



# Mental Health Surveillance in Austria

– new approaches and indicators developed during the pandemic

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First meeting of the Working Group for Mental Health Data

WHO, Copenhagen, 6<sup>th</sup>/7<sup>th</sup> December 2022

Gesundheit Österreich  
GmbH 

# About GÖG

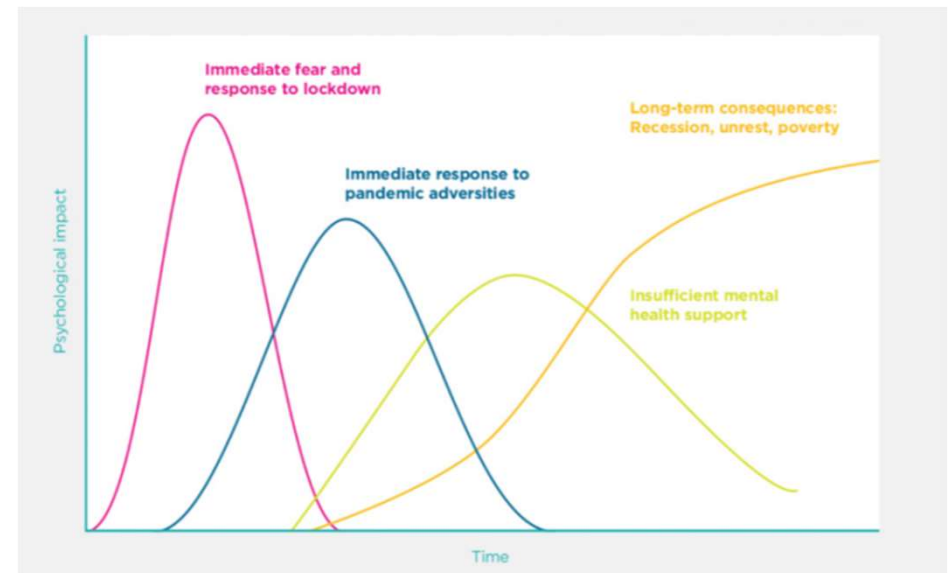
The Austrian National Public Health Institute (Gesundheit Österreich GmbH, GÖG) is the institution responsible for researching and planning public healthcare in Austria, and also acts as the national competence and funding centre for the promotion of health.

GÖG has the federal government as its sole shareholder, represented by the Ministry of Health. It is a public non-profit limited liability company fully owned by the Republic of Austria.

Our fields of expertise and services are extensive, ranging from structural planning and big data to the promotion of health. We also work in pharmacoeconomics, health economics, Health Technology Assessment, quality development & assurance, and have special expertise in areas like addictive behaviour, long-term care, digital health, mental health, health work force planning, and rehabilitation.

# Introduction

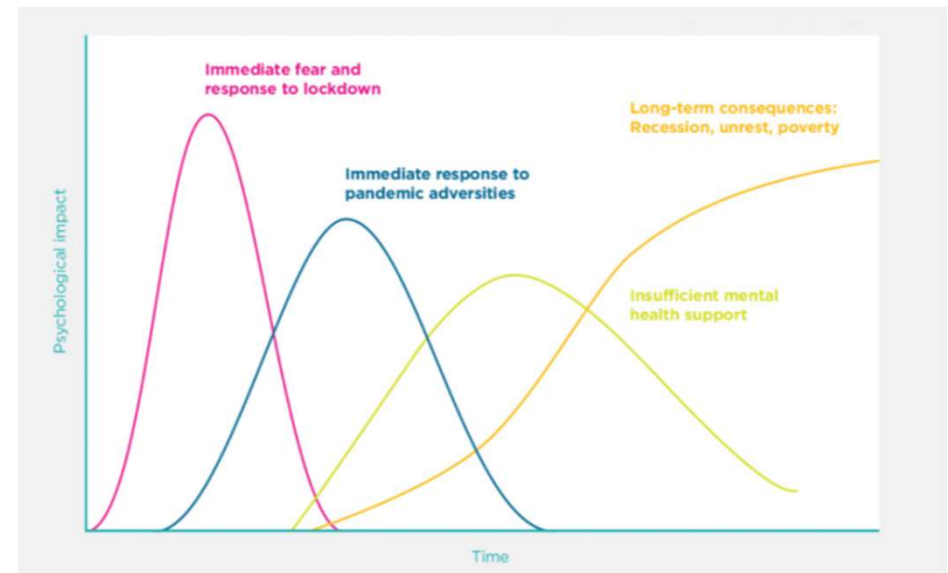
- **Increase in psychosocial problems** due to Covid-19 pandemic was predicted and observed early on
- Considering experience with previous crisis the **peak of psychosocial stress reactions** was expected to occur only after the physical threat has subsided
- → **regular monitoring important**



World Happiness Report 2021 –  
Mental health and the Covid-19 pandemic

# Introduction

- **psychosocial burden** cannot be **quantified** easily → necessary to look at **several different indicators together**
- regular monitoring of psychosocial health in Austria was commissioned by the **Federal Ministry for Social Affairs, Health, Care and Consumer Protection**



World Happiness Report 2021 –  
Mental health and the Covid-19 pandemic

# Project: Monitoring psychosocial health in Austria

- Concept to improve the data situation based on available data sources (routine data)
- Regular processing, analysis and interpretation (together with experts)
- Data availability:
  - timely
  - at a regular basis (monthly)
  - nationwide
  - including at least the year 2019
  - differentiated by gender and age (if possible)
- Project order through: BMSGPK
- Project start: November 2020

# Monitoring psychosocial health in Austria: included data (November 2022)

## **Psychosocial stress within the general population**

- utilization and (partly) numbers of consultation topics from psychosocial hotlines

## **Family stress and (domestic) violence**

- data regarding restraining orders
- number of violence-related consultations from psychosocial hotlines
- data from „Frühen Hilfen“ (Early Childhood Interventions Programme in Austria)

