

MELODIC

Mental Health Support for Young Adults with Cancer

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Deliverable 5.2: Policy Outreach Strategy

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Executive Summary

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The authors would like to thank the MELODIC Executive Committee for providing us with valuable feedback on this report.

We hope that this report will serve as a useful tool in the collaboration with stakeholders in the MELODIC project.

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1. Introduction

1.1. Background

Cancer is the second leading cause of death globally, with approximately 20 million new cases reported annually, expected to rise by 60% in the next two decades, especially in low- and middle-income countries (1). Across 29 European countries, 23.7 million people had experienced a cancer diagnosis out of a total population of 477.9 million. Similarly, in the EU-27 area, 22.3 million prevalent cases were recorded among 447.3 million residents (2). In 2022, there were an estimated 2.78 million new cases of cancer in the 27 Member States of the European Union (EU27) plus Iceland and Norway (EU+2 countries), equivalent to about five new diagnoses every minute (3). Cancer survivors, both adults and children, face numerous challenges that impact their physical, psychological, and social well-being, diminishing their quality of life. Common psychological issues include anxiety, depression, emotional distress, and fear of cancer recurrence, while physical symptoms such as pain, fatigue, insomnia, and cognitive impairment also affect patients (4, 5). Caregivers and families are similarly impacted, often experiencing significant emotional and physical strain, underscoring the need for comprehensive support and resources (6). Many cancer patients report a need for psychological support (91%) and medical information (86%), yet barriers such as stigma, lack of awareness, and limited access to mental health services prevent many from seeking help (7, 8).

Digital solutions and tailored interventions can address the specific needs of cancer patients, their families and caregivers, promoting positive mental health outcomes (9). Despite the availability of guidelines and recommendations for psycho-oncological care, disparities in implementation across different countries persist, influenced by economic factors and cultural stigma (10, 11). Only 37% of European countries have a dedicated budget for the psychological assessment of cancer patients, with limited attention given to the psychological well-being of caregivers and paediatric cancer patients (12). As such, enhancing the availability of tailored mental health services and improving the use of screening tools are crucial steps toward ensuring comprehensive cancer care for patients and their families (13, 14).

1.2. The MELODIC Project

The 'Mental health support for young adults with cancer' (MELODIC) project is a 3-year project started in September 2024 and co-funded by the European Union. The MELODIC project aims to enhance the mental health and wellbeing of young adults (Yas) with cancer and their families or caregivers during the first year following diagnosis. Its key deliverables include a thorough understanding of mental health needs through interviews and surveys, an intervention promoting physical activity in natural environments, online training for healthcare professionals, and practical

guidance for supporting patients and families. The project also produces webinars and evidence-based recommendations, ensuring both young adults and professionals are better equipped to manage mental health challenges effectively.

Finally, the MELODIC intervention is inspired by the principles of **social prescribing**, linking young adults and their families to activities and resources that support mental health beyond the clinical setting. By encouraging engagement with nature-based physical activity and tailored information support, the project applies social prescribing as a practical tool to strengthen wellbeing and resilience.

1.2.1. Work package 5

Work Package 5 is dedicated to the policy, dissemination and communication dimension of the project, ensuring its effective implementation, dissemination, and communication to enhance scalability and long-term sustainability. It also focuses on engaging relevant stakeholders to facilitate knowledge exchange and information sharing. A key objective is to engage policymakers at both national and European levels, raising awareness of the intersection between mental health and cancer, as well as equipping decision-makers with robust, evidence-based insights to inform current and future policy development. Furthermore, this work package facilitates structured dialogue on challenges, expectations, and enabling factors, contributing to the creation of policy-oriented tools that support informed and effective decision-making. It also strengthens synergies with other EU-funded and relevant initiatives, fostering collaboration and knowledge exchange to enhance policy coherence. Through strategic communication and dissemination efforts, Work Package 6 ensures that the project's outcomes have a lasting impact on policy frameworks and implementation.

Within Work Package 5, **Task T5.3.1**, which spans the first 12 months, focuses on creating a Policy Outreach Strategy that aligns the project's objectives, messages, and activities, ensuring a coherent approach to influencing policy. In **Task 5.3.2** (M6-M18), a set of policy recommendations will be developed, capturing the challenges and opportunities faced at both national and European levels in promoting the mental health of cancer patients. These recommendations will address key issues such as prioritising mental health in the political agenda, raising awareness of the mental health impact on cancer patients, and identifying actionable solutions. **Task T5.3.3** (M12-M36) will engage with ongoing and upcoming policy activities related to mental health, cancer survivorship, and quality of life, including legislative files such as the European Health Data Space and mental health communication strategies. Finally, **Task T5.4** will aim at developing a sustainability plan to ensure the continuity of the training programme developed and integrate the training on the INTERACT2 platform.

1.2.2. Deliverable 5.2 – Policy Outreach Strategy

As the lead of this deliverable, ECO has developed the present Policy Outreach Strategy through task 5.2.

Objectives

This policy outreach strategy aims to ensure that the project effectively raises awareness of the critical link between mental health and cancer, while driving meaningful change at both national and European levels. By engaging key stakeholders, influencing policy frameworks, and fostering collaboration, the project seeks to embed mental health considerations into cancer policies and improve the quality of life for those affected by the disease. On this basis, the project plans to carry out policy outreach strategies throughout its workplan in order to:

- Raise awareness of the connection between mental health and cancer among policymakers, healthcare professionals, and the wider public;
- Advocate for the integration of mental health and psycho-oncology services into national cancer plans across EU Member States;
- Engage with European institutions, including the European Parliament, the Council of the European Union, and the European Commission, to promote policy actions on mental health and cancer;
- Facilitate meaningful stakeholder engagement to ensure project relevance and impact;
- Strengthen collaboration with EU-funded and international initiatives, particularly the DESIPOC and ALTHEA projects, through a joint work plan and collaborative meetings;
- Develop and disseminate policy recommendations to support long-term integration of mental health in cancer care;
- Ensure project outcomes are scalable and transferable across Europe to drive meaningful policy changes.

2. Background to the Policy Outreach Strategy

2.1. The value of policy outreach activities

An estimated **one in twenty Europeans has now faced a cancer diagnosis**. This disease does not only take a toll on patients' physical health but also profoundly affects their mental health. Patients undergoing cancer treatment, as well as survivors in the post-treatment phase, **frequently experience significant psychological challenges, including anxiety, depression, post-traumatic stress, and uncertainty about the future**. Such distress can substantially diminish their quality of

life, impacting not only patients themselves but also their families, caregivers, and broader social networks.

Despite growing awareness of the psychological burden associated with cancer, access to adequate mental health support remains inconsistent across Europe. Systemic inequalities persist, particularly in underserved regions and among socio-economically disadvantaged groups. Stigma surrounding mental health further exacerbates this issue, deterring patients from seeking the support they need and impeding early intervention, and increasing the risk of long-term mental health complications.

The European Union and its Member States have a critical role in addressing these disparities through targeted policymaking. The integration of mental health into cancer care policies is fundamental to improving patient outcomes and ensuring a holistic approach to treatment and survivorship. **Europe's Beating Cancer Plan has recognised the intersection between cancer and mental health**, advocating for increased access to psychosocial care and embedding mental health considerations into national cancer control strategies. However, further efforts are required to translate these commitments into tangible actions, ensuring that all patients — regardless of geographical location or socio-economic status — receive comprehensive care.

Effective mental health policies at both EU and national levels must prioritise routine psychological screening for cancer patients and survivors, ensuring that mental health assessments become standard practice alongside physical health evaluations. Equally, access to specialist psycho-oncology services should be expanded, offering evidence-based interventions such as counselling, cognitive-behavioural therapy, and peer support networks. Investment in training healthcare professionals to recognise and address the psychological dimensions of cancer is also vital, as it strengthens the capacity of national healthcare systems to provide integrated, patient-centred care.

Moreover, EU-level policymaking should promote research initiatives aimed at understanding the long-term mental health effects of cancer and developing tailored interventions.

Beyond clinical care, addressing workplace discrimination against cancer survivors is another essential policy objective. Many individuals experience significant challenges in returning to work due to both physical and mental health barriers.

