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**MINISTRY OF HEALTH OF UKRAINE  
ODESA NATIONAL MEDICAL UNIVERSITY**

Department of Family Medicine and Polyclinic Therapy



**CONFIRMED by**

Prorector for scientific and pedagogical work

Eduard BURYACHKIVSKIY

September 1<sup>st</sup>, 2024

**WORKING PROGRAM IN THE DISCIPLINE  
"MENTAL DISORDERS IN THE PRACTICE OF A FAMILY DOCTOR"**

**Level of higher education:** second (master's degree)

**Field of knowledge:** 22 «Health care»

**Specialty:** 222 «Medicine»

**Educational and professional program:** Medicine

The working program is compiled on the basis of the educational and professional program "Medicine" for the training of specialists of the second (master's) level of higher education in the specialty 222 "Medicine" of the field of knowledge 22 "Health care", approved by the Academic Council of ONMedU (Protocol No.10 dated June 27, 2024).

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The working program is approved at the meeting of the department of general practice, family medicine and polyclinic therapy  
Protocol No. 1 dated August 29, 2024.

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Protocol No. 1 dated August 30, 2024.


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Revised and approved at the meeting of the department of \_\_\_\_\_

Protocol No. \_\_\_ dated \_\_\_/\_\_\_/20\_\_.

Head of the Department

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## 1. Description of the discipline:

Name of indicators	Field of knowledge, specialty, specialization, level of higher education	Characteristics of the discipline
Total number: Credits of ECTS: 3,0 Hours: 90 Content modules: 4	Field of knowledge 22 «Health care»  Specialty 222 «Medicine»  Level of higher education second (master's degree)	<i>Full-time (day) education</i> <i>Elective course</i>
		<i>Course: 6</i>
		<i>Semester: XI - XII</i>
		<i>Lectures (0 hours)</i>
		<i>Seminars (0 hours)</i>
		<i>Practical classes (30 hours)</i>
		<i>Laboratories (0 hours)</i>
		<i>Independent work (60 hours)</i>
		<i>including individual tasks (0 hours)</i>
		<i>Form of final control – Credit Test</i>

## 2. The purpose and tasks of the educational discipline, competencies, program learning outcomes

**Purpose:** deepening, expansion and concretization by the student of higher education of knowledge and formation of elements of professional competences in the field of mental health, in particular regarding the essence of anxiety-depressive disorders, abuse of psychoactive substances, psychoses, dementia, etc. Convenient tools for diagnosis and treatment of mental disorders in primary care, improvement of skills and competences acquired during studying the course, as well as verification of effectiveness and quality their assimilation.

**The tasks of the discipline** are the following:

1. Improving the skills and abilities of diagnosing mental disorders at the primary level.
2. Expanding knowledge about non-drug treatment of patients with mental disorders.
3. Improving the skills of the correct selection of pharmacological therapy for patients with mental disorders in the practice of a family doctor.
4. Increasing knowledge regarding the timely identification of patients with mental disorders who need more intensive treatment.
5. Expanding knowledge about the role of the family doctor in the management of patients with mental disorders.

The process of studying the discipline is aimed at forming elements of following competencies:

### General competencies (GC):

- GC 1. Ability to abstract thinking, analysis, and synthesis.
- GC 3. Ability to apply knowledge in practical situations
- GC 4. Knowledge and understanding of the subject area and understanding of professional activity
- GC 5. Ability to adapt and act in a new situation.
- GC 6. Ability to make reasonable decisions
- GC 7. Ability to work in a team
- GC 8. Ability to interpersonal interaction
- GC 11. Ability to search, process and analyze information from various sources
- GC 12. Determination and persistence in relation to assigned tasks and assumed responsibilities
- GC 13. Awareness of equal opportunities and gender issues.
- GC 16. Ability to evaluate and ensure the quality of the work performed

**Special competencies (SC):**

- SC1 – Ability to collect medical information about the patient and analyze clinical data.
- SC2 – Ability to determine the list of laboratory and instrumental studies and evaluate their results.
- SC3 – Ability to establish a preliminary and clinical diagnosis of the disease.
- SC6 – Ability to determine the principles and nature of treatment and prevention of diseases.
- SC7 – Ability to diagnose emergency conditions.
- SC8 – Ability to determine tactics and provide emergency medical help.
- SC 11 - The ability to solve medical problems in new or unfamiliar environments in the presence of incomplete or limited information, taking into account aspects of social and ethical responsibility, including the system of early intervention.
- SC16 – Ability to maintain medical documentation, including electronic forms
- SC 24 - Adherence to ethical principles when working with patients and laboratory animals.
- SC26 – The ability to determine the management tactics of persons subject to dispensary supervision.

**Program learning outcomes (PLO):**

- PLO 1. Having a thorough knowledge of the structure of professional activity. Being able to carry out professional activities that require updating and integration of knowledge. To be responsible for professional development, the ability for further professional training with a high level of autonomy.
- PLO 2. Understanding and knowledge of fundamental and clinical biomedical sciences, at a level sufficient for solving professional tasks in health care.
- PLO 3. Specialized conceptual knowledge that includes scientific achievements in the field of health care and is the basis for conducting research, critical understanding of problems in the field of medicine and related interdisciplinary problems, including an early intervention system
- PLO 4. Identify and identify leading clinical symptoms and syndromes (according to list 1); according to standard methods, using preliminary data of the patient's history, data of the patient's examination, knowledge about the person, his organs, and systems, establish a preliminary clinical diagnosis of the disease (according to list 2).
- PLO 5. Collect complaints, life anamnesis, and diseases, assess the psychomotor and physical development of the patient, the state of organs and systems of the body, based on the results of laboratory and instrumental studies, and evaluate information about the diagnosis (according to list 4), considering the age of the patient.
- PLO 6. To establish a final clinical diagnosis by making a reasoned decision and analyzing the received subjective and aim data of clinical, additional examination, carrying out differential diagnosis, observing the relevant ethical and legal norms, under the control of the managing physician in the conditions of a health care institution (according to list 2).
- PLO 7. Prescribe and analyze additional (mandatory and optional) examination methods (laboratory, functional, and/or instrumental) (according to list 4) of patients with diseases of organs and body systems for differential diagnosis of diseases (according to list 2).
- PLO 8. Determine the primary clinical syndrome or symptom that determines the severity of the victim's/victim's condition (according to list 3) by making a reasoned decision about the person's condition under any circumstances (in the conditions of a health care facility, outside its borders), including in conditions of emergency and hostilities, in field conditions, in conditions of lack of information and limited time.
- PLO 10. Determine the necessary mode of work, rest, and nutrition based on the final clinical diagnosis, observing the relevant ethical and legal norms by making a reasoned decision according to existing algorithms and standard schemes.

- PLO 14. Determine tactics and provide emergency medical care in emergency situations (according to list 3) in limited time conditions according to existing clinical protocols and treatment standards.
- PLO 16. Form rational medical routes for patients to organize the interaction with colleagues in their own and other institutions, organizations, and institutions; to apply tools for the promotion of medical services in the market, based on the analysis of the needs of the population, in the conditions of the functioning of the health care institution, its division, in a competitive environment.
- PLO 17. Perform medical manipulations (according to list 5) in the conditions of a medical institution, at home, or at work based on a previous clinical diagnosis and/or indicators of the patient's condition by making a reasoned decision, and observing the relevant ethical and legal norms.
- PLO 21. Searching for the necessary information in the professional literature and databases of other sources, analyzing, evaluating and application of this information.
- PLO 24. To organize the necessary level of individual safety (own and the persons he cares for) in case of typical dangerous situations in the individual field of activity.
- PLO 30. Determine the management tactics of persons subject to dispensary supervision.

**As a result of studying the discipline, the student has to**

**Know:**

- etiopathogenesis and risk factors of development depression, anxiety, psychosis, bipolar disorder, dementia, etc.
- basic diagnostic algorithms of the most common mental disorders in the practice of primary care doctors.
- acquire skills of effective communication with the patient
- signs and principles of management of patients with common manifestations of mental disorders
- will carry out differential diagnosis of the most common mental disorders in the practice of a family doctor

**Be able:**

- to diagnose mental disorders in the patient
- carry out differential diagnosis between different types of mental disorders
- carry out differential diagnosis of various emergency conditions in patients with mental disorders
- determine patient management tactics and provide emergency medical care in case of emergencies, the need for hospitalization
- draw up a patient treatment plan depending on the diagnosed mental disorder
- to be able to apply the acquired knowledge in a clinical situation
- keep medical records

**3. The content of the educational discipline**

**Content module 1.**

**The most common mental disorders in the practice of primary care physicians**

**Topic 1. Basic principles of primary care in the mental health problems**

Basic principles of medical care for people who need it, including people with mental, neurological, and substance use disorders (NSDs), as well as their caregivers. This theme is aimed at increasing attention to the privacy of people who need help with PNDP disorders, establishing appropriate relationships between health care providers, service users and their careers, as well as providing care without judgment and stigma, with the provision of necessary support. Basics of clinical practice in

the field of mental health in order to provide health care workers with a general understanding of the assessment and management of mental health disorders in non-specialized health care providers.

