

# Social work and the psychosocial effects of the economic crisis in Greece: Challenges for new radical directions in services, theory and values

## El trabajo social y los efectos psicosociales de la crisis económica en Grecia: Desafíos para nuevos objetivos radicales en servicios, teoría y valores

Asimopoulos Charis\* y Dimitra-Dora Teloni\*\*

\* Technological Institute of Athens, Department of Social Work. asimopoulos.charis@gmail.com,

\*\* Technological Institute of Athens, Department of Social Work. doratel71@gmail.com

---

### Abstract:

The economic crisis in Greece cause serious social problems (sudden increase in unemployment, job insecurity, in household debt, in poverty and inequality, greater social seclusion and significant cutbacks in health, mental health and social protection system) that have significant effects on the psychosocial situation of the population (increase of depression, anxiety, psychosomatic issues, alcohol abuse and suicide).

The psychosocial effects of the economic crisis have set new standards and demands for social work in Greece and for the role of the social workers and the social services, on two levels especially: service level and value and theory level. Social workers in all settings need to be in a position to deal with mental health problems with the appropriate clinical and community interventions as well as with radical approach and effective methods.

**Keywords:** Social work, economic crisis, Greece, mental health problems, radical approach.

---

### Resumen:

La crisis económica de Grecia provoca serios problemas sociales (aumento repentino del desempleo, inseguridad laboral, endeudamiento de los hogares, pobreza y desigualdad, mayor exclusión social y recortes significativos en salud, salud mental y sistema de protección social) que tienen efectos significativos sobre la situación psicosocial de la población (aumento de la depresión, ansiedad, problemas psicosomáticos, abuso de alcohol y suicidio).

Los efectos psicosociales de la crisis económica han establecido nuevos estándares y exigencias para el trabajo social en Grecia y para el papel de los trabajadores sociales y los servicios sociales, especialmente a dos niveles: a nivel de servicio y valores y a nivel teórico. Los trabajadores sociales, en todos los entornos, deben estar en condiciones de tra-

tar los problemas de salud mental con las intervenciones clínicas y comunitarias apropiadas, así como con un enfoque radical y métodos eficaces.

**Palabras clave:** Trabajo social, crisis económica, Grecia, problemas de salud mental, enfoque radical.

---

### **Article info:**

*Received: 12/10/2016 / Received in revised form: 13/11/2016*

*Accepted: 15/01/2017 / Published online: 16/01/2017*

DOI: <http://dx.doi.org/10.5944/comunitania.13.1>

---

## **1. Introduction**

As a result of the economic crisis in Greece, the number of people in need of support, addressing social services and facing mental health problems that have a greater impact on issues such as poverty, health and social functioning, has significantly increased.

Overall, the psychosocial repercussions of the economic crisis have set new standards for social work in Greece and have added new demands to the role of social services.

Social workers in all settings need to be in a position to recognize and deal with mental health problems and the consequences, with the appropriate clinical and community interventions as well as with radical approach and methods.

The information relating to the crisis has created challenges for new directions in social work in Greece, on two levels especially: service level and value and theory level.

## **2. The Economic Crisis and dismantling of the social services system**

As a result of the economic crisis, Greece has had significant social problems. These problems include a sudden increase in unemployment (an increase in official unemployment over the space of three years from 10% to 27.5% in December 2013, with 1000 people added daily and the total number of unemployed reaching 1,363,137. Only 174,178 people receive unemployment benefits, that is approximately 16.2% of those unemployed, indicating a lack of social protection and a threat to the survival of a large number of those unemployed) (National Statistical Services of Greece – ELSTAT- 2014). In addition, the crisis has also resulted in increased job insecurity, rapid increase in household debt (24% of households are unable to repay their mortgage installments or pay their rent) (Naoumi et al. 2010), an increase in poverty

---

and inequality, greater social seclusion (the percentage of the population at risk of poverty in 2013 reached 34.6% i.e. 3,795,100), adverse changes in way of life, and significant cutbacks in health, mental health and social protection.

