

Identification and characterisation of Belgian Mental Health research published between 2018 and 2021

January 29th, 2024

King Baudouin Foundation

Laetitia Aerts, *Senior Project Coordination*

Tel. +32 2 549 02 33

E-mail aerts.l@kbs-frb.be

Arnon Vandenberghe, *Data Scientist*

Tel + 32 2 549 61 97

Email vandenberghe.a@kbs-frb.be

Project team

Alfredo Yegros PhD, *Project leader*

CWTS B.V.

P.O. Box 905

2300 AX Leiden, The Netherlands

Tel. +31 71 527 5806

Fax +31 71 527 3911

E-mail yegrosa@cwts.leidenuniv.nl

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1. Introduction

This document describes the methodology developed to identify and characterize the scientific research published in Belgium within the field of Mental Health. We relied on scientific publications covered in the CWTS version of the Web of Science (WoS) as a proxy of the research efforts around specific mental health disorders and related topics.

The identified publications are also analysed from several perspectives in order to obtain a detailed description of this research and the research groups involved. This document describes the methodology related to the following aspects covered in the study:

- Collection of scientific publications and data sources
- Disciplinary perspectives
- Research areas and conditions (MQ classification)
- Target population
- Mental Health research involving animals
- Identification of research groups
- Interdisciplinary research
- Research specialisation

The data are available in the [PowerBI](#) dashboard.

2. Collection of scientific publications and data sources

All the articles, reviews, letters and proceeding papers produced in the period 2018-2021 by researchers affiliated with at least one organization in Belgium were collected from two different bibliographic databases: PubMed and the Web of Science.

The search of Mental Health-related publications was guided by, but not limited to, the mental health areas and conditions considered by Woelbert et al (2019)¹. The search strategy used in each of these databases is described in the following paragraphs.

1) **PubMed:** We started off with the selection of a set of MeSH descriptors that best represent the various research areas and conditions considered by Woelbert et al (2019).

Besides the selected MeSH descriptors, we in some cases also considered the immediate generic MeSH descriptor. This was done when this most generic descriptor was at the same time the most specific assigned to a given publication. Sometimes these more generic descriptors are too generic, in which case they were discarded.

The list of selected MeSH terms is included in Annex I.

2) **Web of Science:** this database was also used to retrieve publications related to Mental Health research. The main reason to complement the search

¹ Woelbert, E.; Kirtley, A.; Balmer, N.; Dix, S. (2019) How much is spent on mental health research: developing a system for categorising grant funding in the UK. *The Lancet Psychiatry*, 6(5), 445-452. [https://doi.org/10.1016/S2215-0366\(19\)30033-1](https://doi.org/10.1016/S2215-0366(19)30033-1).

done in PubMed was to ensure as much as possible the coverage of relevant publications that might not have been covered by PubMed (for instance, in the social sciences).

The search in WoS was performed on the fields title, abstract and keywords, based on a list of keywords including both the MeSH terms selected for the search in PubMed as well as all their synonyms as considered in the Medical Subject Headings (i.e. the entry terms). For example, one of the MeSH descriptors selected in PubMed is 'Mood Disorders', for which the Medical Subject Headings considers 'Affective Disorders' to denote a similar concept, so that both were considered when searching in WoS and treated as synonyms. However, a number of these keywords are often used in the scientific literature across different disciplines, in contexts other than Mental Health research. Hence, they are likely to introduce a high number of false positives in the dataset. For this reason, the following keywords were not used to perform the search in WoS:

- Ability.
- Achievement.
- Affect.
- Association.
- Awareness.
- Consensus.
- Efficiency.
- Learning.
- Memory.
- Originality.
- Thinking.
- Uncertainty.
- Understanding.

Even when removing the abovementioned keywords, this kind of search is likely to lead to false positives given that a certain word might still be used in different contexts. In order to exclude as many publications as possible

retrieved in WoS but not related to Mental Health research, we only kept publications fulfilling the following two criteria simultaneously:

1. They cite publications classified in the MeSH descriptors Mental Health and/or Mental disorders (case when `left(c.tree_node,7) = 'F02.418'` or `left(c.tree_node,11) = 'N01.400.500'` then 'Mental Health' when `left(c.tree_node,3) = 'F03'` then 'Mental disorders' end)
2. The publications are classified in specific Subject Categories, as they are more likely to be related to Mental Health research (the list of Subject Categories is included in Annex II).

The downside of narrowing the search in WoS to a limited number of subject categories is that some relevant publications might not have been captured. Nevertheless, this stringent approach was preferred to avoid the noise generated by some keywords.

3. Disciplinary perspectives

To provide an overview of the different fields contributing to the Mental Health research produced in Belgium, we used a classification scheme that groups various WoS Subject Categories into one of the following broad disciplinary areas:

- Basic Medical Sciences
- Healthcare, Rehabilitation & Nursing
- Medical Specialty
- Natural Sciences
- Neurosciences, Neurology & Imaging
- Psychiatry & Substance Abuse
- Psychology and cognitive sciences
- Public Health & Policy
- Social Sciences

The complete list of WoS Subject Categories that fall under these nine broad research domains is included in Annex III.

4. Research areas and conditions

The Mental Health research produced by researchers in Belgium was also classified into different areas and specific conditions. We followed the classification developed by MQ (hereafter MQ classification) - a UK charity funding mental health research - originally developed to facilitate collaborative reporting of funding levels within the UK and other countries².

The classification, as shown in Table 1, categorised specific Mental Health conditions into broader areas of research in this domain. We assigned publications to specific conditions based on the MeSH descriptors. In this way, an overview of the scientific production of Belgium is offered at two different levels: MQ broader areas, called transdiagnostic research, as well as condition-specific research.

² Woelbert, E; Lundell-Smith, K; White, R; Kemmer, D (2021) Accounting for mental health research funding: developing a quantitative baseline of global investments. The Lancet Psychiatry, 8(3): 250-258.

Table 1. MQ classification (adapted from ²)

| Definition and rationale | | ICD-11 correspondence |
|---|--|---|
| Transdiagnostic research | | |
| General mental health | Research of general relevance to mental health, without being focused on any specific disorder (eg. mental health services, psychosocial risk factors, and general mental health promotion) | Not applicable |
| Basic psychology and neuroscience | Research in psychology and neuroscience that has a plausible link to cognition and behaviour but cannot be classified into one or few diagnosis-specific categories because it does not focus on or have exclusive relevance to few specific mental health conditions (includes research on perception, social cognition, attachment, memory, learning, motivation, executive functions, and emotions) | Not applicable |
| Condition-specific research | | |
| Attention-deficit hyperactivity disorder | A separate category because it is one of the most frequently studied neurodevelopmental disorders | 6A05: attention-deficit hyperactivity disorder |
| Anxiety disorders | Panic disorders, generalised anxiety, phobias, separation anxiety, and selective mutism | 6B00–6B06: anxiety or fear-related disorders |
| Autism spectrum disorder | A separate category because it is one of the most frequently studied neurodevelopmental disorders | 6A02: autism spectrum disorder |
| Bipolar disorders | Bipolar disorder type I, bipolar disorder type II, cyclothymic disorder, and mania | All 6A6 codes: bipolar or associated disorders |
| Conduct disorder and other disruptive behaviour disorders | Conduct disorder, conduct problems, oppositional defiant behaviour, and disruptive mood dysregulation disorder | All 06C0 codes: disruptive behaviour or dissocial disorders |
| Depression | Unipolar depression including perinatal depression, dysthymia and depressed mood, mood disorder, research on antidepressant medication | All 6A7 codes: depressive disorders; 6E20.0: post-partum depression |
| