Community mental health is gaining ground in France

After having set a course in the Mental Health and Psychiatry Roadmap of 28 June 2018, the French Ministry of Solidarity and Health appointed last April a ministerial delegate for mental health and psychiatry, Professor Franck Bellivier. Last week, the report of a parliamentary information mission on the Territorial Organisation of Mental Health was published. Written after numerous services visits, including the experience of citizen psychiatry in Lille – linked to the WHO Collaborating Centre - and in Trieste, it contains many proposals in line with WHO recommendations on community mental health services, such as the strong acceleration of the shift to ambulatory care.

The report by members of the parliament Ms Wonner and Fiat, presented on 18 September in the National Assembly's Social Affairs Committee, makes 9 proposals for a revolution in the vision of psychiatry in France:

Proposal N°1- Reaffirm the free choice and rights of the services users

Proposal N°2- Define a national mental health policy

Proposal N°3- Tackle stigma in psychiatry and integrate mental health into "Ma santé 2022" (France's global health strategy)

Proposal N°4- Create a national agency in charge of mental health policies

Proposal N°5- Strengthen inter-ministerial management through the evolution of the mental health and psychiatry delegate

Proposal N°6- Create territorial mental health coordinators to ensure the implementation of territorial mental health projects

Proposal N°7- Support and develop local mental health councils to facilitate consultation between all local stakeholders

Proposal N°8- Organize a real gradation of care by changing the sector (in France, public actors in mental health operate in defined geographical areas of about 80 to 100,000 inhabitants, called "sectors")

Proposal N°9- Accelerate the shift to ambulatory care by redeploying 80% of psychiatric hospital staff to ambulatory care by 2030





Extracts from the presentation of the report to the Social Affairs Committee (see video):

Caroline Fiat, MP, rapporteur: "We went to Lille, where the action of the "59G21", of the Lille Metropole Mental Health Establishment (...) in this sector, nearly 80% of the healthcare staff work outside the hospital. The sector is not organised around usual medical-psychological centres but around a local community based service - composed of a multidisciplinary team, with health professionals and social workers - and multiple consultation centres, for example in GPs facility or social centre. All the health professionals in this sector are very mobile and work throughout the whole territory. The waiting time for a first contact is about 48 hours. It gives access to a nursing consultation of about 1h30 which allows for example to analyze the suicidal risk. There is also a mobile team for community care in the city that ensures the ambulatory management of emergencies by intervening early and in an intensive way in the users' homes (...) for a period of a few days to a few weeks, with an average duration of care of 12 days. A night stand allows this service to operate 24 hours a day. This sector has only 10 hospital beds, with an average length of stay of 6.5 days Thanks to an intervention as early as possible and the mobility of healthcare staff, this sector is far from the over-occupation that we have observed elsewhere."

Martine Wonner, MP, rapporteur: "What we saw in Lille and Trieste must be a source of inspiration for the essential transformation of the organizational model of mental health in France (...) Let us stop funding hospital walls! »

At the end of August, the ministerial delegate for mental health and psychiatry, on the occasion of the WHOCC International Masterclass, had already put in parallel the WHOCC terms of reference and the objectives of the national roadmap:

WHOCC Terms of Reference for 2018-2022	National Mental Health and Psychiatry Roadmap (MHPR)
Promotion of community mental health services	.Territorial coverage by sector organization .Promotion of ambulatory care in the health and medico-social sectors (Axis 2 MHPR) .Inclusive housing and mutual support group (axis 3 MHPR)
Respect for the rights of persons with psychosocial disabilities	.Fight against discrimination (axis 1 MHPR) .Fight against restraint, seclusion, Care without consent (axis 2 MHPR) . Social inclusion and citizenship in line with the 2005 law on disability (Axis 3 MHPR)
Participation of users and citizens in mental health services, research and training	.Peer support workers (Axis 3 MHPR)
Promoting e-mental health	.Working Group Ministry of Health co-chaired by WHOCC (axis 1 MHPR)

Thanks to this dynamic, the French WHO collaborating centre for research and training in mental health will continue its action of support and accompaniment of its partners, political decision-makers, elected officials, representatives of users and families, health professionals, social sector, research and training professionals, in order to implement these policies, through the actions in which it is involved: WHO QualityRights programme, national resource centre and support to local mental health councils, training and professionalisation of peer support workers, e-mental health in particular through the European project Emen.

