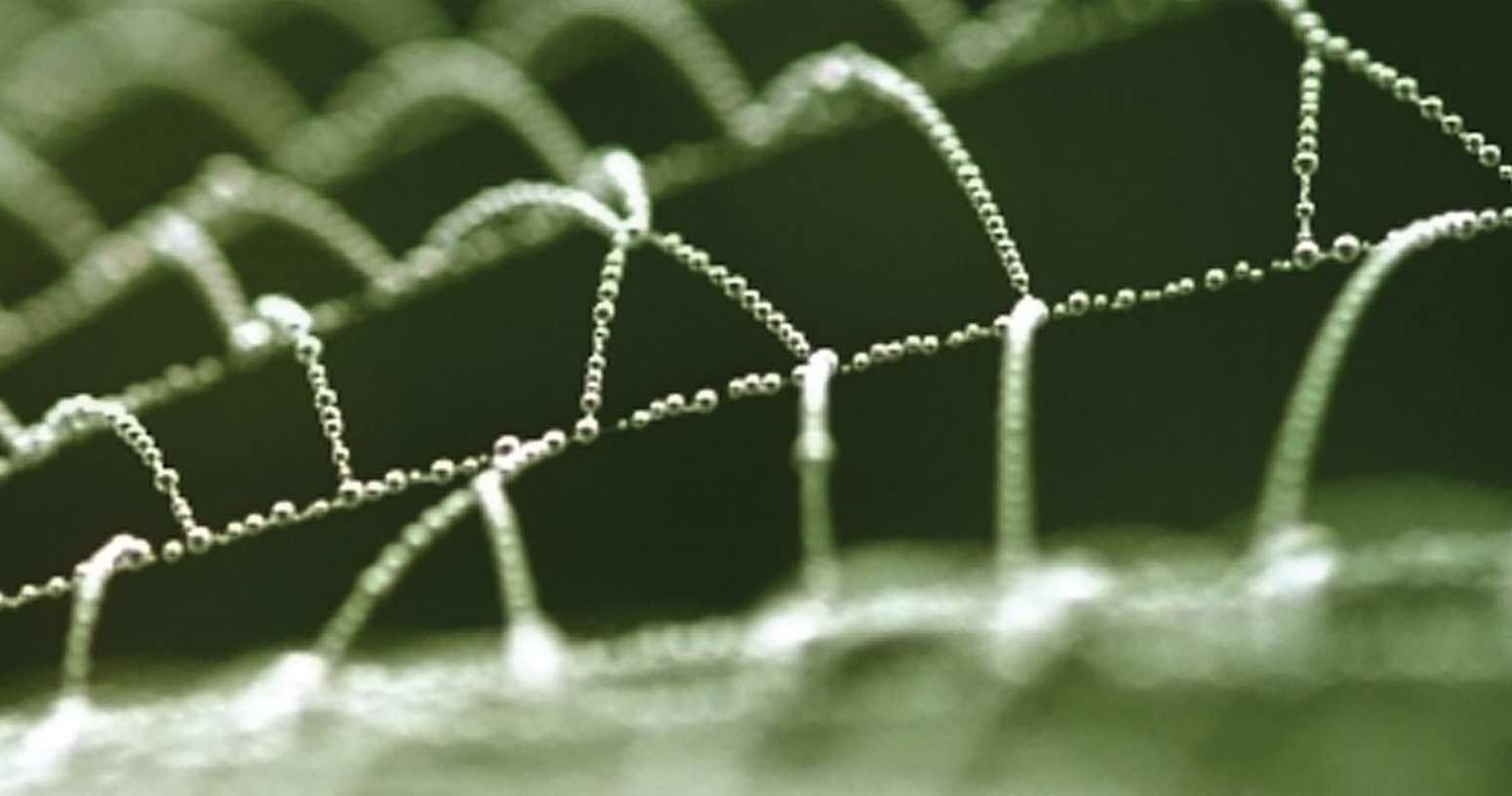
The planned period for the establishment and strengthening of coordination between partners acting in the field of mental health or sectors, the operations of which may have an important impact on the mental health of population, amounts to three years. After the establishment and strengthening of functions, the coordination will be implemented continuously at all administration levels.

### **Institutions responsible**

The institutions responsible are the Federal Ministry of Health, cantonal ministries of health and local communities, with the participation of all other stakeholders in the field of mental health.

### **Expected results**

Established efficient coordination within the health sector and between the health sector and other sectors, including the NGO sector, associations of users and their families.



## AREAS OF ACTIVITIES

### CONSCIENTIOUS MANAGEMENT

#### *Inter-sector cooperation*



#### Goal:

Establishment of active cooperation between policy creators, representatives of the relevant sectors, providers and users of services for the purpose of improving mental health protection and social inclusion.

Inter-sector cooperation is one of the basic pre-requisites for the promotion, prevention and protection of mental health, and it is the key pre-requisite for successful psychological and social rehabilitation.

Inclusion of mental health in other policies or education, social protection, economic, security, sport, culture and other policies is a pre-requisite for creating a better environment for mental health protection of citizens.

The basic pre-requisite for good inter-sector activities is the education of other sectors on the concept of mental health and its importance for the society, establishment of efficient cooperation mechanisms, establishment of clear roles and responsibilities of different sectors in the field of mental health.

When creating the program for vulnerable groups, inter-sector activities and their inclusion in programs such as autism, alcohol abuse, violence, elderly issues programs and the like are particularly important.

The cooperation with the education sector is particularly important, both school and pre-school education sector, with a focus on prevention and early detection of development and behavior disorders, abuse of psychoactive substances and peer violence. The cooperation with the social and economic sector, with a focus on work rehabilitation and social inclusion with mental problems and disorders, is also extraordinarily important.

It is desirable to include in the process and ensure the support of religious communities.

#### **Aims:**

- Raising the level of knowledge of other sectors on mental health and their role in the improvement of mental health
- Defining competences, roles and responsibilities of other sectors
- Creation of an inter-sector network for supporting mental health programs
- Creation of specific programs.

#### **Implementation period**

Continuous

#### **Institutions responsible**

Ministry of Health in cooperation with other ministries at the Government, associations of users and NGOs.

#### **Expected results**

Established efficient inter-sector cooperation and joint operations through different programs contributing to better mental health of the citizens.

## AREAS OF ACTIVITIES

### CONSCIENTIOUS MANAGEMENT

#### Quality assurance



#### Goal:

**Establishment of a quality and safety standards system at mental health institutions.**

Establishment of a quality and safety standards system at all levels of health protection should meet the needs of users and experts by means of evidence-based skills, technology and knowledge.

The desired results are reached by establishing quality, which is very important if we have in mind that high-quality health protection is the right of every user. That becomes particularly important in a period when health protection resources and budgets are limited.

When establishing quality and safety standards at different mental health protection levels, care will be taken to include different interest groups in these processes, and these are primarily users, professionals and managers.

#### Aims:

- Drafting of guidelines and clinical directives on mental health
- Training on quality and safety assurance in the field of mental health
- Implementation of mental health guide
- Accreditation of mental health centers and mental health protection institutions.

#### Implementation period

Continuous

#### Institutions responsible

AKAZ, health institutions, ministries of health, health insurance institutes.

#### Expected results

High-quality, safe, effective and efficient services in the field of mental health.





## AREAS OF ACTIVITIES

## CONSCIENTIOUS MANAGEMENT

### *Information systems*



#### Goal:

**Establishment of a single information system for monitoring mental health indicators of the citizens and provision of high quality services at mental health institutions.**

The introduction of a single information system in the mental health sector as part of the health system will improve the gathering, processing, analysis and use of information on mental health and services and assistance in the planning, quality improvement and development of mental health institutions and services.

#### Aims:

- Development of the mental health institution information system
- Introduction of information and communication technologies at mental health institutions.

#### Implementation period

Three years

#### Institutions responsible

Federal Ministry of Health, cantonal ministries of health, public health institutes, health insurance institutes, health institutions.

#### Expected results

Established single mental health information system.

## AREAS OF ACTIVITIES

### CONSCIENTIOUS MANAGEMENT

#### *Advocacy*



#### Goal:

**Strengthening advocacy skills of all stakeholders in the field of mental health.**

In order for mental health to become the focus of the interest and receive greater attention from all social sectors and wider public, it is necessary to improve public advocacy and implement well-planned public promotion campaigns in the media.

