D2.5 Atlas on Mental Health and Care Innovative Solutions

RUG

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Executive Summary

Deliverable D2.5 presents the Atlas on Mental Health and Care Innovative Solutions, an interactive, searchable map developed as part of the EQUICARES project. This digital tool visualizes innovative mental health care (MHC) services across Europe and selected low- and middle-income countries. Primarily targeting policymakers, the Atlas facilitates the identification of best practices and supports cross-border knowledge transfer to improve MHC accessibility for vulnerable groups.

The Atlas consolidates data from literature reviews and digital ethnographies of MHC innovations in both Europe and Low- and Middle-Income Countries. Users can navigate the repository using filters for country, organizational form, target group, level of prevention in MHC and innovation type—including categories like task shifting, tele-health, or holistic approaches. Each provider profile includes structured details on services, funding sources, and direct website links.

Future iterations will integrate Agent-Based Models (ABM) to offer "what-if" scenarios, allowing stakeholders to simulate the societal impact of introducing new MHC services. To ensure broad local accessibility, the project is also implementing AI-supported translations. Beyond being a dissemination tool, the Atlas provides the empirical foundation for local Smart Health Labs and a forthcoming AI-based mental health support tool.

Technically, the Atlas adheres to a standardized data structure with manual validation to ensure information quality and reliability. It is fully compliant with GDPR, utilizing only publicly available company-level data rather than personal information. As a "living document," the Atlas is designed for continuous updates and long-term sustainability to remain a relevant resource beyond the project's official runtime.

Keywords: Mental health care, innovation, interactive map, dashboard.

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Table 1. Terms and Definitions

Abbreviation	Definition
ABM	Agent-based model
AI	Artificial Intelligence
DX.X	Deliverable (Number as part of the project)
GA	Grant Agreement
LMIC	Low- and Middle-Income Countries
MHC	Mental health care
TX.X	Task (Number as part of the project)
WP	Work package

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1. Introduction

1.1 Aim and contribution

This report is an auxiliary document to the Atlas on Mental Health and Care Innovative Solution developed as part of the Horizon Europe EQUICARES project. The Atlas takes the shape of an interactive map that visualises innovative solutions of mental health care (MHC) across different European and low- and middle-income countries around the world. Besides indicating the locations of mental health care service providers with innovative approaches, the Atlas also includes further information on, for instance, their target group and services offered. Links to the websites of the service providers are available, so that users of the Atlas can learn more details about the providers directly from their online presences.

The intended target audience for the Atlas on Mental Health and Care Innovative Solutions are policymakers who are interested in understanding, shaping and improving the equality of access to mental health care in their regions and countries. For this purpose, the Atlas includes a thorough collection of MHC services per country and policy-relevant information on them (e.g., general funding sources, cost of services to the end user). However, the list of services included in the Atlas is by no means exhaustive and only aims to cover a selection of important innovations in the way that MHC is organized and delivered at different levels across the health care system in a range of European countries.

1.2 Contextualization within EQUICARES project

Using information gathered as part of WP2, tasks 1-3, the Atlas relies on work carried out by EUCOMS, Koç University, the University of Groningen, and all partner organizations within the project. It combines and visualizes the data from the (grey) literature review on MHC services addressing accessibility barriers conducted in T2.1, the European innovative MHC services investigated via digital ethnography in T2.2 and the innovations in MHC in low- and middle-income countries analysed in a second digital ethnography in T2.3. Bringing together information from different tasks and sources, we hope to provide a good overview of the innovations being implemented across the world.

While being informed by previous tasks, the Atlas also forms the base for currently running and future work within the EQUICARES project. The existing and mapped MHC innovative solutions function as sources of information and inspiration for the development of Smart Health Labs in the pilot areas. Further, available lists of services per country are a resource that feeds into the creation of an AI-based mental health support tool. In the greater scheme of the project, the Atlas is an important tool for the dissemination of our findings on how accessibility barriers can be addressed and accessibility can be improved for different groups across different places.

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A policy dashboard that combines policy recommendations, cost evaluation guidelines, and an AI-based MHC assistant is also under development. The Atlas will be integrated into the policy dashboard once this becomes available.