## **Socio-economic situation and unemployment**

- unemployment figures (Data of the Austrian Public Employment Service)
- unemployment rate from High Frequency Monitor (IHS)



# Monitoring psychosocial health in Austria: included data (November 2022)

## **(Treated) mental illnesses**

- inpatient stays in psychiatric care (adults/ child and adolescent psychiatry)
- involuntary placements (without request) in psychiatric departments
- relevant discharge diagnoses

## **Suicidal thoughts, suicide attempts and suicides:**

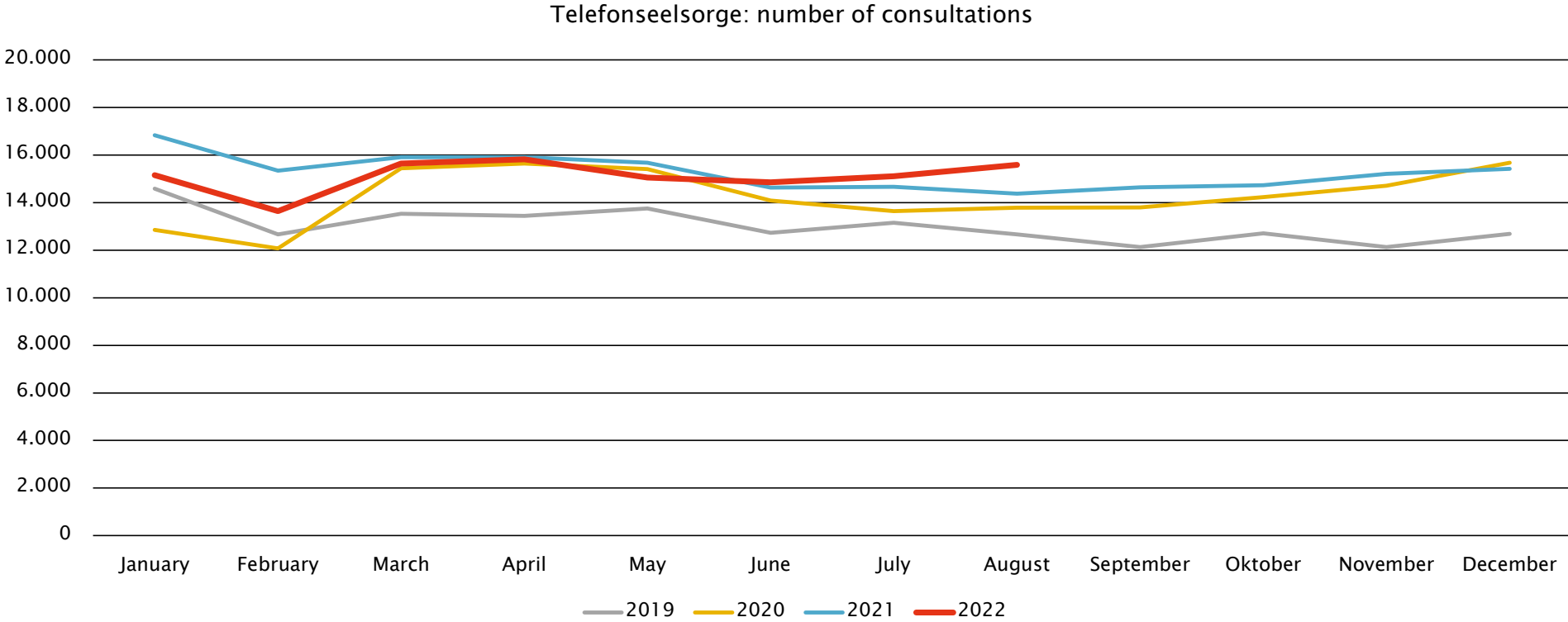
- control center protocols of the emergency organizations (activities associated to suicide attempts) and operational protocols of the crisis intervention teams
- number of suicides from the official causes-of-death statistics (unvalidated numbers for 2022 every 3 months)
- inpatient data (ICD-10 codes regarding suicide attempts, involuntary placements)
- relevant consultation topics from psychosocial hotlines
- numbers of intentional self-poisoning from the Austrian poison control centre



