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OVERARCHING AIM

The MENTALKIT project's overarching objective is to help enhance the capacity of the Brazilian health system to prevent mental disorders and to treat young people with mental health problems. To achieve this goal, MENTALKIT intends to develop strategies to help policymakers and practitioners use scientific evidence to formulate public health policy and to implement evidence-based interventions to

prevent and treat mental disorders and to promote mental health among young people. The tools we are planning to develop will provide policymakers and practitioners with evidence and support to weigh the costs and benefits of different interventions and, therefore, to decide which ones are the most appropriate considering the context and available resources.

PROJECT STRUCTURE

MENTALKIT comprises three interlinked Work Packages which will produce and organise scientific evidence which is relevant to the formulation of public health policy in relation to young people with mental health problems. The evidence will, then, be synthesised into practical tools to help policymakers and practitioners implement evidence-based policies in Brazil.

WORK PACKAGE 1: DEMAND ESTIMATES AND ECONOMIC MODELLING

Work Package 1 (WP1) will use existing data collected from all regions of Brazil to estimate the number of children and adolescents with mental health problems in the country who need mental health ourse. t r Deda from two studies carried out in the five regions of the country will be used:

Based on the demand estimates, and using variables provided by both studies, we will perform economic models to estimate: (a) social and economic impact to the country resulting from mental health problems among children and adolescents; (b) the costs of offering effective care to children and adolescents with mental health problems; (c) potential return on investment (RoI) resulting from the implementation of effective care for

children and adolescents with mental health problems. $\mathbf{E}_{\mathbf{V}}^{\mathbf{e}\mathbf{d}}$

RESEARCH TEAM

MENTALKIT project results from a partnership between researchers from Universidade Federal de Alagoas (UFAL) and Universidade Estadual do Mato Grosso do Sul (UEMS), in Brazil, and the Care Policy and Evaluation Centre (CPEC) at the London School of

Our first consulting workshop was carried out in Maceió, Alagoas, in the Northeast Regi

overcome to make sure the initiative is successful. The main advantages of ToC are:

- It can be empirically tested through the identification and development of indicators to evaluate each component of the initiative
- It considers the context in which initiatives will be implemented, by including representatives of local community, policymakers, professionals, service users etc. By including people who will actually implement the initiative, ToC ensures that the local context, resources, demands are taken into consideration when designing public policies.
- It is flexible and can be adapted as a result of permanent monitoring and evaluation based on indicators that are developed as part of the process, and which are consolidated through stakeholders' feedback.

 It is objective and transparent, and can be graphically represented as a ToC map (Figure 1)

Figure 1 is a graphic representation of the main components/steps that are needed for the expected impact to be achieved, and how they interact. When planning an initiative through ToC, one usually starts by defining impact (or the ultimate goal one expects to achieve). Once impact is defined, an operationalisation process begins by defining measurable short- mid- and longterm outcomes. Based on a clear definition of outcomes, it is possible, then, to develop and/or to identify interventions that can lead to the outcomes. Also, it is possible to identify/develop indicators to monitor and evaluate the interventions. By identifying/ developing interventions, one should, then, establish which resources are needed so they can be implemented. At the s[\text{\text{Mcc}}sare|\text{\text{h}}\displaced ij[]I"\(\text{ixccH}\) To identify resources, needs and barriers, a situational analysis should be performance and updated periodically. Finally, scientific evidence and assumptions should be considered during the development and implementation of the project. Scientific evidence validates components of the

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implementation process and allow for the assessment of impact, effectiveness, limitations etc. Assumptions are preconceived ideas and beliefs which should be considered as potential starting points, or which should be modified throughout the implementatiopotential tified

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provide children and adolescents with adequate care without integration between different sectors and levels of care. Therefore, it is important to promote strategies to improve communication between relevant actors — e.g., health, education justice and social care sectors.

	between relevant actors — e.g., health, education justice and social care sectors.	
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Dimension 1: System/network Dimension 2: Human resources Dimension 3:

Knowledge / information / evidence

Development of a "Map of outcomes": what do we need to achieve to make our objectives come true?

nderstanding demand is needed/ epidemiological indicators target population

Identification of intersectoral network

Mapping of child-adolescent protection network

se of local data

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se of local data

Development of reliable indicators on patients behaviour related to subjectivity

academic training of health professionals in B

resources are insufficient, and lack adequate training/skills to deal with young people with mental health problems in the public system.