2. Development of the Atlas

2.1 Creation of the Atlas

The interactive map that forms the heart of the Atlas on Mental Health and Care Innovative Solutions was created with the help of the Geodienst of the University of Groningen based on a spreadsheet of MHC services gathered by the researchers and pilot partners in this project. In a first step, the general purpose of dissemination and visualization of innovative MHC services identified through the project was defined. During a partners meeting, a participatory workshop was held that engaged participants in groups to brainstorm functionalities for the Atlas for different groups of users (policymakers, researchers, MHC professionals, MHC end users). The workshop generated first ideas for layout, design, filtering and downloading options for the Atlas. Later in the process, the main target audience for the Atlas was decided to be pilot partners for the further development of the local Smart Health Labs as well as policymakers interested in improving the accessibility of MHC services and facilities in their respective regions.

The current version of the Atlas was developed and built by the Geodienst as requested by the University of Groningen researchers. The development of the online version of the Atlas happened in stages with several feedback moments that allowed for recalibration and refinement of the Atlas before they were presented to the consortium for further feedback. While that feedback is still being implemented at the time of writing, the next steps are already clear: A version of the Atlas with all information included from all relevant tasks and pilot partners will be presented to the Network of Interest to share this tool with external stakeholders and policymakers. Their feedback will be collected to further improve the user experience. Contents will be updated when more information becomes available.

2.2 Content and structure of the Atlas

The Atlas[1], functions as an interactive and searchable repository of innovative MHC services identified as best practices within the scope of the EQUICARES project. Though it is currently deployed independently, it will be integrated into the official EQUICARES project website at a later stage. The Atlas aims to support the dissemination of these innovations and best practices to our Network of Interest members and relevant stakeholders outside of the project. This way, these best practices might be tested and implemented in other places, improving access to MHC services and facilities. The main content of the Atlas is the mapping and presentation of the services in the form of an

[1] Currently available through this URL:
https://rug.maps.arcgis.com/apps/dashboards/ac74d7d138624b38b5c1feb69d7ec80a

interactive map that lets users explore the MHC services broadly and in more detail (by clicking on individual service providers' markers on the map). Information is presented about the services in terms of the location, target audience and services offered, as well as a classification of what innovation they implemented, which part of prevention care they belong to and what type of institutions provide their funding. For even more detailed information, the websites of the service providers are linked in the descriptions that pop up in the Atlas map section. A free search function is under development, so that users of the Atlas will soon be able to conduct a search across all services for a certain topic or approach via a query in a search bar. Further, the users will be able to select services they are interested in and download all information available on these services.

Another section of the Atlas will be based on the Agent-based models created in T2.2 and presented as part of D2.2, indicating how the presence and characteristics of MHC services affects the population's risk of mental health issues. The plan is to provide a range of what-if scenarios, so that users of the Atlas can specify their country/region, target group and the kind of MHC service they would like to introduce to the market and then they will receive an estimation of what the effect would be on the local at-risk population. Because of the data requirements for these scenarios, at this time, this will only be available for the pilot regions included in the project.

Table 2. Categories available for filtering of services, presented in alphabetical order

Type of provider	Target group	Type of innovation
Association Collective Community Foundation Governmental service NGO NGO Network Non-profit Private healthcare Project Public healthcare Semi-private healthcare University	Children & minors Earthquake victims General population Individuals with addictions Individuals with chronic diseases Individuals with mental health issues LGBTQIA+ Migrants & refugees Older adults Policymakers Professionals Psychosis patients Relatives Roma/ Traveller community Socially excluded Women Youth	Accessibility improvement Advocacy Art-based Community-based Culturally adjusted Digital tools Holistic approach Mobile units Multidisciplinary approach Personalization of care Professionalization of care workers Specialized care Systemic changes Task shifting Task sharing Tele-health

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3. Functions and User Experience

3.1 Target users

The Atlas is designed to provide a user-friendly experience and intuitive navigation for a range of stakeholders, including policymakers, local authorities, service providers, and researchers. It is a tool for users to identify relevant MHC services that have implemented innovations to improve accessibility. While the Atlas does not represent a complete list of services across the included countries, the best practices presented are diverse in scope and cover different target groups, innovations and operational forms. This should facilitate the possibility of finding a solution that can easily be translated into the context of a policymaker user of the Atlas.

The user experience was developed to be accessible, easy to navigate, and aligned with the overall work of the EQUICARES project. As a repository of good practices in MHC innovation, the Atlas supports learning, knowledge transfer across borders, and replication of solutions in different geographical and cultural contexts by allowing users to explore service providers via different starting points: thematic, organizational, and target-group-based.