Recent data

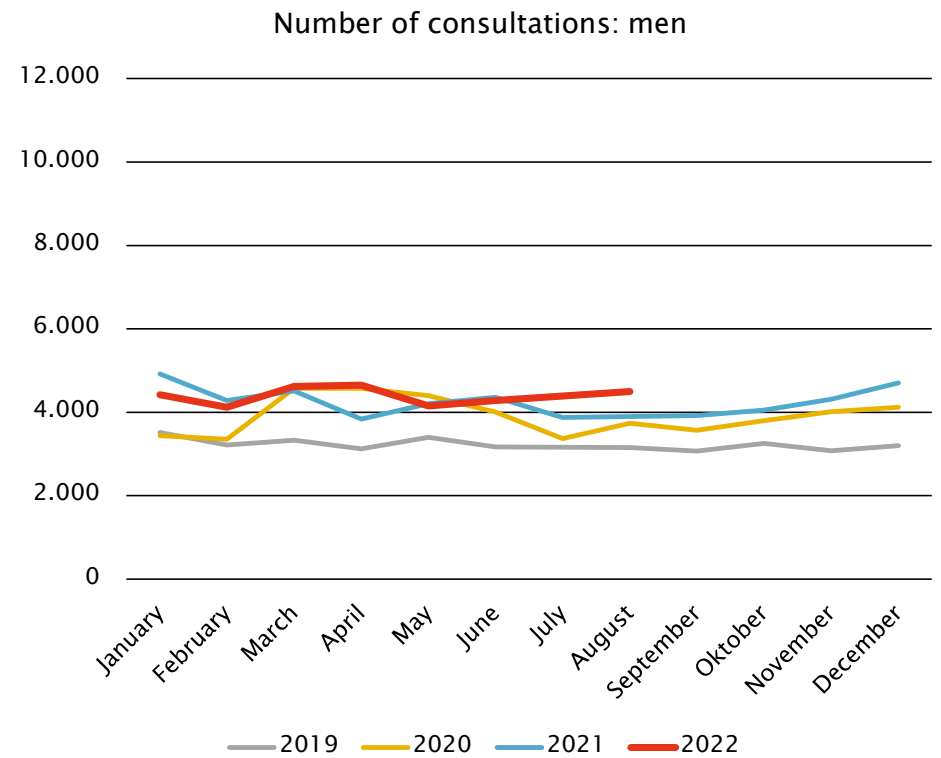
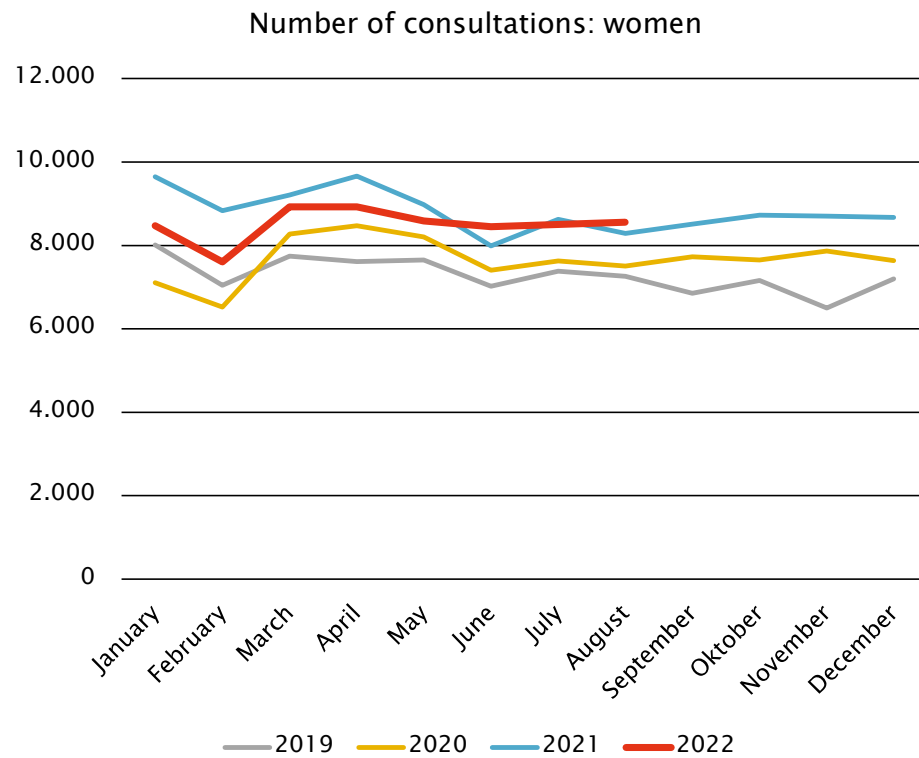


# Psychosocial stress within the general population: psychosocial hotlines



Source: data from Telefonseelsorge Österreich

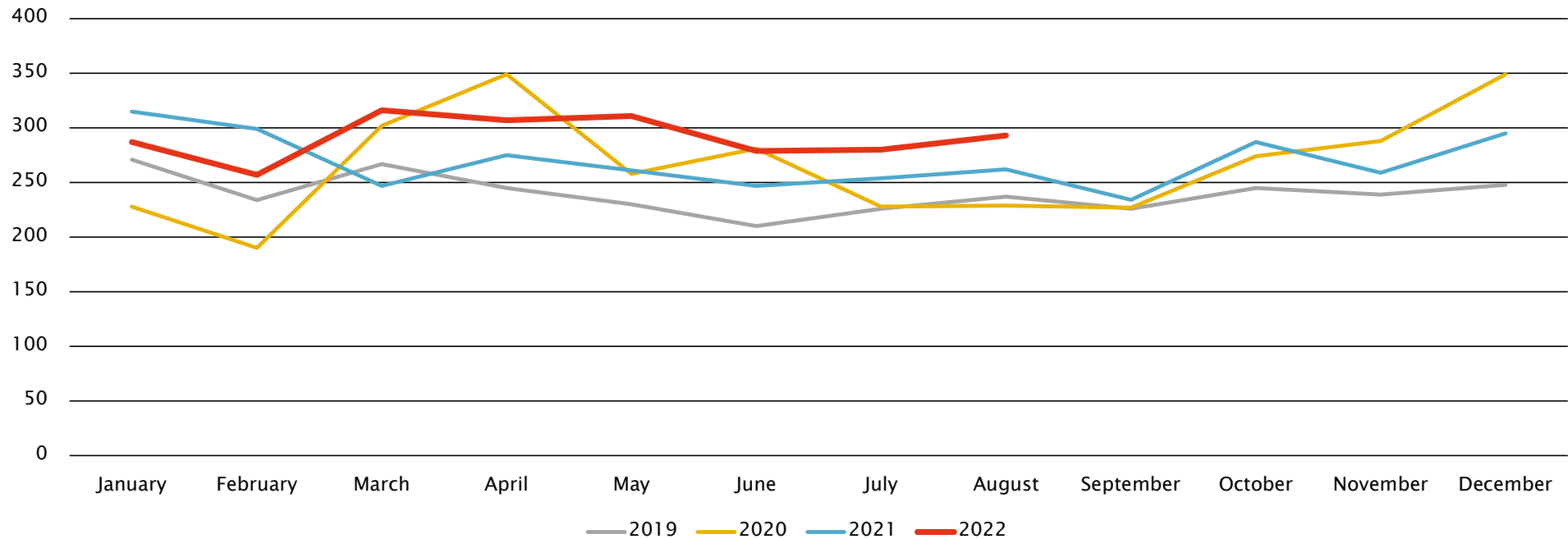
# Telefonseelsorge: Gender differences in utilization



