In order to engage with and analyse the performance of the rotating Presidency of the Council of the European Union, Mental Health Europe has devised a new scorecard system through which we will evaluate each Presidency’s commitment to and promotion of mental health according to how they performed on the following criteria:

- **Promotion of mental health and well-being,**
- **Commitment to the rights of persons with psychosocial disabilities,**
- **The involvement and empowerment of users of mental health services.**

The beginning of 2016 was an important time for mental health at European Level with the close of the Joint Action on Mental Health and Well-being, the adoption of the long-awaited European Framework for Action on Mental Health and Well-being (the Framework for Action) and the receipt by the EU of recommendations from the Committee on the Rights of Persons with Disabilities in September 2015.

The conclusions to these important processes provided an opportunity to highlight mental health during the Dutch Presidency and although health matters were not prioritised in its formal priorities, the Presidency performed well in some respects, including by shining a light on youth mental health. In addition, they admirably led the first discussions surrounding the EU Accessibility Act. However, MHE believes that the Presidency could have done more to capitalise on the adoption of the Framework for Action in order to promote mental health and well-being at European level.

**Scale of appreciation: How was the weather during the Dutch Presidency?**

- **Good**
- **Fair**
- **Average**
- **Poor**

**Promotion of mental health and well-being**

The Dutch Presidency prioritised **young people and mental health** in the agenda of the Council of Education, Youth, Culture and Sport which they also highlighted with a successful event on Youth Mental Health that MHE attended in Maastricht. The Presidency further organised events on health-related topics such as a conference on dementia in May focusing on home and quality care during which the campaign “Dementia-Friendly together” was launched. Two panels on mental health also took place at the International Conference on Building the Future of Health, which was organised by the Dutch Presidency and focused on game changing concepts for healthy ageing. At a few events centred around health the Presidency failed to make a link with mental health and missed out on the opportunity to promote mental health and well-being.
Commitment to the rights of persons with psychosocial disabilities

The Dutch Presidency admirably led negotiations on the European Accessibility Act which would establish accessible requirements for products and services in the European Union which will help persons with disabilities including persons with psychosocial disabilities. The Presidency also attempted to move discussions forward on the Equal Treatment Directive, albeit in a limited way, which would prohibit discrimination on the grounds of religion, disability, age or sexual orientation in relation to social protection and access to goods and services. However, given that the negotiations reportedly were focused on minor elements, the Council unfortunately remains at an impasse on this important Directive. The Presidency has also called for a more robust joint approach to hate crimes at a working party conference in April, encouraging Member States to tackle hate crimes including those committed against persons with psychosocial disabilities and to improve support for victims.

Involvement and empowerment of users of mental health services

In terms of involvement and empowerment of users, the Presidency organised the EU Youth Conference in Amsterdam focusing on enabling young people to engage in a diverse, connected and inclusive Europe, with a particular focus on young people who might face challenges including mental health problems. MHE was pleased to see that young persons with lived experience were present and actively participated in the conference on youth mental health in Maastricht, already mentioned above. Lastly, e-health week which focused on empowering patients in relation to their own health decision, was opened with a session entitled “Healthy minds for everyone in the 21st Century – Emotional and Mental Health through digital programs” which underlined best practices on e-Mental Health.

Conclusion

MHE welcomes the actions taken by the Dutch Presidency in relation to youth mental health and the empowerment of young people with mental health problems as well as their focus on the rights of persons with disabilities and inclusive societies. The Dutch Presidency has moved the dialogue forward on the European Accessibility Act, which MHE supports. Based on the programme of the Presidency, a stronger focus on mental health, especially in the workplace could have been adopted, particularly in the context of the timing of the adoption of the European Framework for Action.

Over the last decade, the levels of absenteeism, unemployment and long-term disability claims due to work related stress and mental health problems have increased in Europe. Approximately 25 per cent of European citizens will experience a mental health problem during their lifetime yet this issue is often overlooked at European level. Member States need to commit to tackle the challenges that mental health issues raise for our citizens and societies. We hope that future Presidencies will show a greater commitment to promoting mental health and well-being, empowering users of mental health services and advancing the rights of persons with psychosocial disabilities and that this new scorecard will help them to evaluate their performance in this key areas.

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