3.2 Navigation and layout

The Atlas landing page provides the user with a map of all Mental Health and Care Innovative Solutions identified through WP2 of the EQUICARES Horizon Europe project. Upon first visiting the Atlas website, the user is presented with a splash screen containing a short summary of the project and the goal of the Atlas and its main functionalities. On that map, all main office locations of MHC services are indicated with an icon that represents the respective target group of the service provider. A legend of these will be included in the next update of the Atlas. The map is draggable and zooming in and out works intuitively. Via the different forms of markers across the map, cross-country differences and similarities in target groups for innovative MHC solutions in the Atlas data can easily be explored.

To the left of the interactive map, the distribution of services across different countries and legal forms is presented in the form of two clickable bar diagrams. These also function as filters via a click on the chosen category bar (e.g., on “Turkey” to only view Turkish innovative MHC providers). A second click on that category bar removes the filter and makes all services visible again.

Above the interactive maps are two more category-based filters and a free-text search bar. The filter categories here are type of innovation and target group (for the MHC services). An overview of the available categories for both can be seen in Table 2. The free search bar allows users to enter a search term and find services that match. The functionality of the search bar is still a work in progress.

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Finally, on the right-hand side, a list of all services available is presented in alphabetical order including the icons representing the target groups they serve. A menu in the top right corner allows the user to open the “Information/Help” section that was the original splash screen upon first opening the Atlas. In future updates, a user guide and FAQs will be added to the menu section. The Atlas and the splash screen can be seen below in Figures 1 and 2.

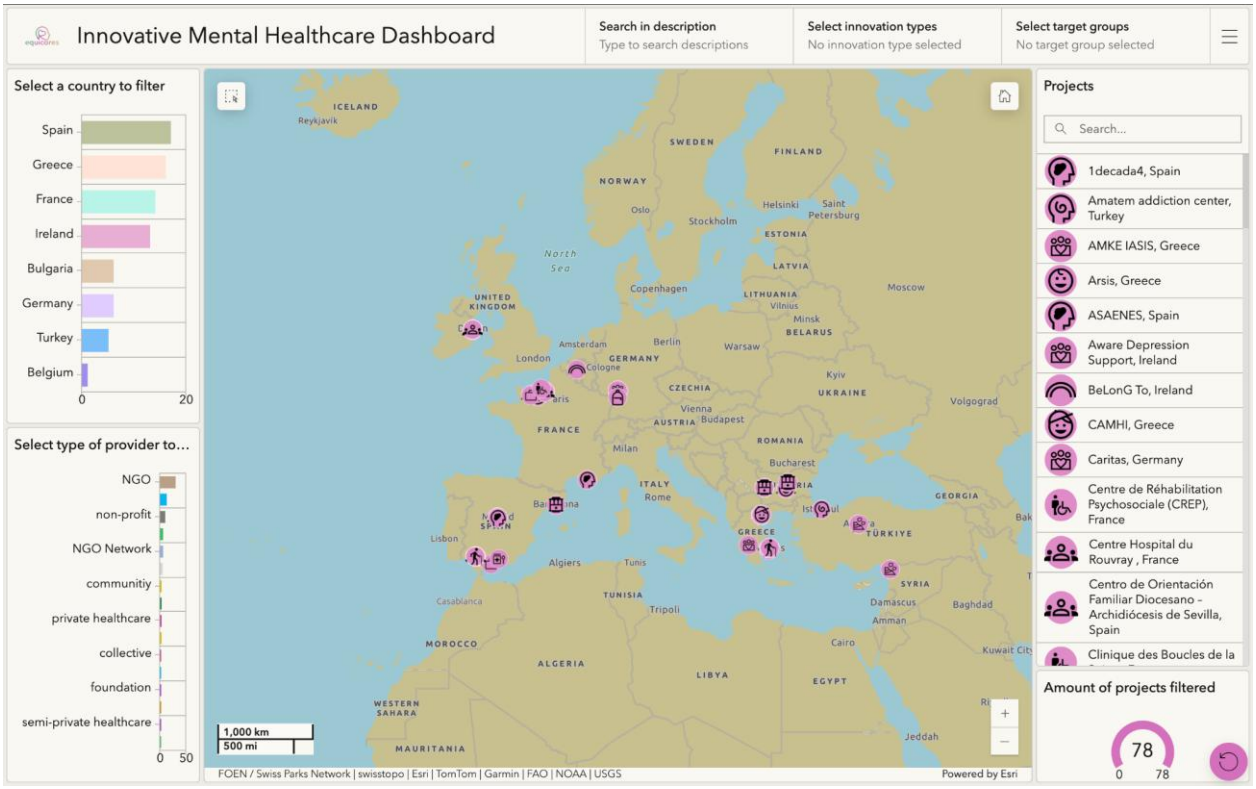

Figure 1: Screenshot of the landing page (draft version of Atlas).