Source: data from Telefonseelsorge Österreich

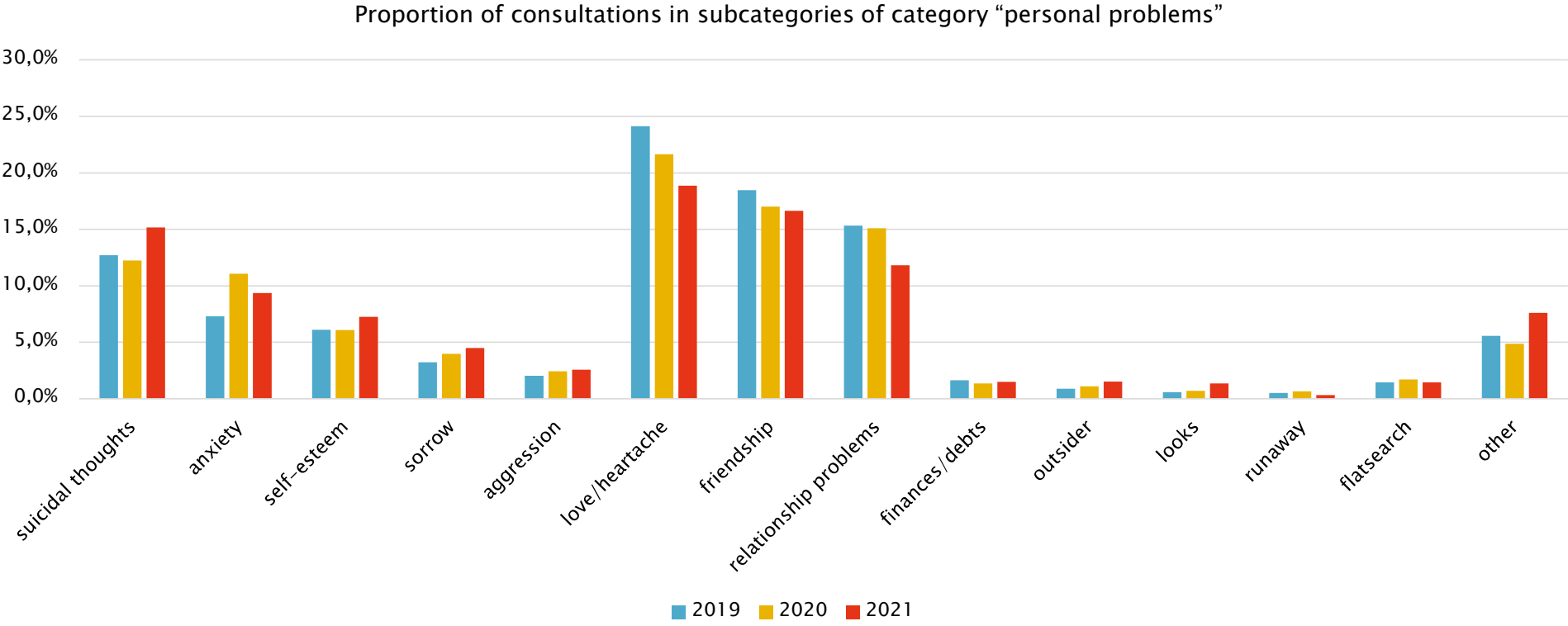
# Telefonseelsorge Upper Austria: consultation topics

Number of consultations regarding the topic  
„Loneliness/isolation/coping with everyday life“



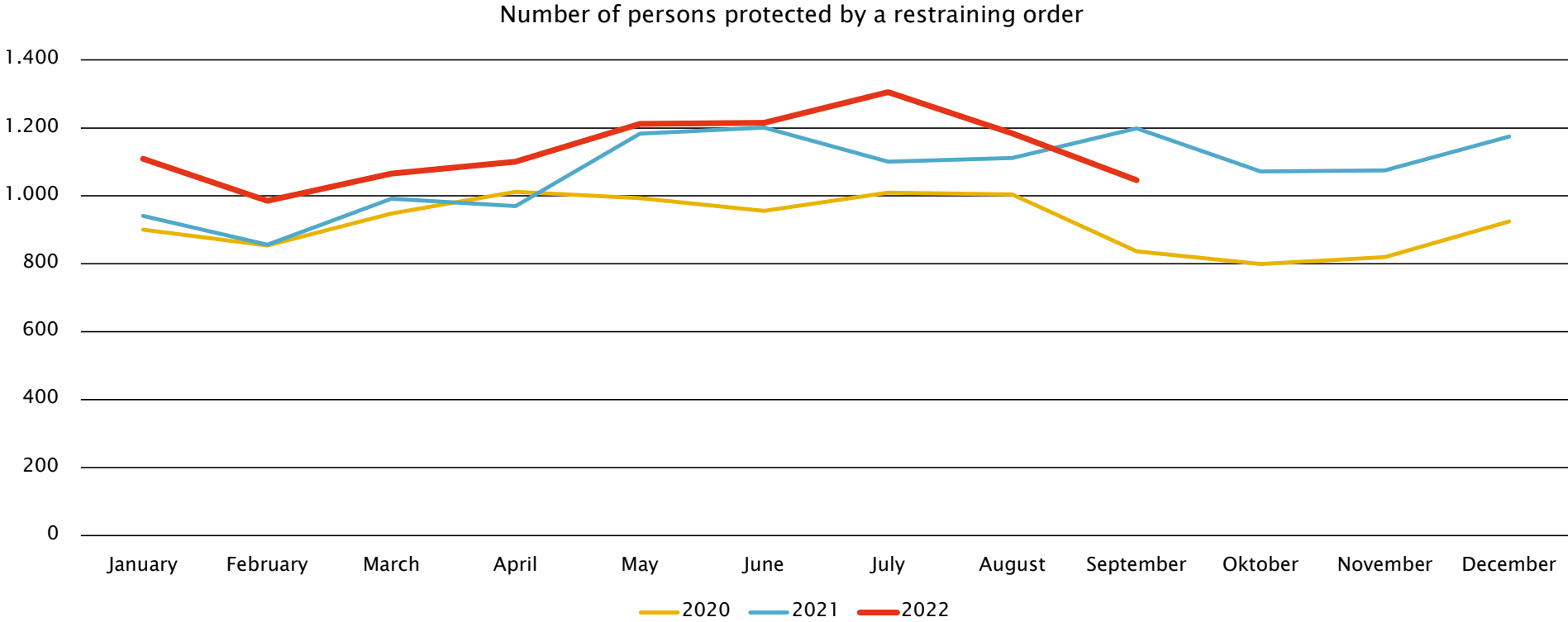
Source: data from Telefonseelsorge Österreich

