

Strengthening the Relationship; A Digital and Educational Exchange Between Portuguese and Dutch Mental Health Care Associations

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Abstract

Background: European differences in Mental Healthcare systems (MHS) and European challenges within MHS, like migration, climate change and lack of qualified professionals, require collaboration between stakeholders from individual countries within the European Union.

Purpose: To exchange information between national and international associations and inspire Dutch clinical psychologists in training.

Method: A digital event was organized and three renowned associations from both Portugal and The Netherlands presented their organization and current developments. This input was used in a discussion round where participants from both countries participated.

Conclusion: This event provided positive outcomes on multiple levels, including being educational for specialists in training, building and maintaining the relationship between the professionals and association of both countries and providing new and inspiring perspectives that can help mutual MHS. The differences show the work that lies ahead, to create more European uniformity within MHS and to further benefit from international collaboration.

Introduction

Differences in European Health Care

Despite the unity of Europe (EU), there are numerous differences between European mental health care systems (MHS). Studies that have examined those differences found several factors contributing to heterogeneous systems. Michaud et al. found that all EU countries have some policies and recommendations on primary mental health services for adolescents, but these are heterogeneous and often not applied consistently in all regions [1]. Also, their focus and implementation vary largely between and within countries [1]. Gutiérrez-Colosía et al. found a significant variation in care availability and capacity across MHS of local areas in Europe [2].

Gaps at different levels within the European Union

Braddick et al. conducted a study that included 15 EU countries and found many gaps at different levels [3]. These gaps, according to the study of Braddick et al. [3], need to be filled with evidence-based practices for the promotion of mental health and prevention of mental disorders in childhood

and adolescence. An example of these gaps is a lack of evidence-based policies and Braddick et al. [3] recommends addressing this topic, including many others, in all EU countries. Beck and Kilian [4] found that the development of systems of mental health care in western Europe is characterized by a common trend towards deinstitutionalization, less in-patient treatment and improvement of community services but that variability between national MHS is still substantial. These gaps, current topics and differences combined, form a task that calls on all stakeholders, to work together to deepen the value and commitment given to mental health, reshape the environments that influence mental health, and strengthen the systems that care for mental health [5].

Current topics in The Netherlands

Other reasons for international collaboration are growing developments that seem difficult to overcome without the support of European allies. The Netherlands is facing a decrease in healthcare accessibility and an increase in healthcare expenses and many unfilled vacancies for healthcare professionals [6]. Although the Dutch population did not grow in 2022, due to the number of natural deaths and a lack of births, the immigration was higher

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than in the previous 20 years [7]. Because patients with a severe mental illness (SMI) and a non-western migration history have more (unmet) needs for care than western patients with SMI [8], this development provides a further pressure on the Dutch MHS. European uniformity, including European standards for MHS educations and diplomas, could increase the exchange of European colleagues to evenly divide the European Healthcare capacity.

Building a relationship

An example of stakeholders increasing their working relationship, to learn, exchange and to become inspired, is the developing bond between organizations of the Portuguese and Dutch MHS. In 2022, a Dutch delegation of 45 clinical psychologists in training and scientist-practitioners visited their colleagues in Lisbon, Portugal, as part of their post academic education program. Hospitals, mental healthcare facilities, universities, start-ups and innovation centers were visited. Agreement about future international exchanges to inspire young psychologists, exchange experience in the clinical field and cooperating in international scientific research were positive outcomes [9].

Returning the favor

In June 2023, the collaboration continued, involving a masterclass on Eye Movement Desensitization and Reprocessing (EMDR) treatment on trauma, which was organized together with the Psychiatric Hospital Júlio de Matos [10]. As part of this conference, a Dutch delegation organized an online lecture on EMDR offered by a Dutch expert, clinical psychologist Drs. R. van Diest. The study of Bruins et al. [10] concludes that digital opportunities create positive implications for cooperation between countries, which can lead to innovation and creative solutions. In the spring of 2024, more innovative events will take place, including an exchange of scientific research during a conference in collaboration with Hospital CUF Tejo, Lisbon city.

The next step

As part of continuation of the exchange, a digital return visit of the Ordem dos Psicólogos Portugueses (Portuguese Psychologists Association (OPP)) to the Netherlands was organized on 24 October 2023. This event incorporates the combined agreements of Steenbakkers et al. [9] and Bruins et al. [10], that exchange can inspire young professionals and that digital opportunities can improve international relationships. This article covers the organization; the information shared, and results of this digital event. The goal of this digital event was to present a group of Dutch clinical psychologists in training the similarities and differences between the Dutch and Portuguese MHS, to learn about different systems, to inspire them, and to provide a wider perspective. We have attempted to reach this goal by Dutch and Portuguese presentations and a round of discussions.

