

Community Mental Health Teams and Social Work Intervention in Portugal: Evidence from Practice-Based Research

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Abstract

The creation of Community Multidisciplinary Mental Health Teams represents an important step in the ongoing transformation of mental health care in Portugal. These teams promote the transition from a hospital-based model to an integrated model of community-based care. Within these multidisciplinary teams, social workers play a relevant role in addressing the social determinants of mental health and supporting recovery through psychosocial interventions. Despite these developments, empirical evidence regarding the contribution of social workers within Community Mental Health Teams remains limited.

This study was based on document analysis, semi-structured interviews conducted with social workers from the existing Community Mental Health Teams, non-participant observation, and qualitative content analysis using MAXQDA software. Interest in participating in the study was expressed by professionals from the Community Mental Health Teams. Although it was not possible to include all professionals, the study focused on the social workers integrated into these teams and on some team coordinators (health professionals).

The findings reflect the importance of social workers across several areas of practice, including community intervention, psychosocial assessment, case management, and mediation between formal and informal support networks.

The participating social workers also identified several challenges and weaknesses affecting their professional practice. These included employment insecurity, the lack of specialised training in mental health for professionals, limited material resources that would enable support to a greater number of families, and the lack of professional supervision for social workers integrated into the Community Mental Health Teams.

Overall, the study highlights the essential contribution of Social Work to community mental health care in Portugal. It also supports the need for increased investment in Community Mental Health Teams and for the development of public policies that strengthen an integrated model of care centred on people with mental illness and oriented towards recovery.

Keywords

Community mental health, Multidisciplinary team, Psychosocial rehabilitation, Social Work.

INTRODUCTION

Mental health has become a major global concern, particularly following the COVID-19 pandemic, which intensified mental illness, social isolation, and the structural inequalities existing within communities [1] [2].

The World Health Organization highlighted that mental health vulnerabilities are closely linked to social, economic, and community conditions, therefore requiring responses that go beyond the biomedical model [1].

In this context, community mental health services have gained significant importance as an alternative to hospital-based care, promoting proximity, continuity of care, and social inclusion [3] [4].

In Portugal, the creation of Community Mental Health Teams (CMHTs), under Ordinance No. 8455/2022, represented a significant reform in the organisation of mental health care. This reform is based on decentralisation, multidisciplinary collaboration, and community integration [5] [6].

Within this framework, Social Work plays a strategic role in addressing the social determinants of mental health,

supporting psychosocial recovery, and facilitating the inclusion of people with mental illness in the community. However, despite the importance of the Community Mental Health Teams, empirical evidence regarding the specific role of social workers within these teams remains limited when compared with countries such as Canada and Ireland [3] [4].

This study forms part of a doctoral research project in Social Work, and its empirical evidence is based on data collected from nine of the ten Portuguese Community Mental Health Teams established under the above-mentioned Ordinance [6].

The aim of this study was to analyse the practices of social workers integrated into the Community Mental Health Teams, contributing to international discussions on community mental health and on the role of Social Work within multidisciplinary care [3] [7] [8] [9].

METHODS

The methodology adopted in this study was based on document analysis, semi-structured interviews conducted with social workers integrated into the Community Mental Health Teams (CMHTs), non-participant observation, and the

analysis of coded categories to provide a comprehensive understanding of the practice of social workers working within the CMHTs.

Data Collection and Analysis

Data were collected through semi-structured interviews with social workers and team coordinators from the Community Mental Health Teams who agreed to participate in the study.

The study included 11 participants, selected through purposive sampling, from nine of the ten teams implemented in mainland Portugal.

The sample comprised six social workers and five medical coordinators, providing complementary perspectives on the organisation and functioning of the teams. Participants worked in both adult and child and adolescent mental health teams across the five regions of the country.

In addition to the interviews, non-participant observation was conducted within one Community Mental Health Team during community-based interventions. This was complemented by document analysis of the institutional and policy documents relevant to the study. The combination of these methods enabled methodological triangulation,

providing a broader and more contextualised understanding of the research phenomenon [6].

The semi-structured interviews were fully transcribed and analysed using MAXQDA software. Content analysis followed a systematic coding process based on the six theoretical-analytical dimensions defined in the study. A total of 243 text segments were coded and organised into categories and subcategories, allowing the identification of patterns, similarities and specific characteristics of Social Work intervention within Community Mental Health Teams.

To ensure the methodological rigour of the study, methodological triangulation was adopted through the combination of semi-structured interviews, non-participant observation and document analysis.

Content analysis followed a systematic and consistent coding process based on predefined analytical categories, strengthening the credibility and trustworthiness of the findings.

The participating Community Mental Health Teams presented organisational differences regarding team composition, target population, intervention strategies, partnerships, and organisational challenges, as shown in Table 1.