# Rat auf Draht: shift in consultation topics



Source: data from Rat auf Draht

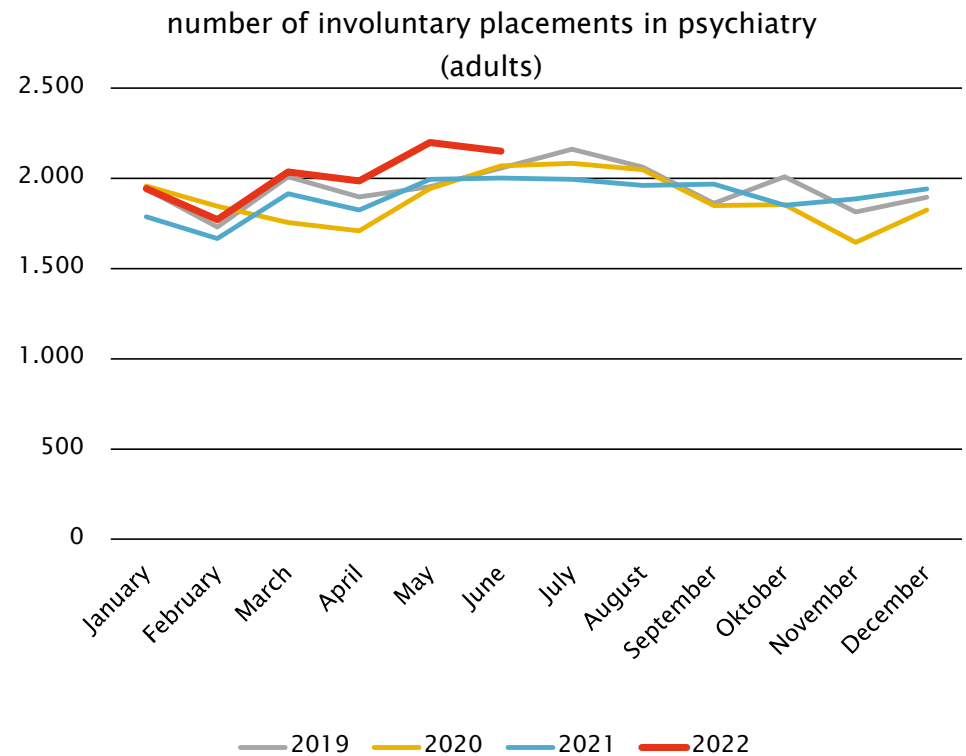
# Family stress and (domestic) violence: restraining orders



Source: data from Bundeskriminalamt (data from 2021 and 2022 unvalidated)

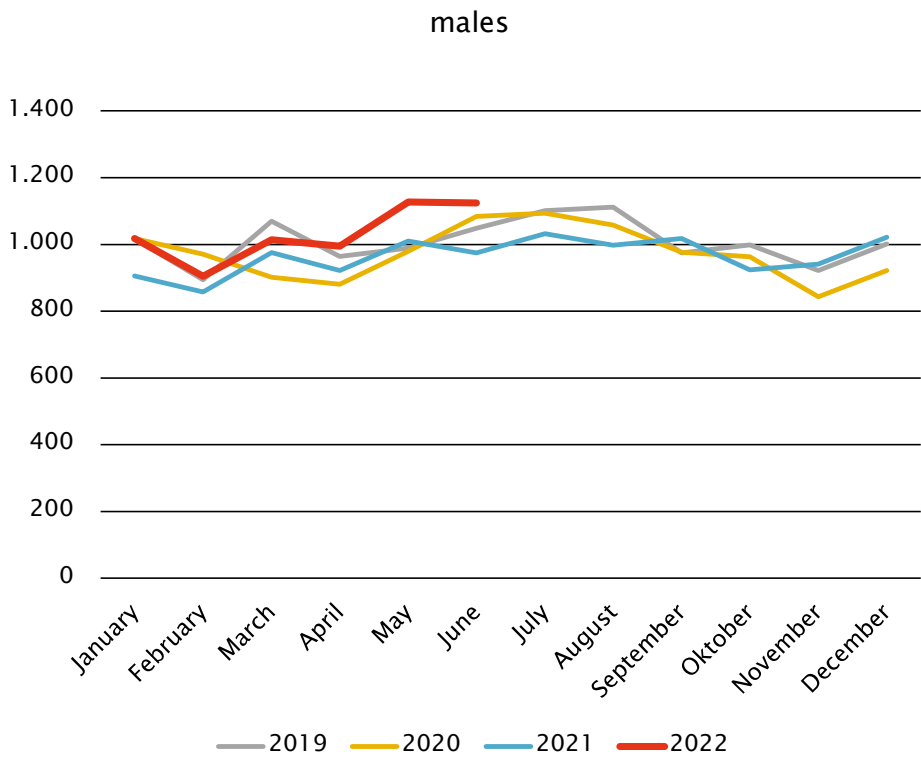
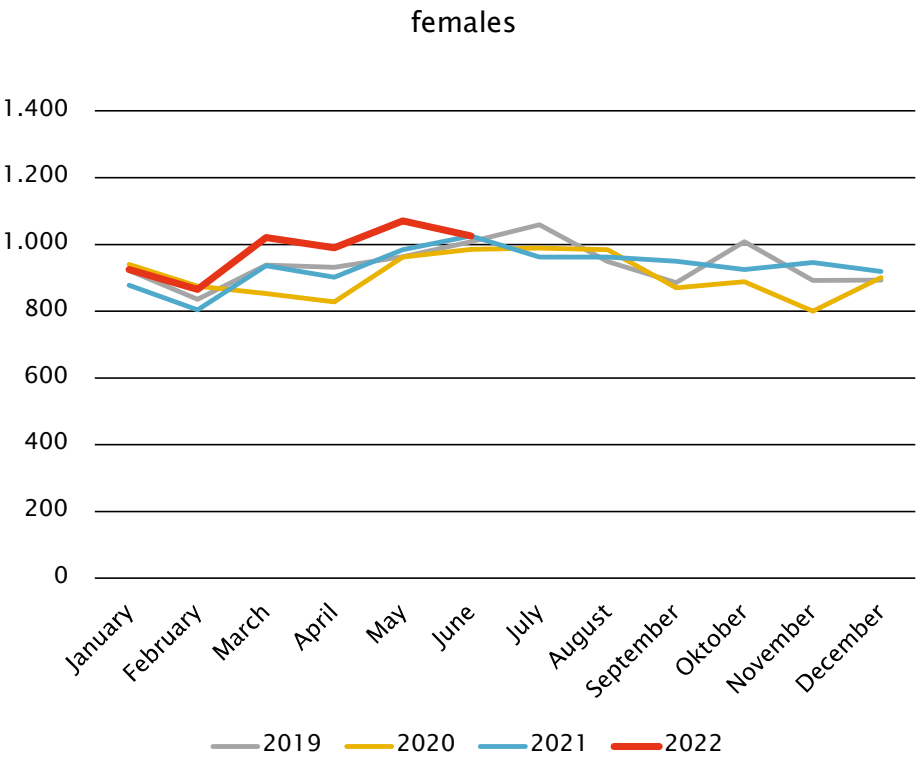
# (Treated) mental illness: utilization of adult psychiatry