These significant social issues act as stressors that have numerous and significant effects on the psychosocial situation and mental health of the population. Attempts are made to deal with these problems amidst shrinking social services and the dismantling of social protection and welfare, health and mental health systems. This situation is the result of a cutback in social spending due to the implementation of extreme neoliberal policies for economic and financial adjustment that have been applied to the country. Commitments towards the Troika and the International Monetary Fund to reduce the number of personnel working in the public sector resulted, as shown next, in weakening the social welfare and the social protection system mainly due to a large reduction in personnel and funding.

The Hellenic Association of Social Workers (HASW) published a report in March 2014 offering interesting information on the occasion of the World Social Work Action Day. More specifically, there is a serious shortage of social workers in the National Health System. For example, 24 out of 125 state hospitals do not have a social worker, there are 650 positions available for social workers that need to be filled in hospitals but there are currently 221 vacancies (equivalent to one third), one social worker is expected to meet the needs of 300 patients in a hospital, and at the moment 204 Health Centers in both urban and rural areas are operating without a social worker.

On a local government level, Social Services provided by municipalities (offering primary and urgent social care and are charged with issuing health cards for those who are uninsured, granting allowances, providing access to social support programmes as well as with investigating the living conditions of the underage children following juvenile court orders) are severely understaffed and are finding it difficult to carry out their duties. Let it be noted, that large municipalities across the country do not even have one social worker among their personnel. As for child protection, there is a significant shortfall of personnel in child protection institutions with a reduction of almost 50% in the number of social workers. For example, the social services department at the "Mitera" Infant Care Center currently has 8 social workers compared to 18 in 2008, while the children's institution "Aghia Varvara" now only has 2 social workers compared to 4 in 2008. The result is a prolonged stay for the children at the institutions with the consequences of institutional care as well as delays in placing them into foster care and adoptive families. In the field of justice and public security, there are only 35 social workers working across the country's 33 prisons. It must be noted, that eight of these prisons do not even have a single social worker. The ratio of social workers to prisoners ranges from 1: 250 to 500. There are only 5 social workers remaining out of 35, across the Child Protection Agencies of the Ministry of Public Order which also includes Accommodations Centres for Youths.

These policies are also applied to education. During the academic year 2013-2014 one in four Social Work Departments across the country closed down. This is yet another example of a welfare state in Greece that since the beginning of the economic crisis has been shrinking and failing without any warning.

### **3. The psychosocial effects of the economic crisis**

The World Health Organization (WHO) stressed in 2009, with regard to the prospects of the international economic crisis, that we should not be surprised if we see an increase in mental health problems and suicides, that the poor and vulnerable are the first to suffer and that defending health funds will become more difficult (WHO 2009).

International data indicates that an economic crisis increases mental health problems, reduces the resources needed to treat these problems and drastically shrinks health, mental health, social welfare and child protection service systems (WHO 2011). The effects of the economic crisis combined with a sudden increase in unemployment, resulted in psychotic episodes increasing threefold, alcohol abuse doubling, depression doubling and even tripling and an increase in homicides and psychiatric disorders in general (Paul & Moser 2009; Untela 2010; Bouras and Lykouras 2011). A reduction of income and unemployment is directly associated with the appearance of serious mental health problems. The unemployed are twice as likely to display mental illnesses compared to those working, while they also experience depression, anxiety, and psychosomatic problems combined with low self-esteem. Stuckler et al. (2009) demonstrated that there is a strong link between unemployment and suicide percentages. Their research data shows that every increase in unemployment by 1% corresponds with an increase of 0.8% in suicides.

This data is fully confirmed in relation to Greece and the current economic crisis. Research carried out by Giotakos et al. (2011) shows that people who are having great economic difficulty are three times more likely to experience a major depressive episode (20.9%) compared to those facing fewer economic difficulties (6.2%). 21.2% of these people mention having suicidal thoughts, three times higher than people who have fewer economic difficulties (7.4%). These people are in need of support services but have no access to them. In research carried out by Skapinakis et al. (2013), it appears that those who are unemployed in Greece, as opposed to those who are employed, are twice as likely to experience a mental health problem. Unemployment also seems to make people flirt with death. According to the data that resulted for this research, people who were unemployed were 2.5 times more likely to express "death wishes" and 1.5 times more likely to express suicidal ideation. The data collected from the use of the helpline for depression of the University Mental Health Research Institute acts as an indicator of the effects of the crisis. The amount of calls with a direct or indirect reference to the economic crisis increased from 1.8%

in 2008, to 8.4% in 2009 and to 26.9% in 2010 (Oikonomou et al. 2012). Finally, what is especially worrying is the significant increase in the number of suicides that took place in the country from the beginning of the economic crisis. Suicides quadrupled within four years. 366 suicides in 2009 increased to 700 suicides in 2011 and 1,000 in 2012 that is almost three suicides a day (Asimopoulos 2012).