When implementing the advocacy program, it is necessary to include associations of users and associations of families, which are frequently the basic link between different sectors participating in the work with persons with mental problems and disorders, and the main basis and advisers for users of the system.

An important role in raising public awareness is also played by the associations of experts that should be more active in the public and point to discrimination and exclusion of persons with mental problems and disorders, advocating for respect of human rights, initiate and participate in anti-stigma campaigns.

Public advocacy and improvement of rights of persons with mental problems and disorders contributes to better quality and more efficient services designed in compliance with the needs of users.

#### Aims:

- Strengthening associations of users and NGOs in the field of advocacy
- Design and implementation of advocacy programs
- Awareness raising of the media on the importance of mental health.

#### Implementation period

Continuous

#### Institutions responsible

The Federal Ministry of health in cooperation with cantonal ministries, mental health professionals, associations of users and their families, NGOs and the media.

#### Expected results

Improved advocacy skills of all stakeholders in the field of mental health.

## AREAS OF ACTIVITIES

### CONSCIENTIOUS MANAGEMENT

#### *Associations of users and NGOs*



#### Goal:

**Strengthening capacities and skills of associations of users and their families and NGOs for the purpose of strengthening their active role in decision making processes.**

Associations of users, associations of their families and NGOs should be partners to the authorities in decision making and adoption of strategies, to provide practical help and advice and to raise awareness of the public on mental health.

Particular importance should be given to the strengthening of associations of users, associations of their families and NGOs in relation to social inclusion, self-representation, advocacy, reduction of stigma and discrimination and work with population groups at risk.

#### Aims:

- Strengthening of associations of users, associations of families and NGOs by creating and implementing life-long learning programs such as: communication and advocacy skills, project writing and implementation, mental health process recovery and strengthening, social network support for user institutions, social competences and community skills, etc.
- Creating a network of associations of users and NGOs in the field of mental health.