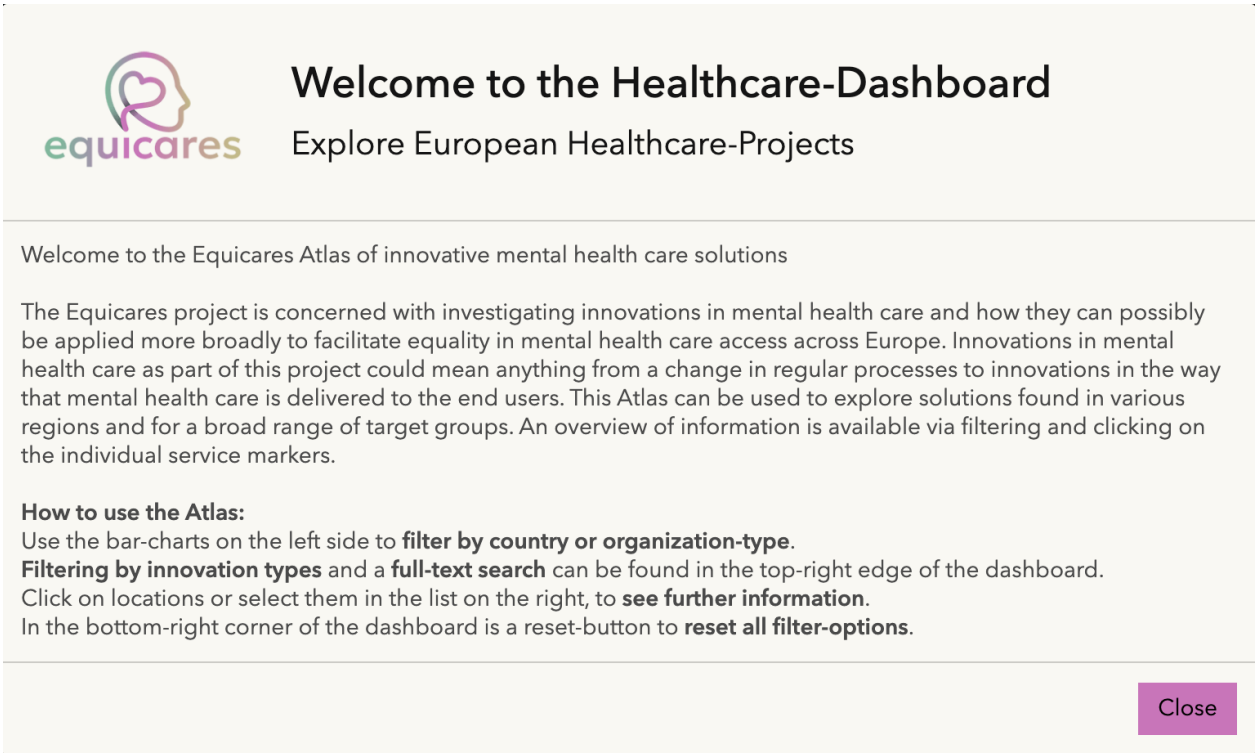

Figure 2: Screenshot of splashscreen (draft version of Atlas).

A user guide and a list of frequently asked questions will be made available for users of the Atlas to support the ease of navigation and ensure that the users have knowledge of all functions of the Atlas. Questions and answers to be presented in this section are currently still being gathered from the pilot partners and internal reviewers of the Atlas.

3.3 Filtering and search options

The data currently can be filtered by country and type of provider (in terms of their legal form), target group, and type of innovation applied. The classification of innovations relies heavily on previous work published as project deliverables D1.3 (Q-Plan, 2026), D2.1 (EUCOMS, 2026), D2.2 (University of Groningen, 2026), and D2.3 (Koç University, 2026). Innovation is understood as a change in the way that MHC is delivered or organized so that it becomes more accessible or acceptable for vulnerable groups. The possibility to filter on the part of the prevention system (primary, secondary, tertiary, and integrated/community care) is still being worked on at the time of writing. A search bar for free text search among the services and service descriptions is available but its functionality is still being improved, so that the search result can be presented in a less cluttered way. Both filtering options and the search bar can be seen above in Figure 1.