2.2. Mapping of EU policies on mental health

Since 2019, and particularly in response to the COVID-19 pandemic, the European Union has significantly intensified its focus on mental health policies through the concerted efforts of the European Commission, the European Parliament, and the Council of the European Union. The pandemic underscored the critical importance of mental well-being, prompting a series of strategic initiatives aimed at addressing the burgeoning mental health challenges across Member States.

In June 2023, the European Commission adopted a [comprehensive approach to mental health](#), introducing 20 flagship initiatives, accompanied by €1.23 billion in funding from various financial instruments. This initiative seeks to place mental health on an equal footing with physical health, emphasising prevention, access to high-quality and affordable mental healthcare, and societal reintegration post-recovery.

In December 2023, the European Parliament adopted its first-ever [own-initiative report on mental health](#), emphasising the need for a holistic, human-rights-based approach. The report highlights mental health as a universal concern, influenced by socio-economic and environmental factors, and calls for a 'mental-health-in-all-policies' strategy to integrate mental well-being across all policy areas. It stresses the importance of increased EU funding to support mental health initiatives and ensure the effective implementation of policies. The report also advocates for targeted interventions to protect high-risk populations. Recognising the impact of digitalisation and the workplace environment on mental health, it calls for measures to support mental well-being in professional settings. The document urges Member States to combat stigma and discrimination, fostering greater social inclusion for individuals with mental health conditions. The Parliament's adoption of this report represents a landmark moment in elevating mental health as a priority in EU policymaking.

The Council of the EU has also been instrumental in addressing mental health concerns. Recognising the significant deterioration in mental health due to the pandemic, the Council, in its [November 2023 conclusions](#), underscored the social and economic imperative of improving mental health across the EU. The Council's conclusions called for a comprehensive approach, focusing on promotion, prevention, early intervention, and the destigmatisation of mental health issues, while ensuring the social inclusion of individuals experiencing mental health problems.

Collectively, these actions reflect the EU's commitment to addressing mental health challenges exacerbated by the COVID-19 pandemic, aiming to create a resilient framework that supports mental well-being across all Member States.

Date	EU institution	Key initiative
2019	European Commission, Parliament, and Council	Intensified mental health policy focus in response to COVID-19 pandemic.
2021	European Commission	EU Strategic Framework on Health and Safety at Work (2021–2027)
2021	European Parliament	Adoption of a report on the Right to Disconnect
2022	European Commission	Healthier Together - the Commission's EU Non-Communicable Diseases Initiative
June 2023	European Commission,	Launched a comprehensive mental health approach with 20 flagship initiatives and €1.23 billion in funding .
November 2023	Council of the European Union	Issued conclusions on mental health

December 2023	European Parliament	Adopted first own-initiative report on mental health which gave way to European parliament resolution on mental health
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SOCIAL PRESCRIBING

Social prescribing is defined by the WHO as a means for healthcare workers to connect people to a range of non-clinical services in the community in order to improve health and wellbeing. Social prescribing can help to address the underlying causes of patients' health and wellbeing issues, as opposed to simply treating the symptoms.

At EU level, **social prescribing** has only fairly recently gained recognition. Recent initiatives such as the Horizon Europe-funded ' [Social Prescribing to promote and improve access to health and care services for people in vulnerable situations in Europe](#)' project and the Erasmus+-supported '[SPACE](#)' project highlight its growing role in European health policy funding.

2.3. Mapping of national policies on mental health and cancer

In the conduct of this policy outreach strategy, it was deemed necessary to undertake a **mapping of national policies on mental health and cancer**, in order to assess how governments are responding to the increasing burden of mental illness across Europe and are integrating mental health in their cancer strategies. Despite growing awareness, policy efforts remain inconsistent, and reliable data on implementation is often lacking. Such mapping allows for the identification of **gaps, disparities, and examples of best practice between countries**. In parallel, an analysis of health budgets allocated to mental health offers vital insight into national priorities and levels of investment. Together, these approaches support more effective advocacy, policy development, and cross-country learning.

2.3.1. Mental health policies

Country	Existing national mental health strategy	Description of the national strategy	Other national mental health policies worth mentioning	% of total health expenditure allocated to mental health
Austria	National Mental Health Strategy (adopted in 2018)	Defines five main targets for prevention of mental health problems in the general population	Austrian Suicide Prevention Plan	

Belgium	No national plan but: - Flemish Action Plan for Mental Health 2017-19 - National Plan 2015 – 2020 for a new mental health policy for children and adolescents in Wallonie		Creation of regional mental health networks,	6%
Bulgaria	National Strategy for Mental Health of the Citizens of the Republic of Bulgaria 2021- 2030 (adopted in 2021)	Paradigm shift towards community based care Establishment of a National Council in 2022	National Youth Strategy 2021-2030 (directly refers to mental health)	2.60%
Croatia	Strategic Framework for Mental Health until 2030 (adopted in 2022)	Focuses on 5 main areas: Preservation and improvement of mental health, Prevention and early recognition of mental health problems, Increasing the availability of effective psycho-bio-social interventions with respect for human rights, Community mental health care and Ensuring efficiency.		2.30%
Cyprus	National mental Health Strategy 2025-2028 (adopted in 2025 - developed with WHO)	Includes an Action Plan and the creation of a National Mental Health Committee for oversight Focuses on 6 pillars: prevention, hospital and community-based services, social inclusion, stigma reduction, policy integration, and research promotion	Psychiatric Care Law (1997, amended in 2003 and 2007)	0.14%
Czech Republic	Health 2030 strategy (adopted in 2020)	Contains 3 dedicated plans related to mental health: the National Mental Health Action Plan 2020-30, the National Action Plan for Alzheimer's and Other Dementias 2020-30, and the National Suicide Prevention Action Plan 2020-30	Strategy to Reform Psychiatric Care (2011)	3% (data from 2005)

Denmark	10-year plan for the psychiatric system and mental health (adopted in 2022)	Identifies 5 focus areas: Development of a municipal measure within easy reach targeting children and young people with symptoms of mental health issues; Enhanced measures targeting people with severe mental illness; Information and an anti-stigmatising campaign; Strengthened cross-disciplinary and evidence-based environments; Improved conditions for research in the prevention and treatment of mental illness.		
Estonia	Mental Health Action Plan 2023-26 (adopted in 2022)	Focus on easing the pressure on specialised mental healthcare services by strengthening the role of primary care, applying a stepped care model and low-intensity interventions, and ensuring sufficient prevention and promotion in mental healthcare.	3 other national strategies mentioning mental health: ; (1) the long-term national development strategy "Estonia 2035", the Population Health Development Plan 2020-2030 and the Green Paper on Mental Health	3.70%
Finland	National Mental Health Strategy and Programme for Suicide Prevention 2020-2030 (adopted in 2020)	Based on 5 broad goals: a) recognising mental health as human capital; b) promoting the mental health of children and young people; c) recognising mental health as a human right; d) promoting appropriate and broad-based mental health services; and e) ensuring proper mental health management, including through cross-sectoral activities and regular monitoring of progress		
France	Mental Health and Psychiatry roadmap (delivered in 2018)	Creation of the Ministerial Delegation for Mental Health and Psychiatry (2019) Overarching goals of the plan: integration of mental health into global, health, promotion of mental well-being, prevention and early detection of psychic suffering, reduction of social stigma attached to mental health problems, and development of ambulatory mental health and psychiatric care		14.50%

Germany	No national MH plan >> But varying strategies, plans, and/or laws related to MH exist at the level of the federal states, leading to a high diversity of MH care offers across the country	Promotion of key principles of community-based care		13.1% (in 2015)
Greece	National Action Plan for Mental Health 2021-2030 (adopted in 2021)	Aims to ensure universal access to mental health services and eradicate stigma and social exclusion. The overall objective is to achieve deinstitutionalisation, by basing provision on an integrated, recovery-oriented, community-based mental health services system.		3.3% (data from 2020)
Hungary	National Programme for Mental Health as part of the "Healthy Hungary 2021-2027" strategy	Development areas of the program are mental health development, with a family-centered approach; development of the psychiatric care system, including community, inpatient and outpatient supply; development of addictology; development of child and youth psychiatry; and the development of psychotherapy and ensuring its better availability		3.20%
Iceland	Mental Health Policy and Action Plan 2016-2020 (adopted in 2016)	Focuses on integrated and continuous service to people with mental disorders and their families, young people—mental health and prevention and prejudice and discrimination	Cross-sectoral programmes (ex: Health-promoting Schools Programme)	
Ireland	Sharing the Vision – A Mental Health Policy for Everyone	To ensure the strategy's effective execution, a series of three-year Implementation Plans were formulated, overseen by an implementation and monitoring committee.	Connecting for Life: national strategy to prevent suicide 2015-2020	