### **Topic 2. Depression**

Main clinical symptoms of depression. Diagnosis of depression. Screening. Additional research methods. Differential diagnosis. Treatment and prevention of depression in the competence of a general practitioner-family medicine doctor.

### **Topic 3. Psychoses**

Main clinical symptoms of psychosis. Diagnosis of psychosis. Additional research methods. Differential diagnosis. Treatment and prevention of psychosis in the competence of a general practitioner-family medicine doctor. Treatment of emergency conditions in patients with psychosis.

### **Topic 4. Epilepsy**

Main clinical symptoms of epilepsy. Diagnostics. Additional research methods. Differential diagnosis. Treatment and prevention of epilepsy in the competence of a general practitioner-family medicine doctor. Treatment of emergency conditions in patients with epilepsy.

## **Content module 2.**

### **Age-related mental disorders as a competencies of a family doctor**

#### **Topic 5. Child and adolescent mental and behavioral disorders**

Main clinical symptoms of childhood and adolescent mental and behavioral disorders. Diagnostics. Additional research methods. Differential diagnosis. Treatment and prevention of child and adolescent mental and behavioral disorders in the competence of a general practitioner-family medicine doctor.

#### **Topic 6. Dementia**

Main clinical symptoms of dementia. Diagnostics. Additional research methods. Differential diagnosis. Treatment and prevention of dementia in the competence of a general practitioner-family medicine doctor. Support of a family with a patient with dementia.

## **Content module 3.**

### **Management of the mental disorders in the practice of a family doctor**

#### **Topic 7. Disorders associated with the use of psychoactive substances**

Main clinical symptoms that are diagnosed in patients with disorders related to the use of psychoactive substances. Diagnostics. Additional research methods. Differential diagnosis. Treatment and prevention of patients with disorders related to the use of psychoactive substances in the competence of the general practitioner-family medicine. Support of a family in which there is a patient with disorders related to the use of psychoactive substances. Emergency therapy.

#### **Topic 8. Self-harm/suicide**

Main clinical symptoms of self-harm/suicide. Diagnostics. Additional research methods. Differential diagnosis. Treatment and prevention of self-harm/suicide in the competence of a general practitioner-family medicine doctor. Emergency management of self-harm/suicide patients. Supporting a family with a patient who has experienced a self-harm/suicide episode.

#### **Topic 9. Diagnostic approaches in mental health problems**

Diagnostic approaches in mental health problem. Diagnostics. Additional research methods. Differential diagnosis. Treatment and prevention of other important mental health complaints in the competence of a general practitioner-family medicine doctor. Treatment of emergencies in patients with other significant mental health complaints.

#### **Topic 10. Stress management**

These are skills developed by the WHO for stress management, in order to teach people to better cope with adverse circumstances. This guide supports the implementation of WHO recommendations for stress management. There are many reasons for stress: personal difficulties

(for example, conflicts with loved ones, loneliness, lack of livelihood, worries about the future), problems at work (for example, conflicts with colleagues, extremely difficult or unstable work), or serious threats in your community (eg violence, disease, lack of economic prospects).

**Content module 4.**

**Mental disorders during humanitarian crises and treat to life**

**Topic 11. Medical assistance in humanitarian disaster conditions**

Peculiarities of providing assistance to patients in conditions of humanitarian emergencies in the practice of a primary care doctor. Diagnostics. Treatment and prevention of the most common mental disorders during humanitarian and emergency situations

**Topic 12. Post-traumatic stress disorder**

Assessment of the patient for existing post-traumatic stress disorder (PTSD). Development of a basic management plan including pharmacological and non-pharmacological methods. Organization of further follow-up of such a patient.

**Topic 13. Grief assessment**

Assessment of the patient regarding existing grief, prolonged grief and differential diagnosis of these conditions. Development of a basic management plan including pharmacological and non-pharmacological methods. Organization of further follow-up of such a patient

**Topic 14. Acute reaction to stress**

Assessment of the patient regarding the existing acute reaction to stress. Development of a basic management plan including pharmacological and non-pharmacological methods of treatment. Organization of further follow-up of such a patient.

**Topic 15. Intellectual disability**

Assessment of the patient regarding the existing intellectual impairment. Development of a basic management plan including pharmacological and non-pharmacological methods of treatment. Organization of further follow-up of such a patient.