A **situational analysis** trying to understand the paucity of resources shows that:

In the system/network dimension, Brazil is facing a "dismantlement of public policies" which has led to significant reduction in public investiment⁹. This might help understand why there are far too fewer services than are needed to provide care to everyone who needs it. When services do exist, cross-level (e.g., primary and secondary care) and cross-sector (e.g., health, education, social care and justice) integration is lacking. Poor synergy across levels and sectors erodes

- the system's efficiency and its capacity to offer adequate responses to the population's needs;
- In the human resources dimension, the main issues seem to be lack of "definition of professionals' roles" and of "adequate training to work on SUS", which leads, among other problent

essential. It is noteworthy mentioning that, even though guidelines from the Ministry of Health establish the minimal number of professionals that should be available in specialized services, such guidelines are not universally enforced due to scarcity of human resources.

Considering the issues raised above, the following interventions are suggested to strengthen the capacity of the psychosocial care network: "mapping the network" and implementing "epidemiological surveillance" are fundamental steps to estimate the network's real capacity and the actual demands for care. By doing so, it would be possible to precisely define which resources are available and which are lacking for the network to deliver appropriate care. The systemso, value be poslering the effective appears and the systemso are systemso.

MENTALKIT is actually applicable and relevant to different Brazilian contexts, especially to the public system".

Interventions suggested by MENTALKIT should be tested in contexts that are similar to those where they would be applied, in populations that are similar to patients in the real world, i.e., in primary care services.

If sufficiently robust evidence is lacking, the best available st evidendíx/[W_ba]dH[HithPaR"ix/[WcaedH[HithPa]dH[HithPsR"ix/[WcthPtR"ix/[Wa'Pi_H[HithPa]dH]]]

V APPENDIXES

APPENDIX I – WORKSHOP AGENDA

23 November 2018

Project introduction: Enhancing the Brazilian ealth system's ability to support the mental health of young people Theory of Change ToC Introduction to Theory of Change framework Coffee break Group discussion about knowledge gap in children and adolescent mental health in Brazil Consensus on definition of impact: what does a successful policy mean to us Group discussion about the project's impact using ToC framework Group discussion about the project simpact using ToC framework Group discussion about the project simpact using ToC framework Does everyone agree on that this is an objective which is warth pursuing 2scusc incidence of the project simpact using ToC framework Does everyone agree on that this is an objective which is warth pursuing 2scusc incidence of the project simpact using ToC framework Does everyone agree on that this is an objective which is warth pursuing 2scusc incidence of the project simpact using ToC framework Does everyone agree on that this is an objective which is warth pursuing 2scusc incidence of the project simpact using ToC framework Does everyone agree on that this is an objective which is warth pursuing 2scusc incidence of the project simpact using ToC framework Does everyone agree on that this is an objective which is warth pursuing 2scusc incidence of the project simpact using ToC framework Does everyone agree on that this is an objective which is warth pursuing 2scusc incidence of the project simpact using ToC framework Does everyone agree on that this is an objective which is warth pursuing 2scusc incidence of the project simpact using ToC framework Does everyone agree on that this is an objective which is warth pursuing 2scusc incidence of the project simpact using ToC framework Does everyone agree on that this is an objective which is warth pursuing 2scusc incidence of the project simpact using ToC framework Does everyone agree on that this is an objective which is warth pursuing 2scusc in a project simpact using ToC framework Does everyone agree on that thi			
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