Italy	Mental Health included in the National Prevention Plan (PNP) 2020-2025	Emphasises that mental health is an integral part of health and well-being and, like other aspects of health, can be influenced by a range of socio-economic determining factors that need to be addressed through comprehensive strategies for promotion, prevention, treatment and recovery		3.60%
Latvia	Plan for the Improvement of the Organisation of Mental Health Care 2023-25 (adopted in 2022)	Focuses on the development of outpatient and community-based mental health services		
Lithuania	Lithuanian Health Protection and Promotion Development Strategy 2022-30	Includes improving mental health as one of its priorities	The National Suicide Prevention Action Plan for 2020–2024; the Action Plan for 2021- 2024 on Improving the Availability and Quality of Addiction Treatment and Harm Reduction; and the Action Plan for 2021- 2024 to help people diagnosed with multiple developmental disorders and mental health reform strategy, and National agenda on control, prevention and harm reduction of drugs, tobacco and alcohol until 2035	4.20%
Luxembourg	National Mental Health Plan 2024-2028 (adopted in 2023)	6 areas of action: Governance of the National Mental; Health Plan and the mental health care system; Information system and research; Human resources and staff qualifications; Health promotion and primary and secondary prevention; Supply of and access to mental health care;		

		Particularly vulnerable populations		
Malta	10-year Mental Health Strategy for Malta 2020-30 (published in 2019 - MH is a key priority for the Maltese government)	Four clusters: addressing the social determinants of health to promote mental health and well-being; transforming mental health service delivery; supporting people suffering from mental ill health and their networks; and improving and enhancing mental health services by strengthening capacity	2012 Mental Health Act (MHA) guiding MH practices	6.83%
Netherlands	No national plan - A national agenda on suicide prevention (2021-25) - A multi-annual Depression Prevention Programme (2027-now)		In 2021, the Dutch government issued a plan to address long waiting times for mental healthcare In 2022, the Dutch government took further steps to formulate an additional plan to promote mental well-being among young people, the working population and vulnerable groups (new initiative)	
Norway	No national MH plan - National plan for children and young people's mental health for the period 2019-24 - ABC for Mental Health (2022)	ABC (Act, Belong, Commit) is public health campaign whose goal is to enhance public understanding of mental health and raise awareness among the population about the importance of physical activity and nurturing relationships for mental well-being	2023: National guideline on mental health work for children and young people	
Poland	National Mental Health Protection Programme 2023-30 (adopted in 2023 - this is the 3rd programme on MH adopted)	Following up on the efforts made by Poland to shift mental healthcare to the community and reduce mental health stigma + Specific focus on addressing the specific mental health needs of children and young people	National Health Programme for 2021-2025, with one objective which consists of "promoting mental health"	

Portugal	National Mental Health Plan 2007-2016 Couldn't find anything more recent	Aim: ensure access to the entire Portuguese population to qualified services to promote the population's mental health, provide quality care and facilitate the reintegration and recovery of people with mental illness Overseen by the National Coordination for Mental Health	National Suicide Prevention Plan 2013-2017	
Romania	No national MH plan Mental Health objectives included in the 2022-30 National Health Strategy Aim to develop a national MH plan	Main high-level national mental health priorities: developing community mental healthcare; creating liaison psychiatric units in general hospitals; developing specialised mental healthcare services for older people, young people, people with addictions and others; ensuring adequate funding; strengthening data collection; and using standardised methods for assessing continuous education and practice		7.2% (data from 2014)
Serbia	Program on mental health protection in the Republic of Serbia for the period 2019-2026 + Action Plan for its implementation	Goal: "Improved system of mental health care for implementation of prevention, treatment and provision of comprehensive, integrated services, in accordance with international practice"		6.60%
Slovakia	No national MH plan Strengthening mental health services is one of the 3 health sector priorities of Slovakia's Recovery and Resilience Plan (adopted in 2021)	Aim: to strengthen community and outpatient mental health services, which will support the process of deinstitutionalisation of mental healthcare		5% (data from 2005)

Slovenia	National Mental Health Programme 2018–2028 (NMHP18-28, adopted in 2018)	6 priority areas: (i) community-based approach to improving mental health, (ii) mental health promotion and the prevention and destigmatisation of mental illness, (iii) mental health network, (iv) alcohol and mental health, (v) suicide prevention and (vi) education, research, monitoring and evaluation National Institute of Public Health was assigned with the role of the coordinator of the implementation of the NMHP18-28		
Spain	NHS Mental Health Strategy (2022-2026) + Mental Health Action Plans	Strong focus on citizenship rights, social integration, recovery and the fight against stigma	Youth Strategy 2030 (3 action plans)	
Sweden	National Strategy for Mental health and Suicide prevention 2025-2034 (adopted in 2024)	Developed in broad collaboration with various stakeholders, including health care regions, municipalities, together with patient and carer organizations Most regions will probably translate the national strategies into regional strategies and plans, as it has been the case with previous MH strategies (ex: the national government supported about 3 300 initiatives in 2021)		

This mapping reveals substantial variation in both the existence of national policies and the proportion of health budgets allocated to mental health. France emerges as a clear leader, allocating 14.5% of its total health expenditure to mental health and supporting this with a defined national strategy. Malta and Serbia also demonstrate strong financial commitment, with over 6% of their health budgets directed to this sector.

Notably, Belgium allocates a significant 6% of its budget to mental health but lacks a cohesive national strategy, instead relying on regional plans. In contrast, countries like Cyprus and Croatia, while having formal strategies in place, exhibit very low expenditure, suggesting a potential mismatch between policy and resource allocation. Cyprus, in particular, allocates only 0.14% of its health budget to mental health, the lowest among the reported data.

The presence of a national strategy does not uniformly correlate with higher investment, indicating that policy alone is insufficient without dedicated funding. Conversely, high expenditure without a

national framework, as seen in Belgium, may lead to fragmented or uneven service delivery. This analysis underscores the need for an integrated approach combining policy and adequate funding. Overall, while progress is evident in many countries, disparities in commitment and implementation remain significant.

2.3.2. National Cancer Control Plans (NCCPs)

National Cancer Control Plans (NCCPs) are strategic policy documents that outline the status of cancer services within a given health system and define priorities for improving cancer control across the continuum of care (15). In a screening of **237 NCCPs available via the International Cancer Control Partnership portal**, 97 (41%) included at least a preliminary reference to psycho-oncology or survivorship, with most originating from Europe—specifically, nine from Northern Europe, ten from Southern Europe, four from Eastern Europe, and ten from Western Europe (15). Despite this, **the majority of NCCPs lacked any mention of psycho-oncology, and only approximately one-quarter articulated clear objectives for the post-treatment survivorship phase** (15). This gap is concerning given the growing population of cancer survivors in Europe and the increasing recognition of quality of life and mental health as essential dimensions of cancer care. The limited integration of psychosocial support and survivorship planning into national strategies underscores the need for future NCCPs to more robustly align with European-level policy commitments aimed at addressing the long-term needs of cancer survivors.