**4. The structure of the educational discipline**

Themes	Number of hours					
	Total	including				
		lectures	seminars	practical classes	laboratories	Independent work
<b>Content module 1.</b>						
<b>The most common mental disorders in the practice of primary care physicians</b>						
Topic 1. Basic principles of primary care in the mental health problems	6	0	0	2	0	4
Topic 2. Depression	6	0	0	2	0	4
Topic 3. Psychoses	6	0	0	2	0	4
Topic 4. Epilepsy	6	0	0	2	0	4
<i>Total by content module 1</i>	24	0	0	8	0	16
<b>Content module 2.</b>						
<b>Age-related mental disorders as a competencies of a family doctor</b>						
Topic 5. Child and adolescent mental and behavioral disorders	6	0	0	2	0	4
Topic 6. Dementia	6	0	0	2	0	4

<i>Total by content module 2</i>	12	0	0	4	0	8
<b>Content module 3. Management of the mental disorders in the practice of a family doctor</b>						
Topic 7. Disorders associated with the use of psychoactive substances	6	0	0	2	0	4
Topic 8. Self-harm/suicide	6	0	0	2	0	4
Topic 9. Diagnostic approaches in mental health problems	6	0	0	2	0	4
Topic 10. Stress management	6	0	0	2	0	4
<i>Total by content module 3</i>	24	0	0	8	0	16
<b>Content module 4. Mental disorders during humanitarian crises and treat to life</b>						
Topic 11. Medical assistance in humanitarian disaster conditions	6	0	0	2	0	4
Topic 12. Post-traumatic stress disorder	6	0	0	2	0	4
Topic 13. Grief assessment	6	0	0	2	0	4
Topic 14. Acute reaction to stress	6	0	0	2	0	4
Topic 15. Intellectual disability	6	0	0	2	0	4
<i>Total by content module 4</i>	30	0	0	10	0	20
<b>Total hours</b>	90	0	0	30	0	60

## 5. Themes of lectures / seminars / practical classes / laboratories

### 5.1. Themes of lectures

Lectures are not provided.

### 5.2. Themes of seminars

Seminars are not provided.

### 5.3. Themes of practical classes:

No.	Theme	Hours
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1.	Topic 1. Basic principles of primary care in the mental health problems	2
2.	Topic 2. Depression	2
3.	Topic 3. Psychoses	2
4.	Topic 4. Epilepsy	2
5.	Topic 5. Child and adolescent mental and behavioral disorders	2
6.	Topic 6. Dementia	2
7.	Topic 7. Disorders associated with the use of psychoactive substances	2
8.	Topic 8. Self-harm/suicide	2
9.	Topic 9. Diagnostic approaches in mental health problems	2
10.	Topic 10. Stress management	2
11.	Topic 11. Medical assistance in humanitarian disaster conditions	2
12.	Topic 12. Post-traumatic stress disorder	2
13.	Topic 13. Grief assessment	2
14.	Topic 14. Acute reaction to stress	2
15.	Topic 15. Intellectual disability	2
	<b>Total</b>	<b>30</b>

#### 5.4. Themes of laboratories

Laboratories are not provided.

#### 6. Independent work of the student

No.	Theme	Hours
1.	Preparation for practical classes 1	4
2.	Preparation for practical classes 2	4
3.	Preparation for practical classes 3	4
4.	Preparation for practical classes 4	4
5.	Preparation for practical classes 5	4
6.	Preparation for practical classes 6	4
7.	Preparation for practical classes 7	4
8.	Preparation for practical classes 8	4
9.	Preparation for practical classes 9	4
10.	Preparation for practical classes 10	4
11.	Preparation for practical classes 11	4
12.	Preparation for practical classes 12	4
13.	Preparation for practical classes 13	4
14.	Preparation for practical classes 14	4
15.	Preparation for practical classes 15	4
	<b>Total</b>	<b>60</b>

#### 7. Teaching methods

##### Practical classes:

- verbal methods: conversation, explanation, discussion, discussion of the acute issues;
- visual methods: illustration (including multimedia presentations);
- practical methods: testing, solving situational tasks (including calculation ones), checking the skills of working with a glucometer.

**Independent work:**

- independent work with recommended basic and additional literature, with electronic information resources, preparation for seminar classes;
- independent performance of an individual task, preparation of a presentation to defend an individual task.