**number of admissions** to adult psychiatric units declined at the start of the pandemic, have been increasing again since spring 2021.



Source: data from VertretungsNetz-Patientenadvokatur und Ifs

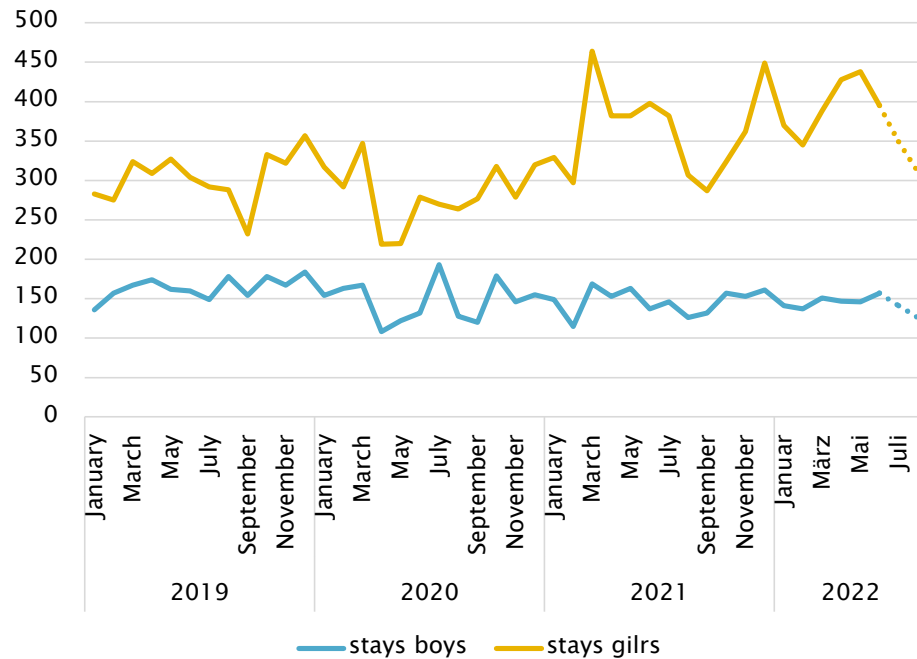
# Involuntary placements in adult psychiatry: gender differences



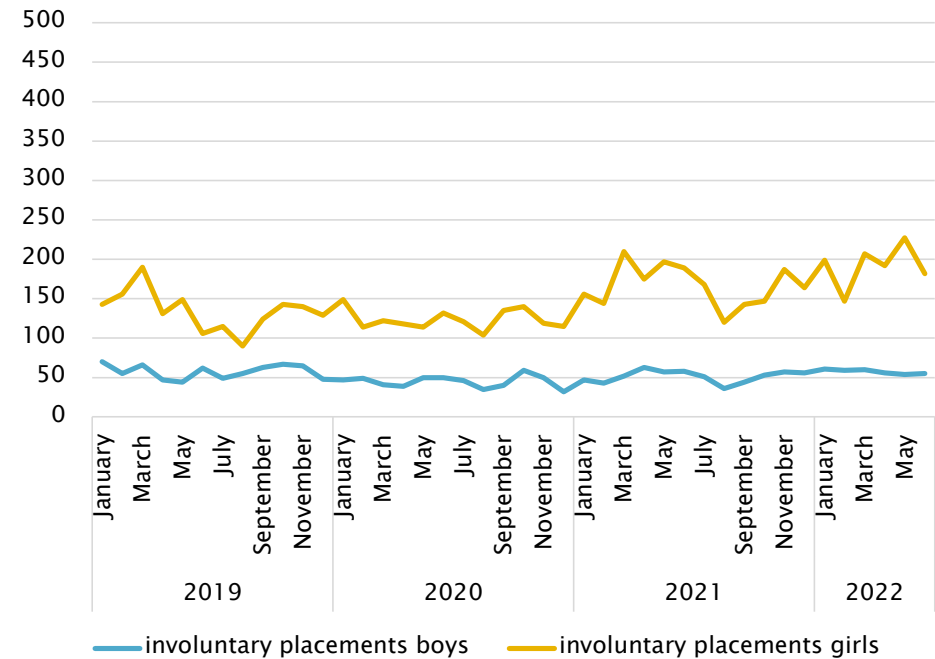
Quelle: Daten von VertretungsNetz-Patientenanzwaltschaft und Ifs