2.4. Stakeholder Mapping

An in-depth stakeholder mapping exercise has been carried out for the purposes of a policy outreach strategy, and is featured below. It follows the categories listed below, each of them being relevant for different policy activities at different levels (European, national and local):

1. European Commission
2. European Parliament
3. Council of the European Union
4. Patients, caregivers, specific communities/marginalised groups and representative/supporting organisations
5. Stakeholder organisations involved in mental health &/ cancer advocacy
6. Civil Society Organisations
7. Researchers
8. Medical & Psycho-oncological Societies
9. Policymakers
10. Regulatory Authorities and payers
11. Similar projects and initiatives

Stakeholder mapping - Policy Outreach			
ORGANISATION	TYPE	FOCUS	COUNTRY
European Commission			
Directorate General for health and animal welfare of the European Commission (DG SANTE)			Europe
Directorate General for Employment and Social Affairs of the European Commission (DG EMPL)			Europe
European Parliament's Intergroup on Cancer and Rare Disease			Europe
EU Mental health expert group			Europe
EU Cancer Subgroup			Europe
European Health and Digital Executive Agency (HaDEA)			Europe
European Parliament			
Committee on Public Health (SANT)			Europe
Committee on Employment and Social Affairs (EMPL)			Europe
Intergroup on mental health			Europe
Intergroup on cancer and rare diseases			Europe
National & European Parliamentarians for Cancer Action			Europe
MEPs against cancer			Europe
Council of the European Union			
Rotating Presidency of the Council			Europe
EPSCO			Europe
Patients, caregivers, specific communities/marginalised groups and representative/supporting organisations			
GAMIAN-Europe	Mental health patient representative organisation	advocating the interests and rights of persons affected by mental ill-health	Europe
EUFAMI	Family representative organisation	advocating the interests and rights of families of persons affected by mental ill-health	Europe
EUROCARERS	Caregiver Representative Organisation	Carer Society	Europe
ECO Patient Advisory Committee	Group of Cancer Patient Organisations		Europe
Workgroup of European Cancer Patient Advocacy Networks (WECAN)	Group of Cancer Patient Organisations		Europe

European Patients' Academy on Therapeutic Innovation (EUPATI)	Patient Empowerment		Europe
Childhood Cancer International – Europe (CCI –Europe, CCI-E)	Patient Representative Organisation		Europe
Lung Cancer Europe (LUCE)	Patient Representative Organisation		Europe
Youth Cancer Europe	Patient Representative Organisation		Europe
Europa Donna	Patient Representative Organisation		Europe
Europa Uomo	Patient Representative Organisation		Europe
International Brain Tumour Alliance (IBTA)	Patient Representative Organisation		International
Melanoma Patient Network Europe	Patient Representative Organisation		Europe
European Patients' Forum (EPF)	Patient Representative Organisation		Europe
Ups & Downs Association	Patient Representative Organisation	people with bipolar disorder or depression and their environment in Belgium	Belgium
PASYKAF	Patient Representative Organisation		Cyprus
Cyprus Anti-Cancer Society	Patient Representative Organisation		Cyprus
ADHD EUROPE	Patient Representative Organisation		Europe
Finnish Central Association for Mental Health	Patient Representative Organisation		Finland
France Dépression	Patient Representative Organisation		France
Schizo Oui	Patient Representative Organisation		France
Solidarité Santé Mentale	Patient Representative Organisation		France
Fédération Nationale des Associations d'usagers en PSYchiatry	Patient Representative Organisation		France
ADHS Deutschland	Patient Representative Organisation		Germany

The SIOPandic Mental Health Alliance (Geðhjálp)	Civil Society Organisation	involves assisting people in pursuing their legal rights, for example by providing information about complaints procedures and providing advice to the respective solutions, organizations, companies and the government	Iceland
Cork Mental Health	Patient Representative Organisation		Ireland
Aware	Patient Representative Organisation		Ireland
Body Whys	Patient Representative Organisation		Ireland
Associazione per la Riforma dell'Assistenza Psichiatrica	Patient Representative Organisation		Italy
URASAM Lombardia	Patient Representative Organisation		Italy
Richmond Foundation	Patient Representative Organisation		Malta
Plusminus	Patient Representative Organisation		The Netherlands
Hieronimus	Patient Representative Organisation		Norway
Encontrar+se	Patient Representative Organisation		Portugal
Association for the Support of Depressive and Bipolar Patients	Patient Representative Organisation		Portugal
Altra	Patient Representative Organisation		Slovenia
Bipolars Catalunya	Patient Representative Organisation		Spain
Network against Cancer for Sweden	Patient Representative Organisation		Sweden
Libra i Skåne	Patient Representative Organisation		Sweden
Rethink	Patient Representative Organisation		UK
EPill	Patient Representative Organisation		Estonia
Stakeholder organisations involved in mental health &/ cancer advocacy			
Mental Health Europe	Stakeholder organisation	Mental health	Europe

Association of European Cancer Leagues (ECL)	Stakeholder organisation		Europe
Estonian Cancer Society	Stakeholder organisation		Estonia
Irish Cancer Society	National Authority on Cancer		Ireland
Fundacion ECO	National Authority on Cancer		Spain
Asociación Española Contra el Cáncer	Spanish Association against Cancer		Spain
ECO Survivorship and Quality of Life Network	Group of stakeholders		Europe
ECO Quality Cancer Care Network	Group of stakeholders		Europe
ABC Global Alliance	stakeholder organisation on breast cancer		International
VIKZ (Flemish Institute for Quality of Care)	stakeholder organisation on quality of care		Belgium
Mental Health for Romania	Stakeholder organisation		Romania
ZorgNetlcuro	Stakeholder organisation		Belgium
Koja	Stakeholder organisation		Bulgaria
Mental Health Reform	Stakeholder organisation		Ireland
Diritti alla follia	Stakeholder organisation		Italy
Confederacion Salud Mental España	Stakeholder organisation		Spain
Civil Society Organisations			
European Social Network	Civil Society Organisation	advance the exchange of knowledge in public social services in partnership with health, education, housing, employment and social inclusion	Europe
Working with cancer	social enterprise supporting cancer patients returning to work	Helping workers manage cancer in workplace	United Kingdom
Susret	Civil Society Organisation		Croatia
Society of Social Psychiatry P. Sakellaropoulos	Civil Society Organisation		Greece
Researchers			
European Association for Cancer Research (EACR)	Researchers		Europe
European Academy of Cancer Sciences (EACS)			Europe
European Organisation for Research and Treatment of Cancer (EORTC)	Researchers		Europe

International Society for Quality of Life Research (ISOQOL)	Researchers	global community of researchers, clinicians, health care professionals, industry professionals, consultants, and patient research partners advancing HRQL	Europe
European Palliative Care Research Centre (PRC)	Researchers		Europe
Medical Societies			
European School of Oncology (ESO)	Researchers		Europe
European Association of Palliative Care (EAPC)	Medical Society		Europe
World Organization of National Colleges, Academies and Academic Associations of General Practitioners/Family Physicians (WONCA Europe)	Primary Care professional society		Worldwide
European Forum for Primary Care (EFPC)	Primary Care professional society		Europe
American Society of Clinical Oncology (ASCO)	Medical Society		US
International Society of Oncology Geriatrics (SIOG)	Medical Society		Europe
Multinational Association for Supportive Care in Cancer (MASCC)	Medical Society		Europe
European Pain Federation (EFIC)	Medical Society		Europe
European Oncology Nursing Society (EONS)	Medical Society		Europe
European Association of Urology Nurses (EAUN)	Medical Society		
	Medical Society		Europe
European Society of Pathology (ESP)	Medical Society		Europe
European Society for Clinical Nutrition and Metabolism (ESPEN)	Medical Society		
	Medical Society		
	Medical Society		
	Medical Society		Europe
European Society of Surgical Oncology (ESSO)	Medical Society		
	Medical Society		Europe
European Society of Oncology Pharmacy (ESOP)	Medical Society		
	Medical Society		Europe
European Society for Radiotherapy and Oncology (ESTRO)	Medical Society		Europe