#### Implementation period

Continuous

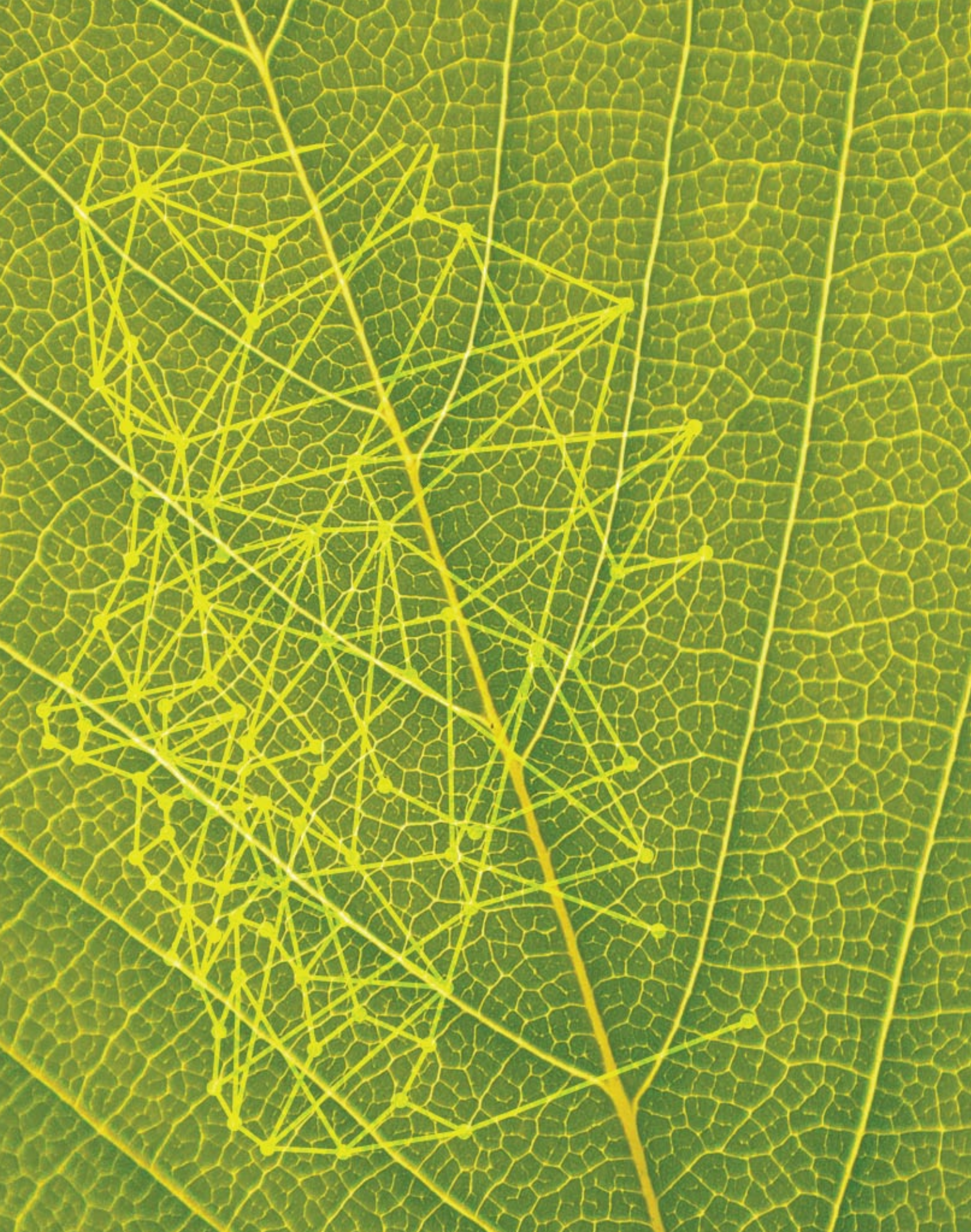
#### Institutions responsible

The Federal Ministry of Health and cantonal ministries of health, associations of users, associations of their families, NGOs and local communities.

#### Expected results

Strengthened associations of users, associations of families and NGOs in the field of mental health and established network.







## AREAS OF ACTIVITIES

### SERVICES

#### *Organization of institutions*



#### Goal:

**Strengthening the network of mental health protection institutions based on community mental health care principles.**

The basic goal is to continue strengthening the community mental health protection model within primary health protection that will ensure reduction of inequality in the availability of services and render possible continuity of health protection through all health system levels. The goal of such a form of community care is improvement of the quality of life of persons with mental problems and disorders and their families in compliance with their individual needs.

In addition to strengthening of primary health protection institutions that include community mental health centers, it is necessary to continuously work on further processes of deinstitutionalization both in the health and social sector.

Particular attention will be devoted to structural and process adaptation of the current institutes for persons with mental disabilities into intermediary type institutions. These institutions will deal with mental health protection, occupational therapy, professional rehabilitation and other types of rehabilitation treatments for the purpose of supporting users in social inclusion upon completion of hospital treatment.

#### Aims:

- Strengthening of capacities of community mental health protection institutions
- Strengthening horizontal and vertical work coordination of mental health centers and other health institutions
- Development of alternative models for taking care of persons with mental problems and disorders
- Better information for health professionals on mental health and organization of mental health institutions
- Support to the transformation of institutes for taking care of persons with mental disabilities into intermediary institutions



### **Implementation period**

Continuously in compliance with the needs of the population and local community.

### **Institutions responsible**

Cantonal ministries of health in cooperation with other cantonal ministries and the support of the local community and federal ministries.

### **Expected results**

Strengthened network of mental health protection institutions based on community mental health care principles.

## AREAS OF ACTIVITIES

### SERVICES

#### *Development of services*



#### Goal:

**Development and improvement of existing services and introduction of new services at mental health institutions.**

A precondition for the development and improvement of existing and introduction of new services is the audit of standards and norms (nomenclature) of services in the field of promotion, prevention, diagnostics, treatment and rehabilitation at all mental health protection levels.

Particular attention will be devoted to the development of services for vulnerable, gender and age specific groups.

Services provided by multi-disciplinary teams will be available, accessible, comprehensive, of high quality, continuous, relevant and evidence-based.

#### Aims:

- Review of standards, norms and nomenclature of services at mental health protection institutions
- Improvement of the quality of existing services
- Introduction of new services in the field of mental health

#### Implementation period

Review of standards, norms and nomenclature of services at mental health protection institutions will be completed within a year, and the improvement of quality of existing services and introduction of new services in the field of mental health will be continuously implemented.

