



EU4Health Joint Action  
Mental Health Together -  
**MENTOR**



Co-funded by  
the European Union



**MENTOR**  
Building Mental Health  
and Well-being Together





# COMMON CHALLENGES:

Mental health is a major public health issue in the EU, affecting economic and social well-being. Rising challenges contribute to morbidity and significant costs for social protection systems.

**Project acronym:** MENTOR

**Project name:** Mental Health Together

**EU Grant agreement n°:** 101162928

**Project coordinator:** National Centre  
of Mental Health, Latvia



**Project starting date:**

September 1st, 2024

**Project duration:**

36 months

**Project funded** by the EU4Health  
programme of the European Union, with  
a contribution of € 5 999 936,42 million



**Participants:**

43 Partners representing  
20 European countries,  
including Norway, Iceland  
and Ukraine





# WORK PLAN STRUCTURE

This project is structured in  
**6 work packages** as follows:

## **WP 1** **Coordination**

*Lead – Latvia  
(National Centre of  
Mental Health)*



## **WP 2** **Communication and Dissemination**

*Lead –  
Poland (National Health  
Fund)*



## **WP 3** **Evaluation**

*Lead – Spain  
(Biosistemak)*



## **WP 4** **Sustainability**

*Lead – Hungary  
(Országos Kórházi  
Főigazgatóság)*



## **WP 5** **Building bricks for integrated and comprehensive Mental Health and Wellbeing Actions**

*Lead – Italy (Istituto  
Superiore di Sanità)*



## **WP 6** **Innovative Digital Solutions for Improving Mental Health across Europe**

*Lead – Norway  
(Folkehelseinstituttet)*





There is no health without mental health and there can be no European Health Union without equal and timely access to prevention, treatment and care for our mental health. Today marks a new beginning for a comprehensive, prevention-oriented and multi-stakeholder approach to mental health at EU level. We need to break down stigma and discrimination so that those in need can reach out and receive the support they need. It is ok not to be ok, and it is our duty to ensure that everyone asking for help has access to it.”



**Stella Kyriakides,**  
Commissioner for  
Health and Food Safety



JA MENTOR project consortium



# GOALS

JA MENTOR'S aim is to promote mental health by sharing experiences across political and clinical spheres. Our approach incorporates evidence-based practices and adapts initiatives for sustainable mental well-being at personal and population levels.

1

Supported policy makers at national and regional levels in the design, implementation, and improvement of mental health in all policies approaches.

2

Promoted mental health in communities with focus on vulnerable groups, and tackling stigma and discrimination associated with mental health problems and addiction by sharing good practices, methods and online tools.





3

Empowered people with lived experience (PLE) and their inclusion in mental health policy and services.

4

Provided care pathways to promote proactive and person-centered care for people with mental disorders through the Personal Health Budget.

5

Prepared systems for monitoring mental health in the population, facilitating evaluation, and directing effective action and help to vulnerable groups.





# OUTCOMES

## Overall Benefits:

- Flexible MHIAP Methodology and Guidance: For implementing Mental Health in All Policies
- Community Interventions: Promotion of mental health initiatives targeting vulnerable groups (e.g., youth, migrants, refugees, ROMA people, and displaced persons from Ukraine)
- Social Inclusion: Enhanced efforts to tackle stigma and discrimination associated with mental health issues
- Addressing Problematic Technology Use: Development of strategies and recommended actions to mitigate the negative impacts of unhealthy digital technology use.



## For People with Lived Experience (PLE):

- Inclusive Decision-Making: Active inclusion in policy development and decision-making processes
- Anti-Stigma Strategies: Development of strategies and tools for combating stigma
- Recovery Support: Facilitating personalized support pathways for recovery.



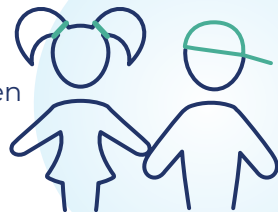


### **For Displaced Persons from Ukraine:**

- Digital Assessment Tools: Introduction of digital tools for mental health assessment
- Evidence-Based Support: Implementation of mechanisms to identify individuals at high risk of mental health issues
- Integrated Care: Development of care pathways that integrate policies, services, and resources to support Ukrainian refugees.

### **For Children and Adolescents:**

- ACE Assessment Tools: Digital tools to evaluate factors impacting youth mental health
- Training Programs: Programs for professionals and educators to strengthen youth mental resilience during crises
- Best Practices: Development of best practices for promoting mental health among youth living in adverse conditions.



### **For Marginalized Groups (Migrants, Refugees, Roma):**

- Healthcare Equity: Reduction of healthcare inequalities and improved access to mental health services
- Sustainable Digital Tools: Availability of accessible and sustainable digital tools to support mental health and well-being.