European Society for Medical Oncology (ESMO)	Medical Society		Europe
European Association for Quality and Safety to General Practice/Family Medicine (EQUIP)	Medical Society		Europe
European Head & Neck Society (EHNS)	Medical Society		Europe
World Physiotherapy Europe	Medical Society		Europe
European Society for Sexual Medicine (ESSM)	Medical Society		
	Medical Society		Europe
European Federation of Nurses Associations (EFN)	Medical Society		Europe
SIOPE-Europe	Medical Society		Europe
European Association of Neuro-Oncology (EANO)	Medical Society		Europe
Psycho-oncology societies			
International Psycho-Oncology Society (IPOS)	Psycho-oncology Federation		International
Psycho-oncology Co-operative Research Group (PoCoG)	Psycho-oncology Society		Slovenia
Sociedad Espanola de Psiconcologia – SEPO	Psycho-oncology Society		Spain
Svensk förening för psykosocial onkologi och rehabilitering (SWEDPOS)	Psycho-oncology Society		Sweden
Swiss Society of Psycho Oncology	Psycho-oncology Society		Switzerland
Ukrainian Psycho-oncology Association (UPOA)	Psycho-oncology Society		Ukraine
British Psychosocial Oncology Society (BPOS)	Psycho-oncology Society		UK
Turkish Psycho-Oncological Association	Psycho-oncology Society		Turkyie
Belgian Society of Psychosocial Oncology (BSPO)	Psycho-oncology Society		Belgium
Bulgarian Association of Psycho-Oncology (BAPO)	Psycho-oncology Society		Bulgaria
The Institute of Applied Psychology of Czech republic (IAP)	Psycho-oncology Society		Czech Republic
French and Francophone Society of Psycho-Oncology – SFPO	Psycho-oncology Society		France
German Association of Psychosocial Oncology	Psycho-oncology Society		Germany
Irish Psychosocial Oncology Network	Psycho-oncology Society		Ireland
Italian Society of Psycho-Oncology – SIPO	Psycho-oncology Society		Italy

Psychosocial Oncology Association (POA)	Psycho-oncology Society		Lithuania
Netherlands Dutch Society of Psychosocial Oncology Nederlandse Vereniging Pdychosociale Oncologie – NVPO	Psycho-oncology Society		Netherlands
Polish Psychooncology Society	Psycho-oncology Society		Poland
APSCO – Romanian Association for Services and Communications in Oncology	Psycho-oncology Society		Romania
Policy-makers			
Organisation for Economic Co-operation and Development (OECD)	Policy-makers		International
Organisation of European Cancer Institutes (OECI)	International organisation		International
French National Cancer Institute (INCa)	National Authority on Cancer		France
			France
			France
Instituto de Salud Carlos III (ISCIII)	Spanish Public Health Institute		Spain
German Cancer Research Centre (DKFZ)	National Authority on Cancer		Germany
Belgian Cancer Centre (Sciensano)	National Authority on Cancer		Belgium
			Belgium
			Belgium
			Belgium
			Belgium
			Belgium
Netherlands Cancer Institute (NKI)	National Authority on Cancer		Netherlands
			Netherlands
Austrian Institute of Cancer Research (MedUni Vienna)	National Authority on Cancer		Austria
Comprehensive Cancer Centre - Vratsa (CCC - Vratsa)	National Authority on Cancer		Bulgaria
Cyprus Cancer Research Institute (CCRI)	National Authority on Cancer		Cyprus
Masaryk Memorial Cancer (MMC)	Research and clinical organisation		Czech Republic
Complex Oncology Center (COC)	Cancer center		Czech Republic
Danish Cancer Society Research Center (DCRC)	National Authority on Cancer		Denmark

Hungarian National Institute for Cancer (ONKOL)	National Authority on Cancer		Hungary
National Hellenic Research Foundation (EIE)	National Authority on Cancer		Greece
Italian National Institute for Health (ISS)	National Authority on Cancer		Italy
National Cancer Institute Cancer (NVI)	National Authority on Cancer		Lithuania
Institut National du Cancer du Luxembourg (INC)	National Authority on Cancer		Luxembourg
Ministry for Health and Active Ageing (MHA)	National Ministry		Malta
Maria Skłodowska Curie Memorial Cancer Centre and Institute of Oncology (MCMCC)	National Authority on Cancer		Poland
Portuguese Institute of Oncology (IRCA)	National Authority on Cancer		Portugal
Oncology Association „Ion Chiricuță” (IOCN)	National Authority on Cancer		Romania
National Cancer of Slovakia (NOISK)	National Authority on Cancer		Slovakia
Institute of Oncology Ljubljana	National Authority on Cancer		Slovenia
Karolinska Comprehensive Cancer Centre (Karolinska CCC)	Research organisation		Sweden
Institute for Cancer Research (OUS)	National Authority on Cancer		Norway
Croatian Association for Cancer Research (HDIR)	National Research Association		Croatia
Regulatory Authorities and payers			
European Medicines Agency	Regulators & payers		EUROPE
Food and Drug Administration (FDA)	Regulators & payers		US
European Network for Health Technology Assessment (EUnetHTA)	Regulators & payers		EUROPE
International Association of Mutual Benefit Societies (AIM)	Regulators & payers		EUROPE
Insurance Europe	Regulators & payers		EUROPE
European Social Insurance Platform (ESIP)	Regulators & payers		EUROPE
Similar projects and initiatives			
ALTHEA	EU4Health EU4H-2023-PJ	This project aims to develop and implement the web-based Althea platform that would facilitate the screening of mental health issues among cancer patients and their families, while supporting patients	

		and healthcare providers in accessing up-to-date educational materials and promoting the delivery of tailored psychological support.	
DESIPOC	EU4Health EU4H-2023-PJ	This EU4Health project aims project aims to address the variation in psychosocial oncology care across Europe and improve mental health screening for patients, carers, families, and healthcare professionals.	
BD4QoL	H2020; Grant Agreement: 875192; 2020–2024	The BD4QoL project aims at enhancing the quality of life (QoL) for head and neck cancer (HNC) survivors through the use of artificial intelligence (AI)	
Co-CAPTAIN	HORIZON; Grant Agreement: 101104784; 2023–2026	The Co-CAPTAIN project addresses both cancer and mental health issues, and aims to reduce cancer burden and improve the well-being of people with mental health challenges	
FAITH	H2020; Grant Agreement: 875358; 2020–2024	The FAITH project applies advanced AI and Big Data analytics to enhance disease and treatment monitoring for cancer patients, with the aim of improving their quality of life and aftercare.	
MATER	HORIZON; Grant Agreement: 101106577; 2023–2025	The MATER project leverages advanced techniques in AI and Big Data analytics to enhance mental health monitoring in breast cancer patients, aiming to improve their well-being during and after treatment.	
PERSIST	H2020; Grant Agreement: 875406; 2020–2023	The PERSIST project employs advanced AI and Big Data for cancer survivor care. It aids the transition from patient to survivor, offering dynamic decision support for self-care.	
BEACON	EU4H; Grant Agreement: 101080005; 2022–2024	The BEACON project, a collaboration between the European Institute of Oncology of Milan (IEO), the European Alliance for Personalised Medicine (EAPM), and other institutes from Italy, Estonia, and Croatia, aims to reduce cancer disparities across Europe.	
ONCOMMUN: Online Cancer Support Communities	EU-funded proposal (Ref 2019: 19046 Ref 2020: 20536) by the EIT-Health (European Institute of Innovation & Technology, Health community)	The purpose of ONCOMMUN was to integrate screening and monitoring risk assessment tools with an early-stepped psychosocial intervention for cancer patients during the acute phase of their illness. To do this, a web-based professional platform and a mobile application connect healthcare providers and patients.	
CARDIOCARE	H2020; Grant Agreement ID:	. CARDIOCARE provides holistic solutions for prevention, precise stratification, early detection, and	