**8. Forms of control and evaluation methods  
(including criteria for evaluating learning outcomes)**
**Ongoing control:**

- oral control: individual survey on the theme;
- written control: assessment of the situational task solutions (including calculation), assessment of the performance of an individual task;
- test control: assessment of performance of tests on the theme.

**Final control:** Credit Test.**Assessment of the ongoing learning activity at the practical classes:**

1. Assessment of the theoretical knowledge on the theme:
  - methods: individual survey on the theme, participation of the students in the discussion of problem situations; assessment of performance of tests on the theme;
  - the maximum score – 5, the minimum score – 3, the unsatisfactory score – 2.
2. Assessment of practical skills on the theme:
  - methods: assessment of the solution of situational tasks (including calculation) on the theme;
  - the maximum score – 5, the minimum score – 3, the unsatisfactory score – 2.

**Assessment of the individual work:**

1. Assessment of the quality of the performance of the individual work:
  - the maximum score – 5, the minimum score – 3, the unsatisfactory score – 2.
2. Assessment of the presentation and defense of an individual work, participation in the assessment of the business plan of the competitors and its critical analysis:
  - the maximum score – 5, the minimum score – 3, the unsatisfactory score – 2.

The score for one practical class is the arithmetic average of all components and can only have an integer value (5, 4, 3, 2), which is rounded statistically.

**Criteria of ongoing assessment at the seminar class**

Score	Assessment criterion
Excellent «5»	<p>The student participates actively in the seminar class. He/she demonstrates profound knowledge and provides full and detailed answers. He/she participates actively in discussing problem situations. He/she uses additional educational and methodological and scientific literature. The student knows how to form his attitude to a certain issue and conveys his/her attitude to the issue, gives appropriate examples. He/she knows how to find the most adequate forms of conflict resolution.</p> <p>The tests are completed in full, all 100% of the answers are correct, the answers to the open questions are complete and justified.</p> <p>The student freely solves situational tasks (including calculations), confidently demonstrates practical skills on the theme of seminar class and correctly interprets the data obtained. He/she expresses his own creative opinion on the theme, demonstrates creative thinking.</p>
Good «4»	<p>The student participates in the seminar class. He/she have mastered the material of the seminar class and shows the necessary knowledge, but answers the questions</p>

	<p>with some mistakes. He/she participates in discussing problem situations. He/she uses the basic educational and methodological and scientific literature. The student expresses his own opinion on the theme of seminar class.</p> <p>The tests are completed in full, not less than 70% of the answers are correct, the answers to the open questions are generally correct, but there are some mistakes in definitions.</p> <p>The student correctly solves situational tasks (including calculations), but admits minor inaccuracies and demonstrates more standardized practical skills on the theme of seminar class with correct interpretation of the received data. He/she expresses his own opinion on the theme, demonstrates creative thinking.</p>
Satisfactory «3»	<p>The student sometimes participates in the seminar class. He/she partially intervenes and asks questions, answers the questions with mistakes. He/she passively works in practical exercises. He/she demonstrates fragmentary knowledge of the conceptual apparatus and literary sources.</p> <p>The tests are completed in full, not less than 50% of the answers are correct, the answers to the open questions are illogical, with obvious significant errors in definitions.</p> <p>The student does not have sufficient knowledge of the material to solve situational problems (including calculations). He/she uncertainly demonstrates practical skills on the theme of seminar class and interprets the data with significant errors, does not express his/her opinion on the topic of the situational problem.</p>
Unsatisfactory «2»	<p>The student does not participate in the seminar class, just observes the learning process. He/she never speaks out or asks a question. He/she is disinterested in the study of the material. The student gives incorrect answers to questions, demonstrates poor knowledge of the conceptual apparatus and literary sources.</p> <p>The test has not been completed.</p> <p>The situation task has not been completed.</p>

Credit Test is considered, if the student has completed all the tasks of the working program of the educational discipline. He/she took actively participated in the practical exercises, and completed an individual work. The student has an average current rating of at least 3.0 and has no academic debt.

## 9. Distribution of points, obtained by the student

The average grade in the discipline is converted to the national grade and converted to points on a multi-point scale (200-point scale).