# JA MENTOR PARTICIPANTS



**SYNERGIES:** Partners will build on existing EU policies and collaborate with initiatives like JA ImpleMENTAL and JA PreventNCD.



## Legend:



Countries participating in the JA MENTOR project



Countries not participating in the JA MENTOR project





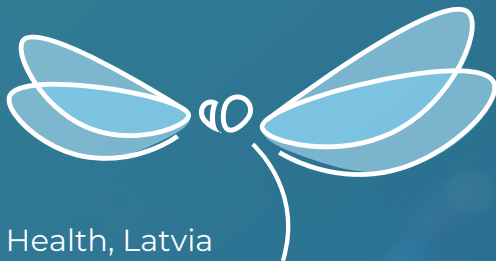
# JA MENTOR PARTICIPANTS

## Beneficiaries

## Country

National Centre of Mental Health (NPVC)	LATVIA
Organismos Kratikon Ypiresion Ygeias (SHSO-MHS)	CYPRUS
Region Syddanmark (RSD)	DENMARK
Sotsiaalministeerium (MOSA)	ESTONIA
Terveyden Ja Hyvinvoinnin Laitos (THL)	FINLAND
Ministère chargé de la santé (FR-MOH)	FRANCE
Bundeszentrale für gesundheitliche Aufklärung (BZgA)	GERMANY
Nemzeti Népegészségügyi és Gyógyszerészeti Központ (NNGYK)	HUNGARY
Landlaeknis Embaettid (DOHI)	ICELAND
Istituto Superiore di Sanità (ISS)	ITALY
Lietuvos Respublikos sveikatos apsaugos ministerija (SAM LT)	LITHUANIA
Rijksinstituut voor Volksgezondheid en Milieu (RIVM)	NETHERLANDS
Folkehelseinstituttet (NIPH)	NORWAY
National Health Fund (NHF)	POLAND
Centrul Național de Sănătate Mintală și Luptă Antodrog (NCMHFAD)	ROMANIA
Nacionalni inštitut za javno zdravje (NIJZ)	SLOVENIA
Asociación Instituto de Investigación en Sistemas de Salud-Biosistemas (BS)	SPAIN
Folkhälsomyndigheten (PHAS)	SWEDEN
State Institution Public Health Center of Ministry of Health of Ukraine (PHC)	UKRAINE

Affiliated Partners	Country
Universität Leipzig (ULEI)	GERMANY
Freie Hansestadt Bremen (SB)	GERMANY
Országos Kórházi Főigazgatóság (OKFŐ)	HUNGARY
Magyarországi Református Egyház Bethesda Gyermekkórháza (BCH)	HUNGARY
Heilsugaesla Hofudborgarsvaedisins (PHCI)	ICELAND
Landspítali University Hospital (NUHI)	ICELAND
Azienda Ulss 4 Veneto Orientale (PROMIS)	ITALY
Torino Azienda Sanitaria Locale Citta di Torino (ASL)	ITALY
Università degli Studi di Milano-Bicocca (UniMiBI)	ITALY
Trimbos Institute – Netherlands Institute of Mental Health and Addiction (TRIMBOS)	NETHERLANDS
Statistisk sentralbyraa (SSB)	NORWAY
Departament de Salut - Generalitat de Catalunya (GENCAT)	SPAIN
Fundacio de Recerca Clinic Barcelona - Institut d'Investigacions Biomèdiques August Pi i Sunyer (FRCB-IDIBAPS)	SPAIN
Institut Català d'Oncologia (ICO)	SPAIN
Fundacion Instituto de Investigación Marqués de Valdecilla (IDIVAL)	SPAIN
Fundación para la Formación e Investigación Sanitarias de la Región de Murcia (FFIS)	SPAIN
Servicio Murciano de Salud (SMS)	SPAIN
Servicio Andaluz de Salud (SAS)	SPAIN
Fundación para la Formación e Investigación de los Profesionales de la Salud de Extremadura (FUNDESALUD)	SPAIN
Associated Partners	Country
Ministère de la Santé et la Securute Sociale (DISA)	LUXEMBOURG
Medizinische Hochschule Brandenburg Campus GMBH (MHB)	GERMANY
Regione Lombardia (LOMBARDIA)	ITALY
Helsedirektoratet(HDIR)	NORWAY
Servicio Extremeño de Salud (SES)	SPAIN



### **Project management team**

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### **Project coordinator**

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### **Dissemination team**

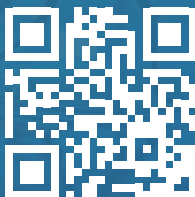
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Co-funded by  
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This Joint Action is co-funded by the Health Programme of  
the European Union under Grant Agreement No. 101162928

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