From the beginning of the economic crisis, requests for help made to Social Welfare Services and Mental Health Units are on the increase. For example, the National Centre for Social Solidarity noticed a sudden increase by 40% in the calls it received, calls that seem to be mainly related to the crisis. There was also a significant increase in calls relating to domestic violence and welfare issues, survival problems, unexpected crises and emotional difficulties.

One would expect this data to lead to decisions related to strengthening mental health services and social welfare systems but in actual fact the opposite applies. Public spending on health and social welfare has been drastically reduced. So instead of strengthening the mental health services and services supporting the unemployed and their families, they are underfunded to the point where they are in danger of being suspended. This does not come as a surprise and it was indeed expected. It is a known fact that whatever country the International Monetary Fund (IMF) has visited has seen its health and social protection systems shrink with the excuse of having to deal with the economic crisis and having to cut back on public spending. Unfortunately, this policy is now applied in Greece with a dramatic impact on both the population's health and mental health.

Specifically, in the area of mental health, the 2013 state budget cut expenditure relating to the operation of Mental Health Units by 50% compared to 2011. The result is patients in Psychosocial Rehabilitation Units being at risk due to a lack of medication and malnourishment and employees not being paid for up to 8 months at a time. An exacerbation of these problems will inevitably lead, in the near future, to the closure of 350 Psychosocial Rehabilitation Units (Residential Institutions, Hostels, Day Centers, etc.), to the suspension of 3000 mental health professionals and to the return of 2000 mental patients who are now being treated in psychosocial rehabilitation residential units back to closed psychiatric institutions. There numerous examples. The operation of standard units for children and adolescents was suspended, an example being "Iris" Therapeutic Residential Facility for Adolescents and "Melia", a Residential Facility for Children with Mentally Ill Parents. The operation of the "Iolaos" Hostel for refugees with mental disorders was also suspended. The Organization of the Mental Health Centres merged four Hostels for long-stay mentally ill into two and two Mental Health Centers into one. For three months in September 2012 the operation of Day Centers and Mobile Units was suspended for new patients over a large part of the country. The Psychiatric Clinics of both the General Hospital "Evangelismos" and "G. Gennimatas" in Athens suspended in-patient care and refer patients to the "closed wards" of Attica's Psychiatric Hospital "Dafni".

Based on the aforementioned, in this situation where social services and mental health services in general are being dismantled, social workers in Greece during the economic crisis, irrespective of where they work, will come across more and more people of every age with significant and urgent basic social needs who are affected by mental health problems.

#### **4. The challenges faced by social work in the field of mental health in Greece during the economic crisis**

The psychosocial effects of economic crisis create new facts and directions for social work in Greece, especially in the mental health sector, that focus on two levels: the services level and values and theory level.

##### *4.1. The challenges that social work faces in the mental health sector*

During the economic crisis the welfare system's social services, due to the psychosocial effects of the crisis, emerge in the broader sense of the term as the mental health system's services. They play an important role in detecting and caring for people with mental health problems, many of whom are not expected to receive the necessary care or treatment given the situation. In everyday practice, social workers are given the opportunity to carry out mental health work.

The effects of the economic crisis on the population's mental health demand more specialized clinical methods and targeted community action from social workers. These include prevention, early intervention, collaboration and networking of services when working with people experiencing poverty and the homeless, child protection and family care and finally the mobilisation of social solidarity.

##### *A) Prevention, early intervention and networking of services*

Prevention and early intervention are good predictors in the case of mental health disorders (Campion et al. 2012). Especially now during the economic crisis, when problems relating to mental health are expected to increase, the role of social services of Greece in the prevention and promotion of mental health, as well as in issues of early intervention, gains significant importance.