All filters can be used to explore and understand the spread of, for instance, innovations across countries by filtering by specific innovation types and comparing their locations. Further information on all services is available upon clicking on their marker. Seeing the same approach across different

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regions and contexts generally indicates that that approach can be transferred to help improve equitable MHC access across different regions.

3.4 Service provider profile and information display

Each service provider is presented via a small service provider profile pop-up upon clicking on the respective icon on the map. These include structured information on the MHC service provider in the following format:

1) Name of the provider
2) Short description of the service entails
3) Address (of the main office)
4) Target group
5) Type of provider (i.e., organizational form)
6) Funding sources in broad categories
7) Link to their official website

3.5 Export and download function

To facilitate the use of the Atlas as a resource outside of the EQUICARES project, there will be an option to select cases (service providers) and export a list of them including all the information that is available via the service provider profiles. At the moment of writing, this has not yet been implemented but will be added in the next revision of the Atlas. The data can then be downloaded either in .pdf or .xls format. This downloading function facilitates the comparability of services across regions, as this allows the users to see all selected services and their respective characteristics side-by-side. While the interactive map allows for easy and intuitive first exploration of the services addressing different barriers to MHC access, cross-provider comparisons are more easily done in a downloaded table version of the data. Cross-regional or cross-country comparisons are more difficult to make because of the heterogeneity of services and solutions per region.

4. Future additions

4.1 Agent-based models and what-if scenarios

Future additions to ATLAS can provide information on how the identified MHC providers can impact on the region's wellbeing. For the purposes of D2.2, an agent-based model (ABM) was designed and implemented for each pilot area. The findings of the model can be implemented in the Atlas to inform policymakers and governmental institutions on the societal impact of MHC providers and aid them in designing the appropriate strategy to ensure the sustainability of the existing MHC providers. The ABM analysed the effect of MHC on individual citizens over a period of 12 months (see D2.2 for more information on the specifics of the ABM). The model tracks the number of people who decide to engage with MHC services and quantifies the effect of a successful engagement. Based on

information from the survey conducted in WP1 in Task 1.4, we have created a synthetic population for each pilot area such that each artificial individual is characterised by sociodemographic characteristics (i.e., age, gender, education level) and characteristics on their mental wellbeing (i.e., mental health status, whether they required a MHC service, and how they would rate the MHC service). Specifically, each individual is characterised by a mental health index, ranging from 0 to 1, which measures their overall need for MHC (the greater the value of the index the greater the need). The Atlas can report the change in the aggregate MHC need at each period (month) of the ABM horizon to show how existing MHC services reduce the need for MHC (by improving the mental health status of individuals).

As part of the ABM analysis, we also consider what-if scenarios to examine the impact of an additional (hypothetical) MHC service for each pilot area. The results suggest that the decrease in mental health need caused by a new provider differs across the pilot areas. These results can be incorporated in the Atlas (similar to the results from the previous ABM). Finally, given that it is computationally efficient, the Atlas could potentially contain a dynamic creation of an additional MHC provider where the user could select the attributes of the new provider (i.e., type of service, target group, etc) and obtain the results based on their parameterisation. This would enable policymakers and stakeholders to evaluate different scenarios based on their needs and select the most appropriate one.

4.2 AI-supported translations

As of now, the Atlas is only available in English. However, to improve the accessibility of the Atlas to local stakeholders across all pilot countries and beyond, we are working on translating all information presented in the Atlas into the local languages of all pilot regions. This will be done with the help of AI tools available to be implemented on the backend of the Atlas. The translations ensure that policymakers and other stakeholders will be able to make use of the repository of innovative MHC services and best practices regardless of their level of English language skills.

4.3 Profiles of select services

Based on the work performed in T2.4 and resulting in D2.4, evaluations of a select group of 20 innovative MHC solutions will be added to the Atlas in the near future. These evaluations have been performed by local relevant stakeholders with knowledge about and experience in the sector of mental health. The evaluations rate the MHC solutions on their approachability, appropriateness, affordability, availability, and acceptability, in line with the Levesque framework that is applied throughout the whole EQUICARES project (Levesque et al., 2013). Individual service profiles developed via these evaluations will be visualized in the form of spider charts and additional important pros and cons of the select services might be added gradually to the Atlas as well. The charts together with more background information on which Levesque access dimensions different regions value the most, allow for meaningful comparisons across regions and countries.

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4.4 Current & future functions

For a better overview of which functions are available in the draft Atlas at the time of writing this report versus the planned additions for the future, see Table 3 below.

Table 3. Current and future functions of Atlas.