# Utilization of child and adolescent psychiatry

Number of admissions in child and adolescent psychiatry



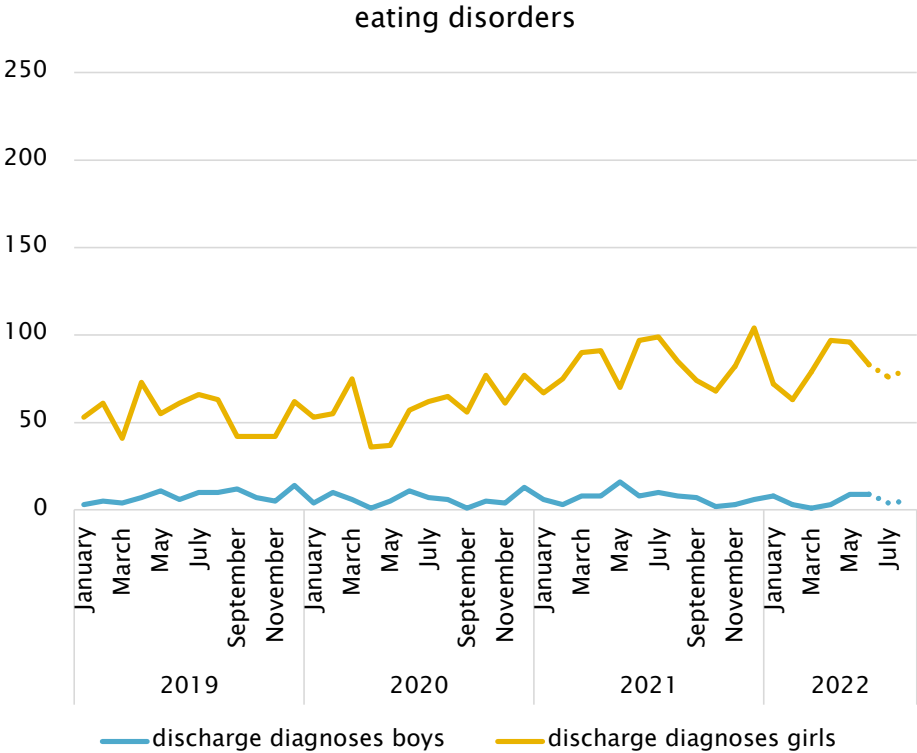
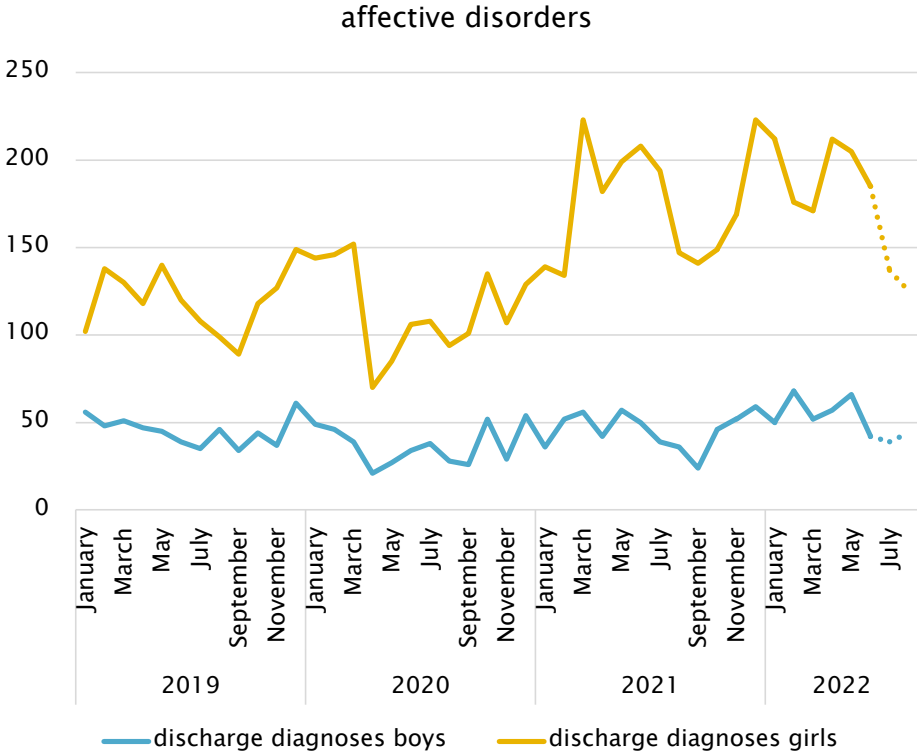
Number of involuntary placements in child and adolescent psychiatry



Source: BMSGPK – Diagnosis and service documentation of the Austrian hospitals (2022 unvalidated data, only hospitals financed by federal states))