#### Institutions responsible

Federal Ministry of Health in cooperation with cantonal ministries and participation of mental health institutions, AKAZ.

#### Expected results

Improved and expanded services at mental health institutions.





## AREAS OF ACTIVITIES

## RESOURCES

### *Human resources*



#### **Goal:**

**Adequate planning and strengthening of human resources at mental health institutions.**

Human resources planning will be based on true needs in the community and will include mental health protection institutions, public health institutes, the competent ministries and financiers of services.

It is necessary to continuously invest in human resources development, improvement of working conditions, improvement of motivation, provision of financial and non-financial incentives, ensuring continuous education and systemic support that includes intervention, supervision, prevention of professional burn-out, etc.

When planning and investing in human resources, it is necessary to pay particular attention to the availability of staff in rural and urban areas and areas with low socio-economic status.

#### **Aims:**

- Human resources planning at mental health institutions based on needs and in compliance with standards
- Continuous investment in human resources development and improvement of working conditions
- Ensuring systemic support to professionals in the field of mental health with a special focus on supervision

#### **Implementation period**

Continuous activity

#### **Institutions responsible**

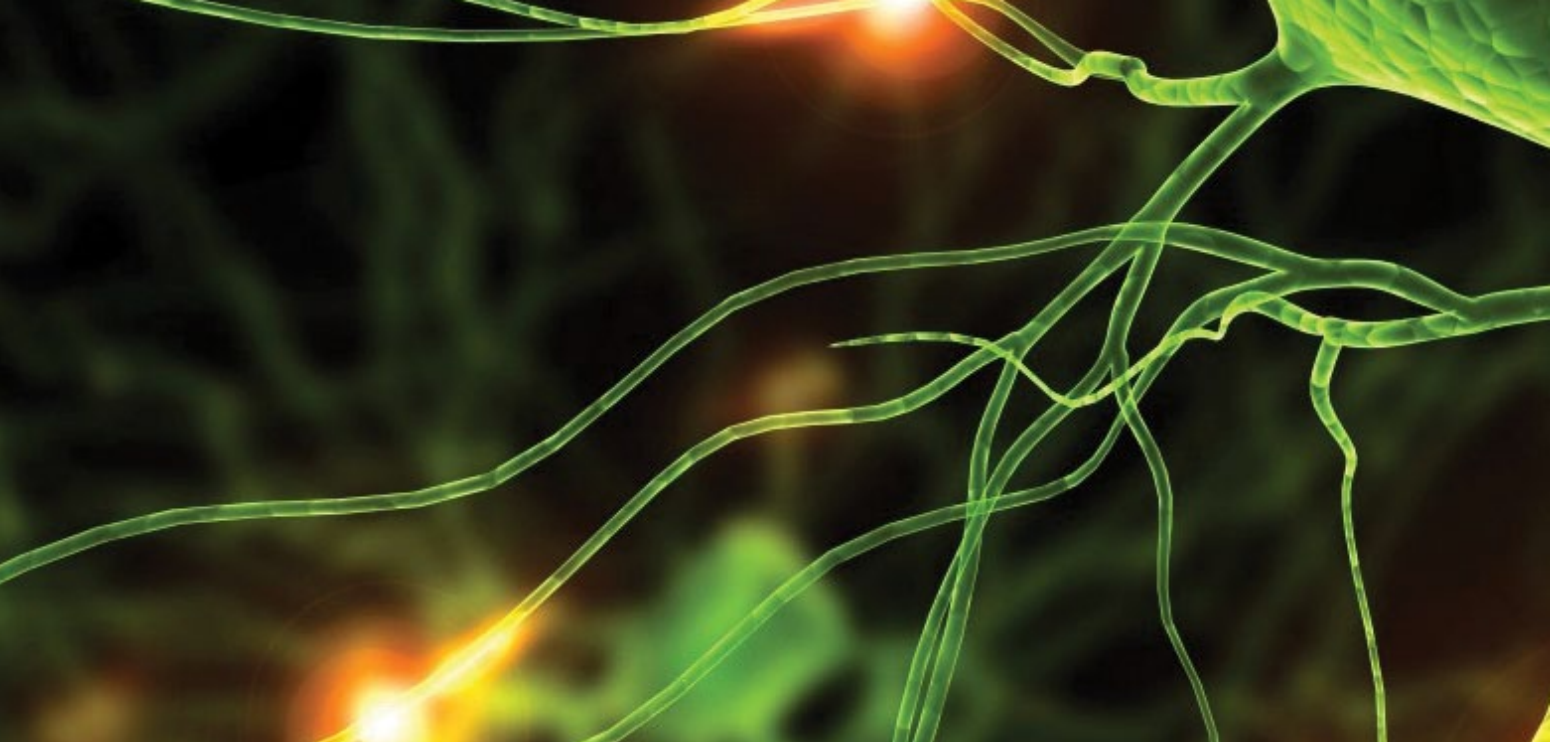
The Federal Ministry of Health and cantonal ministries of health in cooperation with public health institutes and mental health institutions.