Method

The program

In a fruitful collaboration with The Dutch Mental Health Care Association (de Nederlandse GGZ (deNLggz)), The Dutch Association of Psychologists (Nederlandse Instituut van Psychologen (NIP)) and OPP, a program was arranged. A digital event of two and a half hours, using the conference call feature of Microsoft Teams, was organized. Each association arranged and showed a presentation about their organization and current

topics are faced with. In total, 45 Dutch clinical psychologists in training and their supervisors working at GG Breburg and GGZ Oost Brabant, two large regional mental health care institutions in the south of the Netherlands, were invited. After a general welcome and introduction, the NLggz, NIP and OPP gave their presentations. Afterwards, the participants were mixed and divided into two discussion groups using the break-out room feature of Microsoft Teams. These groups were asked to discuss the differences and similarities between the Portuguese and Dutch MHS they had noticed during the presentations. The event had a duration of two and a half hours.

Results

Participants

In total, 22 participants, including presenters, clinical psychologists and those in training, joined the digital event.

The Dutch Mental Health Care Association

The NLggz provided a general introduction to the Dutch MHS, including general numbers, discussing the association goals, the way Dutch MHS is financed, and trends and actualities in the Netherlands. The core business of the association includes representing the interests of its members (mental health care institutions) towards the Dutch government and other national and regional partners. Current topics within the Dutch MHS are the impact of COVID on mental health, the impact of the Ukraine crisis on refugees and Dutch citizens and waiting list related problems. About 40.000 people wait longer than three months and the longest waiting list exists for personality disorders, eating disorders, obsessive compulsive disorder, autism spectrum disorders, and trauma related disorders. Other current topics include recovery approach, community based and ecosystem approach, prevention and professional peer workers, shortage of qualified staff, administrative burden and prevention, and integration of cure and care at a regional level.

The Dutch Association of Psychologists

The contribution of the NIP, founded in 1938 and with over 17.000 members (all university educated psychologists), to the program included an overview of their international collaborations, current topics, including substantial changes in the way the profession of psychologists are structured, and the collaboration with the Dutch government. The NIP maintains international ties with the American Psychological Association (APA), the Global Psychology Alliance, International Union of Psychological Science (IUPsys) and Mental Health Europe. The NIP is also part of the European Federation of Psychologists' Associations (EFPA), where a collaboration with OPP already exists. Current topics within the association include climate psychology, psychodiagnostics, new finance structures in cure and care, new national quality standards, aging population and updating the professional standard and professional registrations protected by law (Beroepen in de Individuele Gezondheidszorg (BIG)=Professions in Individual Healthcare professions). The NIP is the only association in the Netherlands that represents the general interests of psychologists as a profession and provides members with services such as up-to-date information on, among other things, professional ethics, government regulation, and professional training. The NIP collaborates with other bodies, both in the field of public administration and in politics, in the pursuit of the abovementioned goals. The association also participates in the creation of legislation relating to the profession, in the official accreditation process, and governing the regulation of the profession.

A new structure for psychologist professions

At this moment, many different titles and registrations are available for university educated psychologists in The Netherlands and considerable overlap between psychological professions exist. For clients and those who refer them for help, it is often unclear what difference exists between a licensed psychotherapist, a system-based therapist, a licensed health care psychologist or a licensed clinical psychologist.

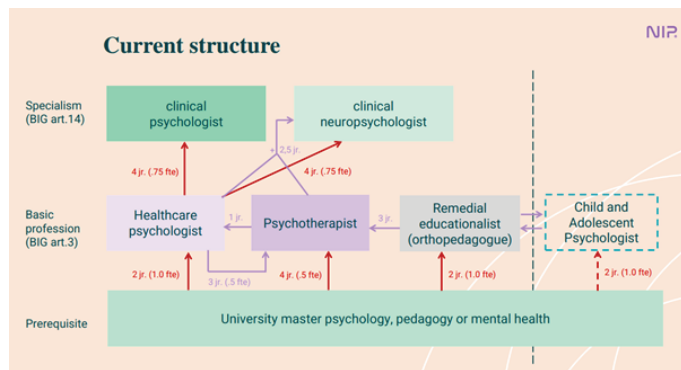


Figure 1. The current structure of the psychologist profession. Source: NIP, 2023

Therefore, the association took the responsibility, in creating a renewed professional structure for BIG professions in mental healthcare. This new structure is based on simplicity, transparency and quality of care and includes the reduction of the number of professional titles (BIG titles). It also includes the creation of a public site where all BIG registered professionals and their additional expertise can be found. This new regulatory structure of the profession was also presented and discussed at the bi-annual conference of EFPA, the ECP 2023 (European Congress of Psychology) in Brighton. The structure is in accordance with the psychological professional standards as defined within EFPA.

Key points in the relationship between the Dutch government and the Dutch Association of psychologists are regulation and oversight, licensing and accreditation, collaboration on standards, quality assurance, government initiatives and advocacy and representation.