	945175; 2021–2025	treatment of cardiotoxicity, with a strong emphasis on safeguarding mental well-being.	
EUonQoL	HORIZON; Grant Agreement ID: 101096362; 2023–2026	The EUonQoL aims to provide a unified, standard European Quality of Life (QoL) assessment system (EUonQoL-Kit) for cancer patients and survivors.	
BOUNCE	H2020; Grant Agreement ID: 777167; 2017–2022	The BOUNCE project aimed at developing a dynamic, predictive model of patient outcomes to build a decision-support system used in routine clinical practice.	
iBeChange	HORIZON; 2023–2028	The iBeChange project aims at designing, developing, and testing a digital platform to foster and support behaviour change for the maintenance and improvement of health	
Joint Action MENTOR	EU4Health	MENTOR aims to promote mental health by sharing experiences across a wide spectrum, from political initiatives to clinical professional practices.	
Joint Action eCan	EU4Health	The eCAN Joint Action aims to provide a framework of recommendations for the integration of telemedicine and remote monitoring in health care systems.	
JANE 2	EU4Health	JANE-2, building on the outcomes and achievements of EU Joint Action JANE (2022-2024), aims to build seven new Networks of Expertise (NoEs), , focusing on transversal aspects of cancer to provide the highest standard of care within the EU.	
ECHoS	Horizon Europe	ECHoS aims to support the implementation of the Cancer Mission activities in all Member State and Associated Country (MS/AC) through the establishment and development of National Cancer Mission Hubs (NCMHs) operating at national, regional, and local levels.	
CCI4EU	Horizon Europe Grant Agreement n. 101103746	CCI4EU is a European initiative aiming to help Member States and Associated Countries to rethink the cancer culture by funding a more equitable transfer of knowledge to everyone.	
EUnetCCC	EU4Health	As a successor to the Joint Action CraNE , the Joint Action “European Network of Comprehensive Cancer Centers” (EUnetCCC) was launched in October 2024. The aim of the European network of Comprehensive Cancer Centers (CCC) is to connect CCC structures across Europe in order	

		to provide all patients with access to high-quality research and care structures	
smartCARE	EU4Health	smartCARE is a flagship initiative in Europe's Beating Cancer Plan, under the EU4Health Programme 2021-2027 . The project is developing a cancer survivor smart card - in the form of a mobile app - to improve the health and wellbeing of cancer survivors throughout Europe.	
YARN	EU4Health - Grant Agreement No 101219053.	The European Youth Cancer Network (YARN) is an ambitious Horizon Europe initiative designed to empower young people affected by cancer through peer support, digital innovation, and inclusive care. Building on the legacy of EU-CAYAS-NET and OACCUs, YARN strengthens a growing European network of adolescents and young adults (AYA) impacted by cancer by enhancing access to psychosocial support, reliable information, and long-term care resources—especially for those facing relapse, metastatic cancer, and treatment side effects.	

3. A Policy Outreach Strategy: A three-pillar approach

The adoption of a three-pillar policy outreach strategy—European, national, and project-specific—has been deemed essential to ensure the relevance, uptake, and sustainability of the MELODIC Project. Each pillar addresses a specific level of policymaking and stakeholder engagement, necessary to advance the integration of mental health support within cancer care and to promote the use of the MELODIC digital platform.

- The **European pillar** will anchor the issue at the highest policy level, fostering cross-border collaboration, raising awareness among European Union institutions, and engaging platforms such as the European Parliament's Cancer and Rare Diseases Intergroup. It will provide visibility and strategic alignment across Member States.
- The **national pillar** will enable the contextualisation of this agenda by engaging directly with relevant national leaders, supporting the recognition of psycho-oncology within national health systems, and facilitating the exchange of best practices. It also aims to equip countries at different stages of development with tailored advocacy tools.

- Finally, **the project-specific pillar** will focus on the implementation and promotion of the MELODIC platform itself, through targeted knowledge transfer activities, stakeholder engagement forums, and dissemination of outcomes.

Collectively, this multi-tiered approach will enable efficient dialogue and action across governance levels.

3.1. The European pillar

3.1.1. Awareness-raising

Cancer not only affects the body but also takes a severe toll on mental health, leading to anxiety, depression, and Post-Traumatic Stress Disorder (PTSD), yet this aspect is often overlooked. Patients and survivors face emotional distress, fear of recurrence, and challenges in adjusting to life after treatment, which can deeply impact their well-being. Despite its significance, **the psychological burden of cancer remains under-communicated in public discourse and policy discussions**. Raising awareness about this issue is crucial to ensuring that mental health support becomes an integral part of cancer care.

Awareness campaigns – particularly on social media - are essential for breaking stigma, educating the wider public, and advocating for better policies. Using platforms like LinkedIn, Bluesky, and Instagram helps reach a broad audience. These social campaigns provide an opportunity to share personal stories, expert insights, and valuable resources. They also engage policymakers and organisations, encouraging them to take concrete actions toward improving mental health care in the context of cancer. By leveraging visual storytelling and interactive content, awareness campaigns contribute to creating a lasting impact. Ultimately, these campaigns are not just about awareness but about ensuring that mental health remains a priority all year round.

On the below awareness days/weeks, MELODIC's social media accounts will be used to develop specific messaging:

- *World Mental Health Day* – October 10,
- *European Mental Health Week* – Second week of May.
- *European Depression Day* – October
- *World Suicide Prevention Day* – September 10
- *International Stress Awareness Week* – First full week of November

Posts will be designed to not only inform but to mobilise. They will feature a combination of patient and survivor testimonies, expert interviews, infographics on the mental health impacts of cancer, and calls to action for policymakers.

On designated awareness days and weeks, such as **World Mental Health Day** and **European Depression Day**, tailored messaging will link the wider mental health conversation directly to cancer. Content will also call for inclusion in national cancer plans and EU frameworks.

By combining advocacy, education, and lived experience, these campaigns aim to create sustained political will and public support for comprehensive, patient-centred cancer care.

Summary of key actions:

- **Raise public and political awareness** of the psychological burden of cancer through targeted messaging.
- **Leverage social media platforms** (LinkedIn, X, Bluesky, Instagram) to share patient stories, expert insights, and calls to action.
- **Activate campaigns around key awareness days** (e.g. World Mental Health Day, European Depression Day) to link mental health and cancer.
- **Advocate for integration of mental health** in national cancer plans and EU frameworks year-round.

3.1.2. Leveraging of the European Parliament Intergroups

European Parliament Intergroups serve as informal platforms for cross-party dialogue, bringing together Members of the European Parliament (MEPs) from at least three political groups.

- A key element of this policy strategy will be to outreach the freshly created **Cancer and Rare Diseases Intergroup** of the European Parliament, for the 2024-2029 mandate. The [71 members of the Cancer and Rare Diseases Intergroup](#) will represent a timely opportunity to discuss the intersection between mental health and cancer - as championed by the MELODIC Initiative - and facilitate collaboration between policymakers and civil society, strengthening advocacy efforts across Europe.
- In parallel, outreach will also target the [European Parliament Intergroup on Mental Health](#), which has historically played a central role in placing mental health higher on the EU's political agenda. Its 83 members will also play a key role.

Different members of the European Parliament are notably registered in both intergroups and could be leveraged:

- MEP Tilly Metz
- MEP Tomislav Sokol
- MEP Vlad Vasile-Voiculescu
- MEP Vytenis Andriukaitis
- MEP Hildegarde Bentele
- MEP Olivier Chastel
- MEP Annalisa Corrado
- MEP Loucas Furlas
- MEP Kathleen Funchion
- MEP Georgios Georgiou
- MEP Michalis Hadjipantela
- MEP Romana Jerkovic
- MEP Irena Joveva
- MEP Ondrej Knotek
- MEP Irena Konecna
- MEP Andras Kulja
- MEP Lukas Mandl
- MEP Ignazio Marino
- MEP Ana Miranda Paz
- MEP Cynthia Ni Mhurchiu
- MEP Nikos Papandreou
- MEP Sirpa Pietikainen
- MEP Oliver Schenk
- MEP Liesbet Sommen
- MEP Aurelius Veryga
- MEP Nicola Zingaretti

A **joint hearing of both committees** in the European Parliament, bringing together representatives of the three flagship projects under the MELODIC umbrella. This hearing would serve as a public platform to highlight the interconnectedness of mental health, cancer, and rare diseases; to present the latest evidence and lived experience insights; and to mobilise broader institutional support. It will also provide an opportunity to enhance policymakers' knowledge and understanding of these issues. This will ensure that the hearing is positioned as a substantive policy exchange rather than a symbolic or purely discursive event. Co-hosting the hearing with MEPs from both Intergroups would maximise visibility, promote alignment across policy areas, and set the stage for integrated EU-level action on mental health and cancer throughout the 2024–2029 mandate.