#### **Expected results**

Improved human resources planning in the field of mental health

Improved occupational protection system

Introduced mechanisms for improving working motivation



## AREAS OF ACTIVITIES

### RESOURCES

#### *Financing*



#### **Goal:**

**Creation of an efficient, effective and sustainable mental health protection financing system.**

The health protection financing system will ensure the relevant scope and structure of mental health services, of standardized quality and equal availability throughout the territory.

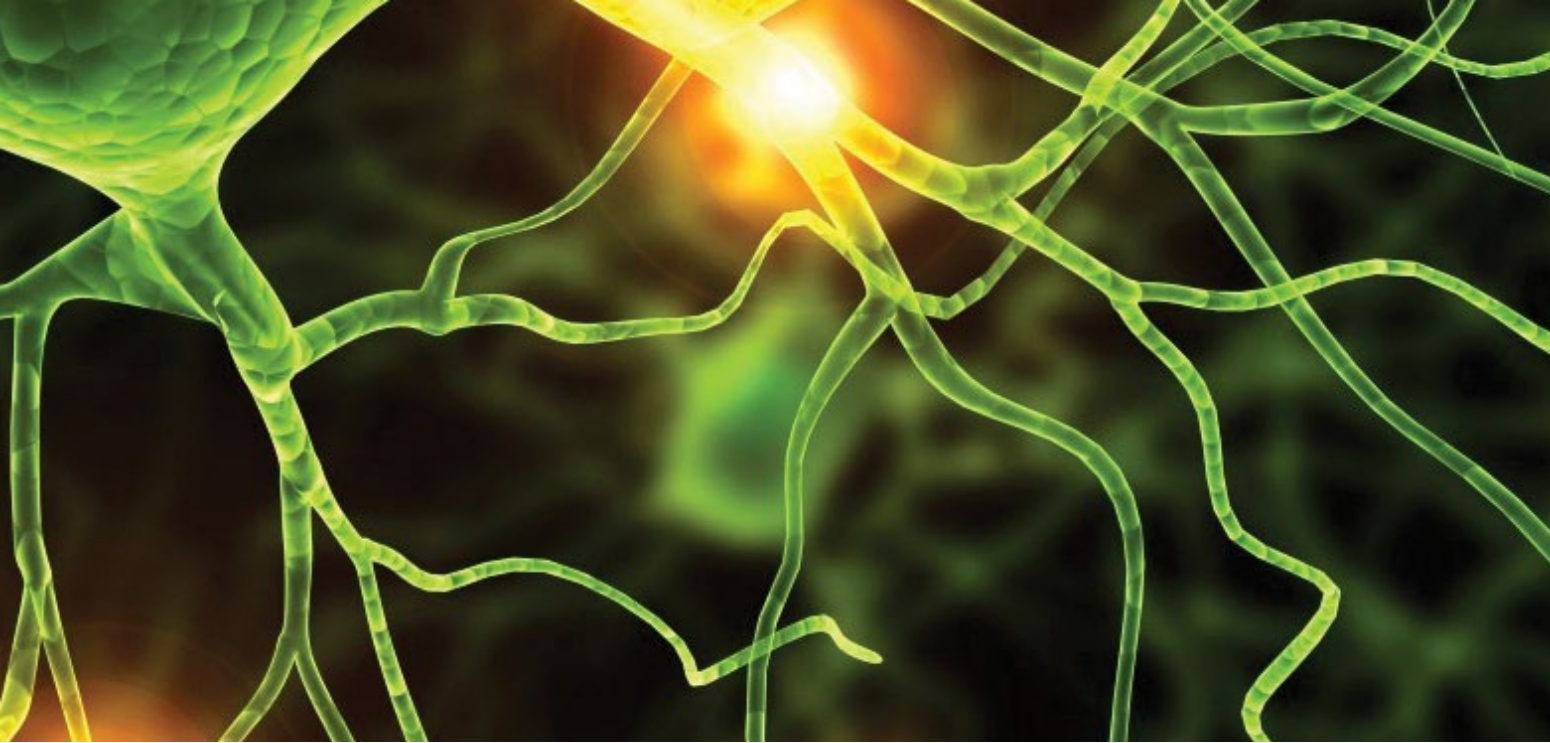
Real allocation of funds for the purpose of improvement of mental health will be conducted based on public health indicators, research and new scientific and experiential knowledge.