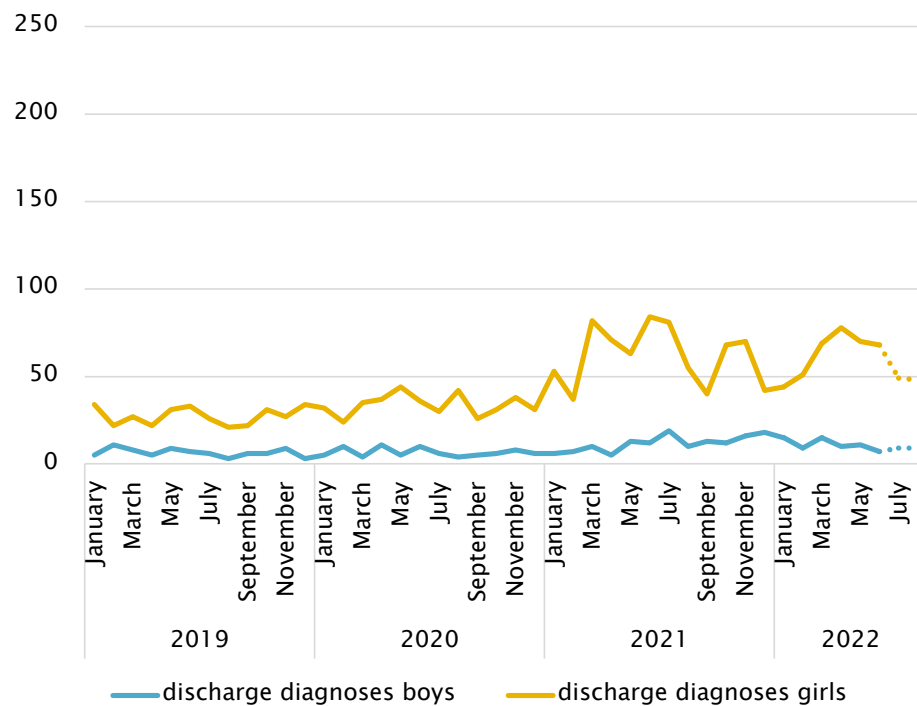
# Selected discharge diagnosis (inpatient stays, minors)



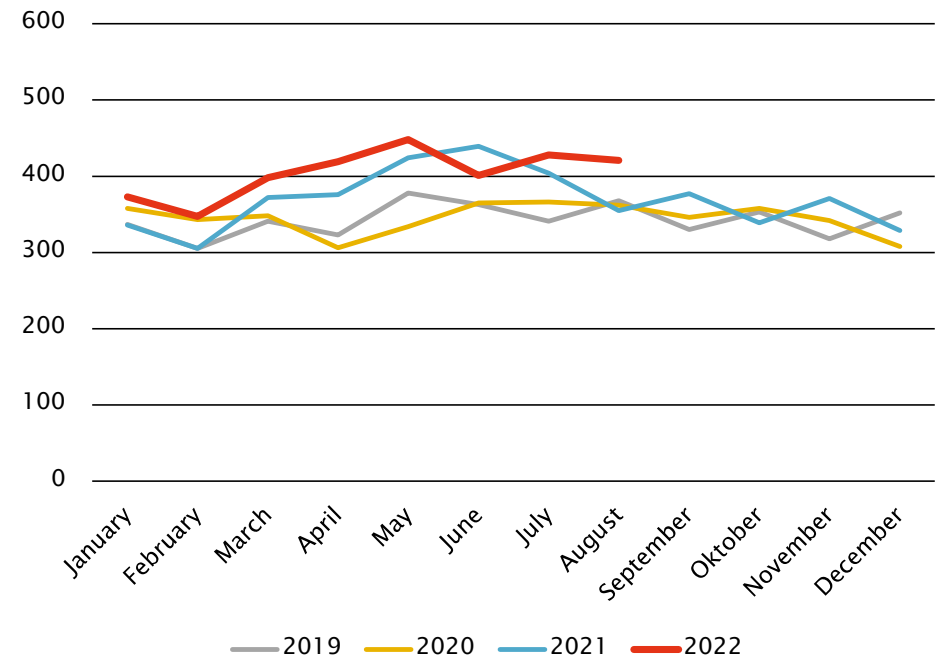
Source: BMSGPK – Diagnosis and service documentation of the Austrian hospitals (2022 unvalidated data, only hospitals financed by federal states)

# Suicide attempts

suicide attempts or intentional self-harm



suicide-related activities of emergency organisations (BL, NÖ, OÖ)

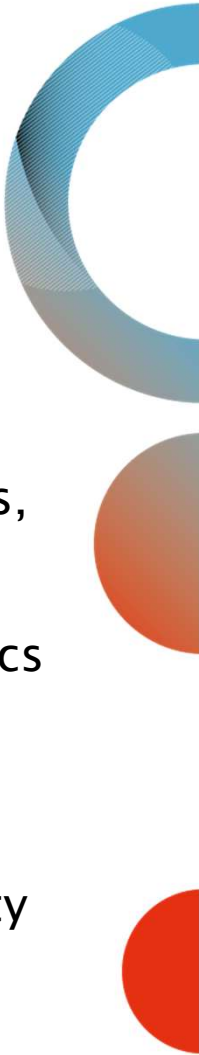


Source: BMSGPK – Diagnosis and service documentation of the Austrian hospitals (2022 unvalidated data, only hospitals financed by federal states)

# Limitations

- Limitations in data availability (not available timely or at a regular basis, no nationwide data, lack of comparative data from before the pandemic)
- Limitations of data on utilization behaviour (due barriers to access, capacity limits, level of familiarity of the service)
- Bias due to (better) availability of certain data → greater emphasis on certain topics
- Additional information from the data-providing institutions often necessary for a valid interpretation

→ only approximation of the actual situation possible, no complete picture of reality



# Conclusions and next steps

- Looking **comprehensively** at **different indicators** proves to be a **good approach** to observe developments in psychosocial health in a timely manner.
  - It is possible to **outline temporal correlations** with the course of the pandemic and **differences in psychosocial stresses between population groups**.
- ➔ Continuation of the project in 2023 under the name „Mental Health Surveillance“, still considered as work in progress, inclusion of new data sources



Many thanks for your attention!

# Contact

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