Beyond the hearing itself, the **strategy will aim for structured, proactive, and responsive engagement with policymakers**. This will comprise contributions to relevant EU consultations on Commission proposals, but also the systematic raising of mental health and cancer considerations in bilateral meetings with MEPs.

Policy recommendations will be developed as a core deliverable of this initiative, with the explicit objective of submitting them to policymakers at both EU and national levels and

presenting them for discussion during a dedicated hearing in the European Parliament. These recommendations will then be consolidated into a comprehensive policy paper addressing mental health and cancer. The Mental Health and Cancer Policy Summit (see below) will then build on this momentum by highlighting project-specific successes, showcasing practical demonstrations, and outlining further strategic measures.

Summary of key actions:

- Engage with the Cancer and Rare Diseases Intergroup **to raise the profile of mental health in cancer care and foster collaboration with civil society.**
- Strengthen ties with the Mental Health Intergroup, **a long-standing driver of EU mental health policy.**
- Leverage MEPs active in both intergroups **to build cross-party support for integrated approaches.**
- Propose a joint hearing **co-hosted by MEPs from both intergroups to spotlight the intersection of mental health, cancer, and rare diseases and mobilise EU-level action.**

3.1.3. Mental Health and Cancer Policy Summit

A **“Mental Health and Cancer Policy Summit”** will be organised as a common synergy event, in collaboration with the other projects from the cluster, DESIPOC and ALTHEA. The "Mental Health and Cancer Policy Summit" will bring together stakeholders from across various projects within the cluster, providing a collaborative platform for sharing insights, discussing challenges, and identifying solutions to address the intersection of cancer and mental health. By uniting experts, healthcare providers, policymakers, and patient advocates, the summit aims to foster meaningful dialogue and coordination. This event can serve as a crucial step forward in bridging the policy gap between cancer care and mental health support, ensuring a more integrated and holistic approach to patient well-being.

Summary of key actions:

- **Organise a “Mental Health and Cancer Policy Summit”** with DESIPOC and ALTHEA to foster cross-project collaboration, share insights, and drive integrated policy solutions.
- **Use the summit as a platform** to unite stakeholders and advance a holistic approach to cancer and mental health at EU level.

3.2. The National pillar

The organisation, financing, and delivery of cancer and mental health services remain the responsibility of national governments.

A national pillar for this Strategy is essential to ensure that the project's outcomes are translated across Member States. Focusing on the national level allows the project to reflect the diversity of health systems, capture country-specific needs, and tailor recommendations to local and national contexts.

It would also enable bridging the gap between EU ambitions and national implementation, reinforcing the sustainability of the MELODIC project.

3.2.1 Advocating for the recognition of psycho-oncology needs

Albeit relevant across various domains of MELODIC's engagement, two stakeholder categories identified in Section 2.4 will be particularly instrumental to national-level advocacy: the national psycho-oncology societies and the national cancer and mental health patient support and advocacy groups.

Country	Psycho-oncology society	Website
Belgium	Belgian Society of Psychosocial Oncology (BSPO)	https://bspo.be/agora/?ctrl=dashboard
Bulgaria	Bulgarian Association of Psycho-Oncology (BAPO)	https://bapo.bg/
Czech Republic	The Institute of Applied Psychology of Czech Republic (IAP)	http://www.aplikovanapsychologie.cz/en/
Denmark	Danish Psycho-Oncology Cooperative group (DPOC)	https://www.dpoc.dk/
France	French and Francophone Society of Psycho-Oncology (SFPO)	https://sffpo.fr/
Germany	German Association of Psychosocial Oncology	https://www.dapo-ev.de/
Ireland	Irish Psychosocial Oncology Network	https://www.ipson.ie/
Italy	Italian Society of Psycho-Oncology (SIPO)	https://siponazionale.it/
Lithuania	Psychosocial Oncology Association (POA)	http://www.poa.lt/
Netherlands	Netherlands Dutch Society of Psychosocial Oncology (NVPO)	https://nvpo.nl/
Poland	Polish Psycho-Oncology Society	https://www.ptpo.org.pl/
Romania	Romanian Association for Services and Communications in Oncology (APSCO)	https://www.psychooncology.ro/apscoen/

Slovenia	Psycho-oncology Co-operative Research Group (PoCoG)	https://www.pocog.org.au/
Spain	Sociedad Española de Psiconcología (SEPO)	https://sepo.es/v5/
Sweden	Svensk förening för psykosocial onkologi och rehabilitering (SWEDPOS)	https://www.swedpos.se/

Psycho-oncology societies represent a critical vehicle for advancing the recognition, integration, and resourcing of psycho-oncology services within national cancer and mental health policies. Meanwhile, cancer and mental health patient support and advocacy groups are crucial for the understanding and addressing of cancer patients' mental health needs, and for them to be taken into account at the policy level. The combined expertise, national presence, and connections of these groups position them as key allies in promoting the use of the MELODIC platform.

While Europe's Beating Cancer Plan and related EU frameworks increasingly acknowledge the mental health needs of cancer patients and survivors, **this recognition must now be embedded at the national level**. In this aim, **alignment with the International Psycho-Oncology Society (IPOS), the Workgroup of European Cancer Patient Advocacy Networks (WECAN), the Association of European Cancer Leagues (ECL) and the Global Alliance of Mental Illness Advocacy Networks (GAMIAN-EUROPE)** as global leaders in the field will be instrumental.

In consultation with the latter organisations, ECO will initiate structured collaboration with their members and relevant leaders in the different countries to support a **coordinated advocacy push for the recognition of psycho-oncology and cancer patients' mental health needs within each Member State's healthcare system**.

This will include the **organisation of a focused workshop with key national leaders from countries with diverse levels of advancement in integrating mental health into cancer care**. The aim is to understand how progress was achieved, what enablers and barriers existed, and share best practices and experiences on how mental health was successfully positioned within national cancer policies. These insights will inform the corresponding section of the MELODIC policy recommendations, as well as the development of specific tools to support them, detailed below. Participants will help shape a shared vision for advancing psychosocial care across Europe.

Summary of key actions:

- **Engage national psycho-oncology societies** across Europe as key partners to promote integration of psycho-oncology in national cancer and mental health policies.
- **Organise a focused workshop** with national leaders to extract lessons learned and share best practices.
- **Promote inclusion of psycho-oncology** in national cancer control plans through targeted outreach and evidence-based policy recommendations.

3.2.2 Comparing national progress on the integration of psycho-oncology

To ensure meaningful progress and targeted support, **ECO will produce a comparison of European countries' policies on mental health and cancer**, including in the integration of psycho-oncology and cancer patients' mental health needs into cancer care. This will be based on available evidence in the literature, engagement with national leaders and results from relevant activities under the MELODIC project, especially those conducted under the MELODIC WP3 on disparities in mental health screening and support. Mapping this variation will help highlight best practices that can be shared and scaled; while **also exposing critical gaps were additional advocacy, capacity-building, or policy reform may be necessary**. Understanding the disparities in service provision, professional training, institutional recognition, and funding across Member States allows MELODIC to tailor its outreach.

This could take the form of a **Policy Index on Mental Health and Cancer** to track and compare how European countries address the mental health needs of people affected by cancer.

Inspired by ECO's existing [Cancer Screening Policy Index](#), this new tool would provide a clear overview of national progress, highlight gaps, and support evidence-based advocacy. By making disparities between Member States visible, the Index would encourage policy action and greater consistency in integrating mental health within cancer care across

Summary of key actions:

- **Develop a comparison of national policies on mental health and cancer** to track national progress and highlight disparities across Europe.
- **Use the comparison as an advocacy tool** to drive policy action and promote consistent integration of mental health in cancer care.

Europe.

3.2.3 Development of a psycho-oncology advocacy toolkit

As part of its policy outreach strategy and building upon the above national comparison, ECO will develop a **psycho-oncology advocacy toolkit** to help national stakeholders promote the integration of psycho-oncology and cancer patients' mental health needs into cancer care and NCCPs. The toolkit will include key messages, policy recommendations, examples of good practice. It will support psycho-oncology societies, patient support and advocacy organisations, and health professionals in making the case for better recognition and investment in psychosocial care.