It is necessary to establish mechanisms for the allocation of adequate funds from other sectors for the mental health improvement program support.

It is necessary to include the local community, economic operators and other stakeholders in the financing of mental health improvement programs.

#### **Aims:**

- Increase in the allocation of funds for activities in the field of mental health within the available funds



- Keeping record of the consumption of funds for mental health services
- Increase of percentage of other sectors in the financing of mental health services
- Defining budgets at the cantonal and municipal level for support to associations of users

#### **Implementation period**

Continued activity

#### **Institutions responsible**

Federal Ministry of Health in cooperation with cantonal ministries of health and health insurance institutes.

#### **Expected results**

Monitoring of consumption in the field of mental health and creation of new sources of financing for mental health services.





## AREAS OF ACTIVITIES

### MEDICATION (purchase and distribution)

#### Goal:

Ensuring purchase, supply and availability of efficient, safe and high-quality psycho-pharmaceuticals at all health protection levels.

In compliance with EU standards and financial possibilities, single and obligatory positive lists on efficient, safe and high-quality psycho-pharmaceuticals will be created.

When prescribing medication, particular care will be taken of compliance with good prescription practice.

#### Aims:

Creating possibilities for the expansion of medication lists in compliance with international recommendations

Monitoring of side effects of psychotropic medication

Continued education of health professionals in compliance with good prescription practice and modern treatment trends.

#### Implementation period

Continuous

#### Institutions responsible

Federal Ministry of Health in cooperation with health insurance institutes, medication agency and public health institutes.

#### Expected results

Better availability of high-quality, efficient and safe psychotropic medication in compliance with good prescription practice.



## AREAS OF ACTIVITIES

### RESEARCH, MONITORING AND EVALUATION



#### Goal:

Implementation of continuous monitoring and evaluation and periodic research for the purpose of improving the planning of policies and activities that will contribute to the improvement of mental health protection.

Monitoring and evaluation and periodic research should become regular activities both at the federal level and at lower levels such as cantons or communities themselves. The results will be used as the basis for devising strategies and interventions in the field of mental health.

Monitoring and evaluation ensure monitoring of dynamics of changes and are a basis for adequate planning.

The users of mental health services should always be included in the activities of monitoring and evaluation.

A significant part of activities in the field of mental health is implemented through local communities, associations of users and NGOs. For the purpose of knowing the effects of implemented activities, it is necessary to establish monitoring and evaluation mechanisms for the mentioned stakeholders.

#### Aims:

- Defining a set of process indicators, implementation and results in compliance with international standards and local needs
- Regular monitoring and reporting in the field of mental health in compliance with WHO and EU recommendations
- Introduction of regular periodic research in the field of mental health
- Monitoring of implementation of the European Declaration on Mental Health (Helsinki, 2005),
- Monitoring and evaluation of programs and projects implemented through NGOs, associations of users, local communities and other sectors