The Portuguese Psychologists Association (OPP)

After the Dutch presentations, the OPP presented the history of the association, current developments and topics, current campaigns, and OPP duties. Current and historical campaigns of OPP included find a way out, healthy work environment, healthfully schools, full stop to poverty, pro-aging communities, promotion of the psychologist profession during the Covid-19 epidemic and the use of social media including podcasts. The mission of OPP includes scrutinizing the exercise and access to the profession of psychologist, developing technical and ethical standards, and exercising disciplinary power over its members. Besides these core duties, OPP defends the general interests of the profession and users of psychology services and provides services to members in relation to information and professional training. OPP collaborates with other public administration bodies in the pursuit of goals in the public interest, which are related to the profession. The association also participates in the creation of legislation relating to the profession, in the official accreditation process and in the evaluation of courses that give access to the profession.

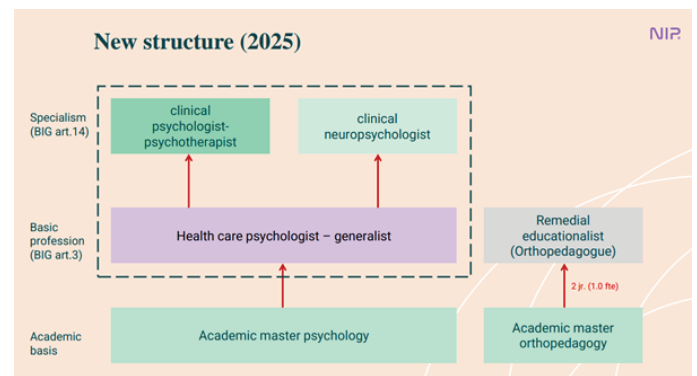


Figure 2. The new structure of the psychologist profession. Source: NIP, 2023

Becoming a Portuguese Psychologist and social challenges

The OPP has presented the route to become a psychologist and psychologist specialist in Portugal.

According to OPP, psychotherapy is considered not to be a profession, but an intervention and a specialization. The practice of psychotherapy should always be framed within the context of a self-regulated health profession (subject to the normative, ethical, and scientific control of the respective professional association). Social challenges that the OPP seeks to contribute to are health and wellness, demographics and aging, migration, climate crisis and sustainability, work and sustainable development, education, justice and equity, poverty and inclusion and peace.

International collaboration

OPP's contribution to the international cooperation of psychology associations for global challenges include EFPA (including NIP), APA and Global Psychology Alliance. In 2019, OPP co-organized, in collaboration with APA, an international summit on psychology and global health. A proclamation and resolution for climate change and global health was signed by 68 psychology associations from all around the world.

Discussion round

After the presentations, discussion groups were formed, and their contents were plenary discussed afterwards. In the first discussion group, participants reached a consensus on the following topics: the need to protect the level of training and functioning of psychologists, and the need to remain critical related to diplomas and what is required to meet quality standards. Another consensus found was a mutual pride related to the profession of psychologists and a desire to remain at a high standard related to the quality of treatment and the profession. In the second discussion group, consensus was found that Portuguese MHS is experiencing a rapid development in the field of destigmatization. In addition, a lot of attention in the Portuguese MHS is paid in the setup of intervention and supervision.

Conclusion

Difference, similarities and recommendations

As concluded in the discussion round, there are similarities between the Portuguese and Dutch MHS and the topics that the

psychology associations (OPP and NIP) are faced with. At the same time, there are noticeable differences in the way health care and regulation of the profession of psychologists in both countries are organized.

Both psychology associations have presented current developments that transcend national borders. The NIP, for example, presented the new professional structure for BIG professions in Dutch mental health care that is in accordance with standards as defined within EFPA. OPP shared about their attribution to a summit on psychology and global health were a proclamation and resolution for climate change and global health was signed by 68 psychology associations from all around the world. These examples provide an overarching approach to European and even global issues that seem hard to overcome without international collaboration. Furthermore are these examples in accordance with the WHO advice that stakeholders should work together

Both corresponding topics, like climate change and guarding quality standards of treatment and professions, and differences, like the organization of professionals, training courses, diploma structures and current campaigns, between MHS were found. Because of these differences, this event provided an inspiring and educational possibility to learn and become informed about different perspectives and the benefit of international collaboration. Further European coordination of training courses and diploma structures could increase exchange within the EU, This could help to level evidence practice based treatments in Europe and could contribute to evenly dividing the European Healthcare capacity.

Another conclusion that can be drawn is that this event provided positive outcomes on multiple levels, including building and maintaining the international relationship and providing new and inspiring perspectives that can help mutual health care systems. This event also provides an example of how integrating international collaboration into postgraduate training courses could accelerate awareness and thus involvement into international projects. Digital technology lowered the threshold to organize this event. Awareness of international differences and similarities in the way health care, postgraduate training and certification is organized, contributes to deepening cooperation across borders. With current migration and scarce capacity, international cooperation is necessary to ensure the current quality of mental health services. These positive outcomes show the need for frequently organized events, contributing to international cooperation.

Conflicts of interest

All authors declare that they have no conflicts of interest.

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