Conversion of traditional assessment into 200-point is carried out by the information and technical department of ONMedU by the special program by the formula:

$$\text{Average score (current academic performance)} \times 40.$$

### Conversion table of traditional to multi-point

National score for the discipline	The sum of scores for the discipline
Excellent («5»)	185 – 200
Good («4»)	151 – 184
Satisfactory («3»)	120 – 150
Unsatisfactory («2»)	Less than 120

## **10. Methodological support**

- Working program in the discipline
- Syllabus
- Methodological recommendations for the seminar classes in the discipline
- Methodological recommendations for the individual work of students
- Multimedia presentations
- Situational tasks (including calculation)
- Tests on the theme

## **11. Questions for the ongoing control**

1. Etiology and pathogenesis of depression.
2. Peculiarities of managing a patient with a depressive disorder in the practice of a family doctor.
3. Treatment, prevention and long-term follow-up of a patient with depression.
4. Etiology and pathogenesis of psychosis.
5. Peculiarities of managing a patient with psychosis in the practice of a family doctor.
6. Treatment, prevention and long-term follow-up of a patient with psychosis.
7. Etiology and pathogenesis of epilepsy.
8. Peculiarities of managing a patient with epilepsy in the practice of a family doctor.
9. Treatment, prevention and long-term monitoring of a patient with epilepsy.
10. Etiology and pathogenesis of childhood and adolescent mental and behavioral disorders.
11. Treatment, prevention and long-term follow-up of patients with childhood and adolescent mental and behavioral disorders.
12. Peculiarities of patient management of patients with childhood and adolescent mental and behavioral disorders in the practice of a family doctor
13. Etiology and pathogenesis of dementia.
14. Peculiarities of managing a patient with dementia in the practice of a family doctor.
15. Treatment, prevention and long-term follow-up of a patient with dementia
16. Etiology and pathogenesis of disorders related to the use of psychoactive substances
17. Peculiarities of managing a patient with disorders related to the use of psychoactive substances in the practice of a family doctor
18. Treatment, prevention, and long-term follow-up of patients with substance use disorders
19. Etiology and pathogenesis of episodes of self-harm/suicide
20. Peculiarities of managing a patient with an episode of self-harm/suicide in the practice of a family doctor
21. Treatment, prevention and long-term follow-up of a patient with a self-harm/suicide episode.
22. Etiology and pathogenesis of other important complaints on the state of mental health
23. Peculiarities of managing a patient with other important complaints on the state of mental health in the practice of a family doctor
24. Treatment, prevention and long-term monitoring of a patient with other important complaints on the state of mental health.

## **12. Recommended literature**

### **Main:**

1. Global burden of disease 2019: mental disorders– level 2 cause [website]. Seattle: Institute for Health Metrics and Evaluations; 2021

- ([http://www.healthdata.org/results/gbd\\_summaries/2019/](http://www.healthdata.org/results/gbd_summaries/2019/) mental-disorders-level-2-cause, accessed 25 October 2023).
2. Intersectoral global action plan on epilepsy and other neurological disorders 2022–2031. Geneva: World Health Organization; 2023 (<https://iris.who.int/handle/10665/371495>).
  3. Thornicroft G, Sunkel C, Alikhon Aliev A, Baker S, Brohan E, el Chammay R et al. The Lancet Commission on ending stigma and discrimination in mental health. *Lancet*. 2022;400:1438–80
  4. Update of the Mental Health Gap Action Program (mhGAP) guidelines for mental, neurological and substance use disorders, 2015. Geneva: World Health Organization; 2015
  5. Dua T, Barbui C, Patel AA, Tablante EC, Thornicroft G, Saxena S; WHO's mhGAP guideline team. Discussion of the updated WHO recommendations for mental, neurological, and substance use disorders. *Lancet Psychiatry*. 2016;3(11):1008–12
  6. ICD-11: International Classification of Diseases 11th Revision [website]. Geneva: World Health Organization; 2019

**Additional:**

1. mhGAP intervention guide for mental, neurological and substance use disorders in non-specialized health settings: mental health Gap Action Program (mhGAP), version 2.0. Geneva: World Health Organization; 2016
2. Mental Health Gap Action Programme (mhGAP) guideline for mental, neurological and substance use disorders, Geneva: World Health Organization, 2023
3. The selection and use of essential medicines 2023: web annex A: World Health Organization model list of essential medicines: 23rd list. Geneva: World Health Organization; 2023

**13. Electronic information resources**

1. <https://iris.who.int/bitstream/handle/10665/372458/WHO-EURO-2023-36362-36362-68615-ukr.pdf?sequence=1&isAllowed=y>
2. <https://i-cbt.org.ua/wp-content/uploads/2020/06/MH-GAP-kerivnitstvo.pdf>
3. <https://iris.who.int/bitstream/handle/10665/334239/WHO-EURO-2020-37299-37299-55107-ukr.pdf>
4. <https://www.who.int/publications/i/item/9789241549790>