#### Implementation period

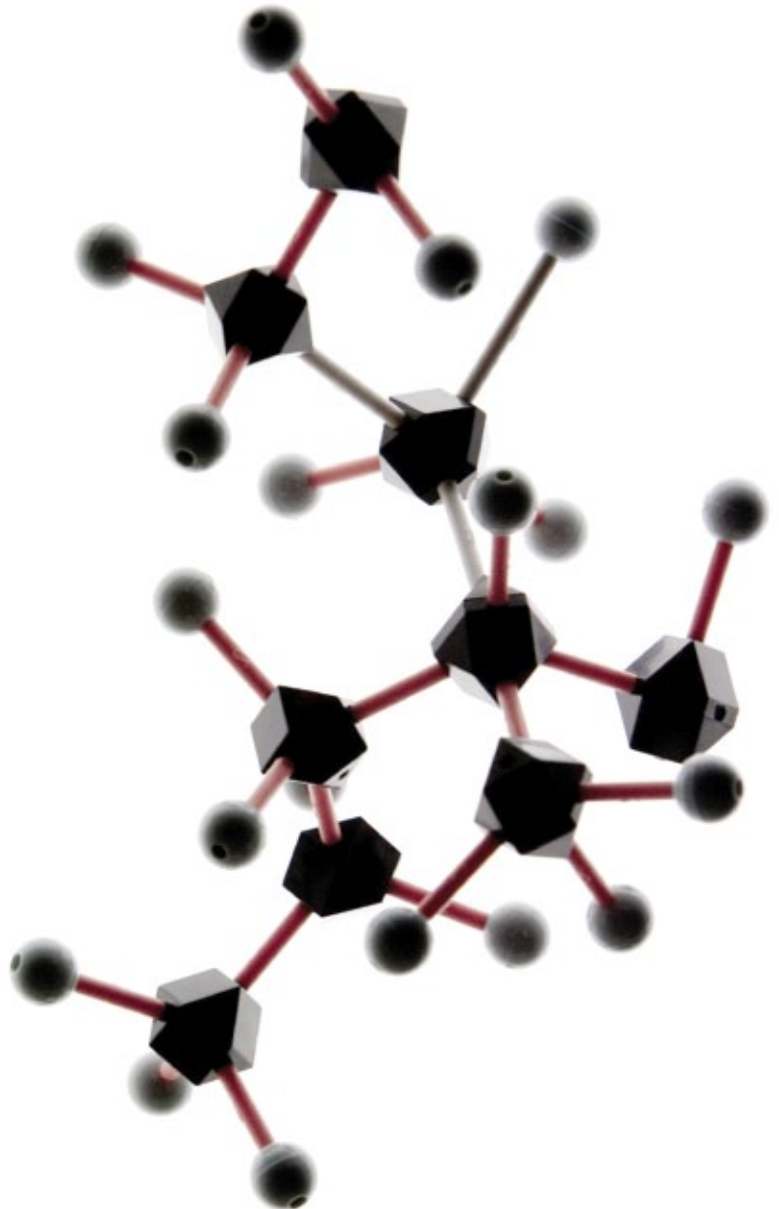
Continuous activity

### Institutions responsible

Federal Ministry of Health in cooperation with public health institutes, NGO sector and associations of users.

### Expected results

Introduced continuous monitoring and evaluation in the field of mental health with periodic research for the purpose of monitoring progress and more efficient implementation of policies in the field of mental health.







## AREAS OF ACTIVITIES

### EDUCATION



#### Goal:

**Continuous investment in the education of health professionals, users of services and their families, other providers of services and citizens for the purpose of improving mental health protection.**

Education implies life-long learning, acquisition of knowledge, skills and attitudes as part of formal education (schooling) and informal (courses, seminars, trainings at associations or educational institutions).

When we speak about formal education, it is necessary to improve the existing and introduce new educational programs in compliance with needs.

Particular attention will be devoted to education of nurses in compliance with mental health institutions' needs.

The goal of the education is creation of a competent multidisciplinary team with adopted knowledge, skills and attitudes necessary for meeting the standards of the profession.

In addition to the education of health professionals, it is necessary to educate all stakeholders contributing to the improvement of mental health protection.

#### Aims:

- Implementation of formal education of professionals at mental health institutions
- Implementation of informal education of all stakeholders contributing to the improvement of mental health protection
- Improvement of mental health curricula at educational institutions
- Introduction of new educational programs in the field of mental health

#### Implementation period

Continuous

#### Institutions responsible

Ministries of health in cooperation with ministries of education with the support of all other sectors.

#### Expected results

Improved level of knowledge and skills of the relevant human resources.

















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