Special focus will be given to **sharing the toolkit with countries where psycho-oncology is still underdeveloped**. In these countries, the toolkit will help raise awareness and guide first steps toward policy change.

Summary of key actions:

- **Develop a psycho-oncology advocacy toolkit** with key messages, policy recommendations, and good practices to support national advocacy.
- **Prioritise dissemination in underdeveloped countries** to raise awareness and guide early policy action on psycho-oncology.

3.3 The project-specific pillar

The project-specific pillar anchors MELODIC within the broader European policy landscape, ensuring that its outputs are not only disseminated but meaningfully embedded in ongoing policy and practice developments. Its dual purpose is to strengthen the collective momentum around adolescent and young adult (AYA) cancer policy at EU level, and to facilitate the long-term uptake of MELODIC's training and resources through integration into existing structures.

3.3.1 Positioning MELODIC within wider AYA cancer policy efforts

MELODIC will not operate in isolation but as part of a coordinated policy effort across Europe to address the unique needs of AYAs with cancer. The project will build on and connect with the work of a range of complementary EU-supported initiatives, including:

- the EU Network of Youth Cancer Survivors (EU-CAYAS-NET and YARN projects);
- the EU Network of Expertise on AYA cancer (as part of the JANE and JANE-2 Joint Actions);
- the STRONG-AYA project on creating value-based care for AYA with cancer
- the e-QuoL project on e-health tools to help paediatric and youth cancer survivors manage their health; and,
- Research projects on late effects in AYAs with cancer (PanCare4AYA, PREDICT-AYA, TRANSCEND-XR, MAYA and LATE-AYA).

Policy outreach activities are being currently developed by the European Cancer Organisation in the context of some of the above initiatives in order to set out a structured approach to advancing adolescent and young adult (AYA) cancer care in Europe. Their objectives are twofold, and provide a clear framework within which synergies with MELODIC will be sought:

- **Objective 1: Recognition of AYA cancer at European Union policy level.** This will be pursued through a high-level workshop at the European Parliament in Q2 2026, bringing together MEPs, European Commission officials, patients, and professionals. The event will serve to consolidate understanding of the unique challenges faced by AYAs with cancer and to launch EU-level policy recommendations alongside an “AYA cancer: facts and figures” guide.
- **Objective 2: Establishment of specialised AYA cancer care at the national level.** Activities will include educational outreach to national MPs, a benchmarking tool and policy index to map AYA cancer care across Europe, and a leadership workshop to connect countries with advanced services to those developing them. The ultimate goal is to support health ministries and care providers in integrating AYA-specific services into national cancer strategies and health systems.

For MELODIC, this strategy creates a direct opportunity to position its work on mental health and wellbeing as a central component of AYA cancer policy. By aligning with wider AYA cancer policy objectives, MELODIC can ensure that psychosocial needs are fully embedded within both EU- and national-level policy discussions. Engagement with EU and national stakeholders will therefore highlight MELODIC’s role as a concrete, implementable resource within the collective push to improve outcomes and wellbeing for young people with cancer and their families.

3.3.2. Promoting integration of MELODIC training into European curricula

A second project-specific strand will focus on embedding MELODIC’s training for healthcare professionals within existing and emerging European training programmes and curricula.

This will involve proactive outreach to initiatives dedicated to strengthening cancer workforce skills, such as [INTERACT-100](#), as well as professional societies in oncology, psycho-oncology, nursing, and allied health. The aim will be to secure recognition of MELODIC training as a complementary module that can enhance current provision and support harmonised standards of care across

Member States. Discussions with professional networks and EU-level training projects will explore opportunities for co-certification, accreditation, or integration of MELODIC content into their platforms.

By building these targeted synergies, MELODIC will secure a place within trusted professional and patient networks, ensuring the platform is not an isolated output but an integrated and recognised element of the European cancer and mental health ecosystem.

3.3.3. Promoting MELODIC to wider audiences

In parallel with targeted partnerships, MELODIC will pursue a visibility strategy to secure recognition as a trusted European resource on cancer and mental health. A third strand will promote MELODIC at high-level stakeholder events, such as the European Cancer Organisation Stakeholder Fora, the Mental Health and Cancer Policy Summit, and selected national platforms.

These occasions will showcase the project's practical value, gather feedback to refine its outputs, and build endorsements for integration into policy and practice, while consistently highlighting its alignment with EU priorities.

As part of a coordinated strategy with ALTHEA and DESIPOC, upcoming fora will present MELODIC's findings alongside those of partner projects, raising awareness of the mental health dimension of cancer, fostering partnerships, and positioning MELODIC as a leading voice in embedding psychosocial care within cancer policy across Europe.

Summary of key actions :

- **Promote the MELODIC digital platform** as a lasting European resource for knowledge exchange, good practices, and policy support on mental health for adolescents and young adults (AYAs) with cancer.
- **Advocate for integration of the platform into broader EU initiatives** to ensure sustainability beyond the project lifespan.
- **Support integration of psycho-oncology into professional training programmes**, aligning with initiatives like INTERACT-100 to upskill the cancer care workforce on the topic of cancer within (A)YA groups.
- **Use stakeholder fora, jointly with ALTHEA and DESIPOC**, to showcase MELODIC's work -including on social prescribing and (A)YAs, raise awareness, and foster partnerships across policy and practice communities.

References

1. Pan American Health Organization. World Cancer Day 2022: Close the care gap. Available from: <https://www.paho.org/en/campaigns/world-cancer-day-2022-close-care-gap>
2. Roberta De Angelis, Demuru E, Paolo Baili, Troussard X, Katalinic A, Dolores M, et al. Complete cancer prevalence in Europe in 2020 by disease duration and country (EUROCORE-6): a population-based study. *The Lancet Oncology*. 2024 Mar 1;25(3):293–307.
3. Joint Research Centre. “European Cancer Information System.” [Ecis.jrc.ec.europa.eu](https://ecis.jrc.ec.europa.eu/), ecis.jrc.ec.europa.eu/.
4. Van Beek FE, et al. Psychological problems among cancer patients in relation to healthcare and societal costs: A systematic review. *Psycho-Oncology*. 2021;30(11):1801-1835.
5. Lange M, Licaj I, Clarisse B, et al. Cognitive complaints in cancer survivors and expectations for support: Results from a web-based survey. *Cancer Med*. 2019;8(5):2654-2663.
6. Lewandowska A, et al. The problems and needs of patients diagnosed with cancer and their caregivers. *Int J Environ Res Public Health*. 2021;18(1):87.
7. Ji X, Marchak JG, Mertens AC, et al. National estimates of mental health service use and unmet needs among adult cancer survivors. *Cancer*. 2021;127(22):4296-4305.
8. Yıldız K, Koç Z. Stigmatization, discrimination and illness perception among oncology patients: A cross-sectional and correlational study. *Eur J Oncol Nurs*. 2021;54:102000.
9. Gorini A, et al. A P5 Approach to m-Health: Design Suggestions for Advanced Mobile Health Technology. *Front Psychol*. 2018;9:2066.
10. Grassi L, et al. Anxiety and depression in adult cancer patients: ESMO Clinical Practice Guideline. *ESMO Open*. 2023;8(2):e1119.
11. Holland JC. Psycho-oncology: overview, obstacles and opportunities. *Psycho-Oncology*. 2018;27(5):1364-1376.
12. Hook K, Bogdanov S. Mental health care in Eastern Europe and Central Asia: an analysis of needs and a call for greater investment. *Lancet Reg Health Eur*. 2021;10:100182.
13. McCarter K, Britton B, Baker AL, et al. Interventions to improve screening and appropriate referral of patients with cancer for psychosocial distress: systematic review. *BMJ Open*. 2018;8(1):e017959.
14. Marchak JG, et al. Recommendations for the surveillance of mental health problems in childhood, adolescent, and young adult cancer survivors: a report from the International Late Effects of Childhood Cancer Guideline Harmonization Group. *Lancet Oncol*. 2022;23(4):e184-e196.
15. Mullen L, Signorelli C, Nekhlyudov L, et al. Psychosocial care for cancer survivors: a global review of national cancer control plans. *Psychooncology*. 2023;32(11): 1684-1693. <https://doi.org/10.1002/pon.6218>