Currently available	Future functionalities
Data on European innovative MHC solutions and providers	Data on innovative MHC solutions from LMICs
Filtering by *target group & type of innovation*	Filtering by *level of prevention & barriers addressed*
Interactive map with services marked	Interactive ABM to estimate impact of service on at-risk population
Basic search bar (free text search)	
Service profiles with most important information in English	Translations of all information and options into relevant languages
Welcome text and basic information on project and functions in splash screen	Separate user guide section and FAQ section to facilitate most efficient use of Atlas
Comparisons based on characteristics of services and providers	More detailed evaluations of 20 solutions (D2.4) will be integrated into the Atlas to allow for more meaningful comparisons between regions/ countries

5. Technical considerations

5.1 Data structure, validation and quality control

To ensure the uniformity of the data and information included in the Atlas, all data on MHC solutions is gathered in a standardized spreadsheet format, also used for the digital ethnography of innovative European MHC services in T2.2 and D2.2 (University of Groningen, 2026), respectively. Only relevant services with sufficient information available are included in the Atlas. As the addition of new services is managed by the originators of the structured spreadsheet format, all data is entered in the same way and the same categorization is applied across all cases of service providers. Links to websites are checked for functionality and appropriateness prior to inclusion in the Atlas. This manual entry and validation process serves as quality control for the information included in the Atlas and thus strengthens the reliability of it.

5.2 GDPR and data protection

The Atlas is intended as an online repository of MHC services and best practices and was created solely based on publicly available information that the service providers share on their online presences (websites and social media). All data presented in the provider profiles represents company-level information. No personal data has been collected to create the Atlas, nor is it collected

from the users of the Atlas in any way. If at any point required, a privacy notice and terms of use will be made available on the website or within the Atlas.

5.3 Sustainability and scalability

The Atlas is created as a living document that regularly gets updated throughout the runtime of the EQUICARES project as new services in the target regions become available. Ideally the relevance of the Atlas remains strong even after the project concludes. Therefore, the plan is that the Atlas stays available beyond that. Considerations for future sustainability of the Atlas include a clear governance structure for the Atlas and possible new additions of data, continued hosting and maintenance of the platform, the continuation of quality assurance of all data included, and compatibility of any modifications and new additions of services with the running version of the Atlas.

6. Conclusions and next steps

This deliverable presents the first version of the EQUICARES Atlas on Mental Health and Care Innovative Solutions, a dynamic online repository designed to facilitate the identification, exploration and dissemination of innovative mental health and care practices across Europe and selected low- and middle-income countries. Building on the findings of Tasks 2.1–2.4, the Atlas consolidates evidence on innovative services, their characteristics, target populations and approaches to improving access to mental health care, particularly for people in vulnerable situations.

As laid out in this document, the Atlas is a living document that gets updated, improved and adjusted quite a bit across the remainder of the project runtime. A draft version is currently available with many additions and changes still being under development. These include:

- Addition of more services in several regions to cover a broader range of services and innovations
- Refinement of filtering and search options (e.g., by including tags on the backend and the ability to filter on part of the prevention system) to ensure a positive user experience and ease of use
- Provision of an easy user guide explaining the main features and functionalities of the Atlas along with FAQs
- Translations of all information into relevant languages
- Collection of feedback among end users of the Atlas through the Network of Interest of the project

Further, the Atlas will inform the development of the Smart Health Labs (WP3 & 4), as the included services and best practices can support the ideation and development of innovative solutions in the project pilot regions. The Atlas will also be embedded into the policy dashboard (T5.2) to provide policymakers with comprehensive information on a range of innovations in mental health care, how they could be implemented in new contexts and how their cost-benefit can be evaluated. Once the policy dashboard is available, the Atlas will be moved from its independent web presence and integrated into the dashboard.

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GA 101156500

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SEERC SOUTH-EAST EUROPEAN RESEARCH CENTRE

GIVMED Share medicine Share life

AMALIPE Center For Interethnic Dialogue and Tolerance

LADAPT

LGBT IRELAND For Inclusion For Equality For Everyone

FISEVI Fundación para la Gestión de la Investigación en Salud de Sevilla

Zentralinstitut für Seelische Gesundheit

Q-PLAN INTERNATIONAL

JIGSAW Young people's health in mind

EHTEL Collaborating for Digital Health and Care in Europe

diesis network

EUCOMS The European Community based Mental Health Service Providers Network www.eucoms.net

EASPD European Association of Service providers for Persons with Disabilities

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