In terms of social welfare services, it seems necessary to start providing, in a systematic and stable way, programs for the prevention of mental health and early intervention, especially when concerning child psychiatric problems, postnatal depression, anxiety disorders, depression, post-traumatic stress, grief and substance abuse. Social workers in the social services are able to recognize these problems and

have the knowledge and appropriate skills to support these people who are also facing unemployment, disability, poverty and traumatic experiences. These interventions will be organized by social workers and could include intervention programmes in schools relating to child and adolescent mental health issues, programmes for identifying high-risk groups, special interventions for people with mental health problems, support groups, special advisory services and individual work.

In order for social services to provide, based on the aforementioned, effective care for the community, they must be based on interdisciplinary team and cooperation between social workers and other professionals, as well as networking between local services (welfare, health, education, etc.).

### *B) Working with the homeless*

Since 2008, the number of homeless in Greece has increased. In 2010 the number of homeless people in Greece amounted to 20,000, of which 50% were living in Athens. 12,000 were Greek nationals and 8,000 were foreign-born immigrants and asylum-seekers (Naoumi et al. 2010). Among the homeless were a large number of people suffering from a mental illnesses (35% of the homeless). For these people safe and decent housing was one of the most important factors for maintaining their wellbeing. The homeless with mental illnesses often face serious problems that require special attention, given that a mental illness does not allow a patient to escape homelessness. There is a link between homelessness, substance abuse and mental illness (Mowbray and Bybee 1998).

The problem has become especially obvious recently in the Psychiatric Departments of the General Hospitals across the country. Many of their beds are now being occupied by mentally ill homeless patients who initially receive standard hygiene care. The mentally ill homeless patients, following a few days of psychiatric care at these Departments end up on the road again. It seems as if their primary need is shelter followed by treatment, support and rehabilitation. This is exactly why the country requires Housing Care Programmes, currently not available as a social welfare benefit.

In general, Greece currently lacks public policy and prevention as well as treatment programmes that meet the needs of the homeless and especially those of the homeless who are mentally ill. The lack of these programmes is dealt with through limited food services and short-stay hostels created by NGOs including the church, large municipalities and voluntary organizations such as "Klimaka" and "Praxis".

When it comes to social work with the homeless in Greece of the economic crisis, it seems important to act preventatively by detecting individuals and groups that are most likely to be homeless, and maintain or find accommodation. In addition, the

housing services need to work closely with the social welfare and mental health services, so that action is swift without the red tape and on an individual basis, in order to cover the needs of different people.

### *C) Working with people living in poverty*

Social workers in Greece can change the psychosocial situation of people with mental health problems living in poverty by applying the psychosocial approaches of 'the person in his total life space over time' (Hartman 1995) and of strengths-based problem solving model (Bland et al. 2009). In view of the economic crisis, activating social capital and drawing new social funds proves very effective.

More specifically, activating the social fund with an aim to extract new social resources to cover the immediate needs of those living in poverty, changing the model of charity to community initiatives and services based on self-organisation and solidarity, means creating new support structures within the community, such as social solidarity hostels, social grocery stores, social health centres, social community pharmacies, etc. In times of an economic crisis, the social capital acts protectively. The social capital and social networks with their representatives (trade unions, cultural associations, church organisations, sports associations, etc.) appear to function like a safety net from the negative effects of economic changes. By strengthening the civil society a social fund and cohesion are created thus promoting mental health. The website [solidarity4all.gr](http://solidarity4all.gr) has recorded more than 350 solidarity initiatives being carried out across Greece during the crisis (Solidarity for All 2014). Similarly, the solidarity clinics had particularly flourished in the middle of the crisis, in 2012 (Adam and Teloni 2015). The above solidarity initiatives are divided into seven areas, ranging from actions relating to food, accommodation and health to defense lawyers, services and free trading. Interestingly, many of the solidarity initiatives do not set particular restrictions or exclusions in the way that charitable activities or respective state actions against poverty do.

### *D) Children's mental health during a crisis situation*

The psychosocial effects of the economic crisis spread everywhere. They endanger not only the mental health of adults, but also of their families and children. More specifically, they affect the mental health of children in two ways: directly, through poverty, and indirectly, through the effect of the parent's impaired mental health on their children.

Poverty has a direct effect on the mental health of children, multiplying the dangers and affecting all aspects of their life. In particular, malnutrition during pregnancy increases the chances of low birth weight in babies and infant mortality, it negative-



ly affects the cognitive - motor - mental development of children, it exposes them to mental trauma, learning difficulties, separation from their family through transferring their care over to institutions and foster families and is also linked to substance abuse by the parents, physical punishment, mental illnesses, domestic conflicts and increases the risk of child neglect and maltreatment (Rukstele 2011).

Already in Greece over the last three years since the beginning of the economic crisis there has been a significant increase noticed in the number of children being cared for in institutions. This is confirmed by the number of requests made to child protection bodies across Athens. In 2011, "SOS" Children's Villages received requests from 70 families, while in 2012 the number rose to 400. The number of children staying at "Hatzikosta" Foundation increased from 50 in 2011 to 100 children in 2012. In 2011, "Kivotos tou Kosmou" Institution housed 100 children, while in 2012 the number rose to 400.

Children's mental health is indirectly affected by the sense of confusion and insecurity experienced by many adults in relation to their economic situation. The problems that the parents face (insecurity in the workplace, unemployment, a loss of income, a loss of self-esteem, as well as other losses) act as stressors that affect their mental health and as a result the family's emotional state. Children sense these changes subconsciously and are affected by them. They worry, become afraid and manage these difficult emotions through acting out (meaning exhibiting behaviour that is destructive and is addressed towards the child itself, towards others and the environment, the home and the school) (Anagnostopoulos and Soumaki 2012).

In the period of the economic crisis, the most vulnerable are the children that have families who have been directly affected by the economic crisis, that have parents who work in businesses that have been directly affected by the economic situation, have experienced personal loss, due to economic problems or other events live in communities that have been seriously affected by economic problems or other stressful events, and experience mental health problems.

#### *E) Families with mentally ill parents*

Child protection and family support agencies, during the economic crisis receive more families with parents who face mental health problems. These are families, who are more likely to be experiencing poverty, housing problems, rifts and marital conflict, school dropout and social isolation. The problems faced usually include behavioural problems in children and parent psychosis, as well as substance abuse, depression and anxiety (Australian Infant Child Adolescent and Family Mental Health Association 2004). The result is that parents who are suffering from a mental health condition have greater chances of losing custody of their children. The aim of social services and child protection services is to help children who require access to infor-

mation relating to their parent's mental illness and support as well as help the parents look after their children and maintain their family.

Unfortunately, in Greece special services and programmes for families with mentally ill parents have not yet been developed. Only one similar type of unit existed, "Melia" a hostel for children with mentally ill parents, founded by the NGO APHCA within the framework of the psychiatric reform programmes in 2005. Unfortunately, in January 2014 operation was suspended due to cutbacks made by the Ministry of Health in the field of mental health.

Overall, it is important for parents who are mentally vulnerable to have access to prevention and early intervention services that will work alongside the families and manage issues relating to child protection.

#### *4.2. The challenges of social work in the area of value and theory: The radical approach*

In times of economic as well as social crisis, social work is faced with challenges that need to be overcome. The new conditions and reality exceed the usual ways of regulating social matters and as a result the established ways of thinking begin being doubted. The crisis that started off as an economic one and eventually became social, political and ideological also ends up becoming a crisis of social theory and of the way that social work is viewed.

The main purpose and function of analysis in social work is to doubt the social data and critically highlight the conditions that determine social relations. It attempts to determine the conditions that shape individual orientations along with group ones and re-orientate the social practices that make it possible to overcome anything that restricts the life and actions of people. It helps reconstruct social subjects that can then assume the work of restructuring social relations and resolving social problems.

With this in mind, it is essential for the social worker to demonstrate the significance of ideological, political and economic choices that were imposed on the Greek economy and that resulted in rupturing social relations and overturning the way and standard of living of the majority of people. In addition, to diagnose the medium-term and long-term consequences of the neo-liberal policies imposed in order to overcome the crisis. Based on this approach, the radical social worker can only stand by society and oppose to the violent adjustment to the neoliberal model paradigm.