Table 1. Characteristics of the nine Community Mental Health Teams included in the study, highlighting differences in team composition, target population, intervention strategies, partnerships, and organisational challenges

Region	Team Composition	Population	Main Interventions	Partnerships	Main Challenges
North Alentejo	3 professionals; no social worker	Adults	Home visits; telephone follow-up	Local institutions	Human and material resource shortages
Northeast	5 professionals	Adults	Home visits; case discussions	Not reported	Lack of full-time staff
Setúbal	3 professionals; shared social worker	Adults	Home visits; telephone follow-up	Local institutions	Human and material shortages
Baixo Alentejo	3 professionals; social worker on request	Adults	Home visits; case discussions	Local institutions; Social Security	Human resource shortages
Trás-os-Montes Alto Douro	3 professionals	Children and adolescents	Home visits; school liaison	Schools; Child Protection Services	Human and material resource shortages
Oeste	4 professionals; no social worker	Adults	Home visits; case discussions	Local institutions	Lack of human resources
Alto Minho	Full multidisciplinary team	Children and adolescents	Home visits; case discussions	Local institutions	Lack of vehicle
Castelo Branco	Full multidisciplinary team	Adults	Home visits; telephone follow-up	Local institutions	Limited material resources
Algarve	Five teams; shared social workers	Adults and young people	Home visits; telephone follow-up	Local institutions	Human and material resource shortages

RESULTS

The study identified four main domains of Social Work intervention, which were confirmed through the recurring patterns emerging from the semi-structured interviews and supported by the observation data: psychosocial recovery, community inclusion, mediation between formal and informal support networks, and the continuity of Social Work intervention.

The four domains presented below emerged consistently across the interviews and were supported by the non-participant observation.

Psychosocial Recovery and Individualised Intervention

Social workers play a fundamental role in recovery-oriented practice and in reducing the recurrence of hospital admissions among people with mental illness through psychosocial assessment and the development of individualised intervention plans [7] [8].

One participant highlighted:

"Our intervention begins by understanding the person's social circumstances, because recovery is not limited to clinical treatment." (Social Worker 3)

These individualised plans go far beyond clinical needs, as they address housing stability, income support, appropriate family dynamics, and access to the necessary social rights [1] [7]. This approach reinforces a holistic understanding of recovery [7] [8].

Community Inclusion and Deinstitutionalization

The essence of Social Work lies in promoting the inclusion of people with mental illness in the community and supporting their autonomy without the need for repeated reliance on institutional services [3] [4] [7].

The social workers who participated in the study highlighted during the interviews that their interventions tend to reduce recurrent hospital admissions, strengthen collaboration with other community institutions, and facilitate the reintegration of people with mental illness into educational, occupational, and social settings.

As one participant explained:

"Community intervention helps people remain in their own environment and reduces the need for repeated hospital admissions." (Social Worker 5)

Network Mobilisation and Intersectorial Coordination

Social workers play a fundamental role in mediating between the services that support and respond to the needs of people with mental illness and their families [10]. These services generally include primary health care services, Social Security, local authorities, local institutions, and the family of the person with mental illness [6] [10].

A coordinator stated:

"The social worker is the professional who connects health services with community resources and families." (Coordinator 2)

Continuity of Care and Multidisciplinary Integration

Within the scope of the Community Mental Health Teams (CMHTs), social workers contribute to the continuity of care for people with mental illness [6] [3] [4]. They establish a link between hospital-based interventions and social interventions [3] [4]. These professionals also support decision-making, hospital discharge planning, and the continuity of community follow-up [10]. This organisation strengthens coordinated, person-centred care and facilitates the long-term recovery of people with mental illness [3] [4] [7].

According to one participant:

"Hospital discharge is only the beginning; continuity of care depends on community follow-up." (Social Worker 1)

DISCUSSION

The findings are consistent with the international evidence, which highlights the effectiveness of community-based mental health models and the fundamental role of Social Work in addressing the social determinants of mental health [1] [3] [4] [7] [8].

The findings of this study suggest that Social Work makes an important contribution to psychosocial recovery, reduces recurrent hospital admissions among people with mental illness, and strengthens the provision of community-based care.

However, it is important to emphasise that the care provided by social workers to people with mental illness not only reduces hospital admissions but also requires coordinated social responses that promote autonomy, participation, and citizenship [1] [7] [8].

Nevertheless, it is essential to highlight the various structural limitations that still affect social workers integrated into the Community Mental Health Teams (CMHTs). These include employment insecurity, the lack of specialised training in mental health, and the predominance of biomedical paradigms within multidisciplinary teams [6] [10]. These limitations restrict professional autonomy and hinder the full integration of social perspectives into mental health care, in line with the findings reported in international literature [3] [4] [8].

Despite these challenges, the findings suggest that the integration of social workers into Community Mental Health Teams contributes to the humanisation of services, promotes more human rights-based practices, and reduces recurrent hospital admissions among people with mental illness.

The findings also demonstrate the need for greater investment in public policies, specialised training for social workers, employment stability, and evaluation processes that take into account the social and relational outcomes for people with mental illness and their families [6] [1] [7].

LIMITATIONS

The limitations of this study were mainly related to the difficulty in accessing up-to-date national literature on Social Work and Mental Health. This was particularly challenging because the research focuses on the role of social workers

integrated into the field of mental health, specifically within multidisciplinary Community Mental Health Teams. This challenge is further reinforced by the fact that this is one of the first academic studies to explore this specific topic, highlighting the limited availability of reference literature.

CONCLUSIONS

It is important to emphasise that this study highlights the importance and the strategic role of Social Work within the Community Mental Health Teams (CMHTs) in Portugal, demonstrating its contribution to psychosocial recovery, community inclusion, and the protection of the rights of people with mental illness and their families.

The Portuguese experience suggests how Social Work strengthens the effectiveness of community mental health systems, particularly during the transition from a hospital-based model to a community-based model of care.

The sustainability and consolidation of these services require not only structural investment but also the formal recognition of Social Work as an essential component of the Community Mental Health Teams.

Future studies should expand international comparative analyses and examine the long-term outcomes of community mental health interventions.

By presenting the practices of social workers integrated into the nine Community Mental Health Teams, this study contributes to a better understanding of the integration of Social Work within the evolving community mental health system in Portugal.

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