The problems resulting from the economic crisis call for the defense of social achievements, social justice and fundamental personal and social rights with an aim for social development and social change as a primary obligation. Specifically, the International Federation of Social Workers (IFSW) in the 2010 Conference decided that given the economic crisis, social workers need to take action in order to develop a col-

lective voice and agenda and joint action for social development. The tendency to stop traditional and liberal models in Social Work is obvious with the adoption of theories and applications of a radical direction. These issues are more on the minds of social workers in Greece today than at any other time in history.

Radical Social Work prevents personal approaches to problems caused to vulnerable groups of the population by the class-defined policies and the dismantling of the welfare state. It promotes the weakening of ideological limitations, the restriction of oppression and exploitation, the increase in personal internal strength of those receiving services and support, it strengthens the understanding of the structural reasons for these social problems and actions relating to decision-making, defending rights and pursuing claims. The main aims of radical Social Work according to Ioakimidis (2012) are as follows: to reveal the oppressive exploitation-based relations, to create fairer conditions for those receiving services, to promote non-bureaucratic models, to recognise the cultural differences between local communities, to increase social class awareness of those receiving services, to create collective fronts and alliances in order to tackle oppression and exploitation mechanisms and to promote social justice and extend the theoretical inquiries of the scientific area of Social Work towards social needs, claims and achievements.

In the area of mental health in crisis-stricken Greece, it appears as if social workers need to defend the rights of mentally ill patients in relation to their access to the necessary and effective treatments, to psychosocial support and rehabilitation, to quality housing, education and employment and to strengthen them both individually and socially. In the direction of radical Social work, social workers must defend the ideas of psychiatric reform, deinstitutionalisation, care within the community, psychosocial rehabilitation and social inclusion and the individual and social rights of the mental health patients. In addition, they need to support the collective action of mental health patients for the right to benefits, education and employment as well as the efforts made by the committees of the families of mental health patients, committees of the siblings of mental health patients and committees formed by the users of these services. Finally, they need to avert any efforts made to shrink the mental health services system, something attempted in Greece as a neoliberal measure for economic and financial adjustment.

## **5. Conclusion**

These findings lead to the observation that the economic crisis causes many serious social as well as mental health problems. It is linked to an increase in depression, anxiety, psychosomatic issues, alcohol abuse and suicide. The economic pressure, through the impact on the mental health of the parents, can potentially affect the mental health of children and adolescents.

For the aforementioned reasons, social workers in Greece, irrespective of where they work, will come across, in this environment of dismantling welfare and mental health services, people of every age suffering from mental health problems at a much greater frequency.

The psychosocial effects of the economic crisis set new standards for social work and created new requirements for social services. Social workers, in all aspects of social work, need to be in a position to deal with mental health issues and their consequences, not only with the appropriate services and clinical and community interventions, but also with a critical theoretical approach and effective radical methods.

## 6. References

Adam, S. and D. D. Teloni 2015. "Solidarity Clinics in Crisis-ridden Greece: The Experience of Health Care Provision When Public Health Care is in Retreat", Research Report. Athens: Observatory of Social and Economic Developments. General Confederation of Greek Labour.

Asimopoulos, C. 2012. 'Financial Crisis, Mental Health and Social Work', *Social Work* 107:167-180

Anagnostopoulos, D. and E. Soumaki 2012. "The impact of socioeconomic crisis on mental health of children and adolescents". *Psychiatriki*, 23:1: 13-16.

Asimopoulos, Ch. 2012. "Economic crisis, social work and mental health". *Social Work*. 107:167-180.

Australian Infant Child Adolescent and Family Mental Health Association. 2004. *Principles and Actions for Services and People Working with Children of Parents with a Mental Illness*. Canberra: Department of Health and Ageing.

Bland, R and N. Renouf and A. Tullgren 2009. *Social work practice in mental health*. Australia: Allen & Unwin.

Bisson, J. and M. Brayne and F. Ochberg and G. Everly 2007. "Early psychosocial intervention following traumatic events". *American Journal of Psychiatry*, 164:7: 1016-1019.

Bouras, G. and L. Lykouras, 2011. "The economic crisis and its impact on mental health" *Encephalos Journal*. 48: 54-61.

Campion, J. and K. Bhui and D. Bhugra 2012. "European Psychiatric Association (EPA) guidance on prevention of mental disorders" *European Psychiatry*. 27: 68-80.

Craig, T. and P. Timms 2000. "Facing up to social exclusion: Services for homeless mentally ill people". *International Review of Psychiatry*. 12:3: 206-211.

Das, J. and Q. T. Do, and J. Riedman and D. McKenzie and K. Scott 2007. "Mental health and poverty in developing countries: Revisiting the relationship" *Social Science and Medicine*. 65:3: 467-480.

Economou M. and L. E. Peppou and E. Louki and A. Komporozos and A. Mellou and C. Stefanis 2012. "Depression telephone helpline: Help seeking during the financial crisis" *Psychiatriki*. 23:17-28.

Greek Statistical Services, 2012, Press Release ELSTAT, 2012: <http://www.statistics.gr/portal/page/portal/ESYE/BUCKET/A0101/PressReleases>

IFSW. 2010. The Global Agenda for Social Work and Social Development, available online at <http://www.ifsw.org/p38002163.html>

Giotakos, O. and D. Karabelas and A. Kafkas, 2011. "Financial crisis and mental health in Greece." *Psychiatriki*. 22: 109-119.

Hartman, A. 1995. "Diagrammatic assessment of family relationships." *Families in Society*. 76:2: 111-122.

Hellenic Association of Social Workers. 2014. *Report on psychosocial effects of economic crisis and the social services in Greece*. Athens: Hellenic Association of Social Workers.

Ioakimidis, V. 2012. ed. *Social work for social justice: Radical and critical theory - practice - examples*. Athens: Ion.

Kanter, J. 1989. "Clinical case management: Definition, principles, components." *Hospital and Community Psychiatry*. 40:4: 361-368.

McGorry, P. 2005. "Every me and every you: Responding to the hidden challenge of mental illness in Australia." *Australasian Psychiatry*, 13:1: 3-15.

Mowbray, C. and D. Bybee 1998. "The importance of context in understanding homelessness and mental illness." *Research on Social Work Practice*. 8:2: 172-199.

Naoumi, M. and G. Papapetrou and N. Spyropoulou and M. Chryssakis and E. Fronimou eds. 2010. *The Social Portrait of Greece*. Athens: Social Policy Institute, National Center of Social Research - EKKE.

Paul, K. and K. Moser 2009. "Unemployment impairs mental health: Meta-analyses." *Journal of Vocational Behaviour*. 74: 264-282.

Rukstele, R. 2011. "Treatment of infants and their families" Pp. 653-664 In Brandel, J. R. ed. *Theory and practice in clinical social work*. London: Sage.

Sayce, L. 1999. "Stigma, discrimination and social exclusion: What's in a word?" *Journal of Mental Health*. 7:4: 331-343.

Skapinakis, P. and S. Bellos and S. Koupidis and I. Grammatikopoulos and P.N. Theodorakis and V. Mavreas 2013. "Prevalence and sociodemographic associations of common mental disorders in a nationally representative sample of the general population of Greece." *BMC Psychiatry*. 13: 163.

Solantaus, T. and J. Leinonen and R.L. Punamaki 2004. "Children's mental health in times of economic recession: Replication and extension of the family economic stress model in Finland" *Developmental Psychology*. 40: 412-429.

Solidarity for All 2014. "Four years of Resistance and Solidarity" Report. Athens. Available online at: [https://issuu.com/solidarityforall/docs/report\\_2014](https://issuu.com/solidarityforall/docs/report_2014)

Stuckler, D. and S. Basu and M. Suhrcke 2009. "The public health effect of economic crises and alternative policy responses in Europe: An empirical analysis." *Lancet*. 374: 315-323.

Untela, A. 2010. "Economic crisis and mental health." *Current Opinion in Psychiatry*, 23: 127-130.

VicHealth 2005. "A plan for action 2005-2007: Promoting mental health and wellbeing" Melbourne: VicHealth.

WHO 2009. "Financial crisis and global health: Report of a high level consultation". Geneva: World Health Organization.

WHO 2011. "*Impact of economic crisis on mental health*". Copenhagen: W.H.O. Regional Office of Europe.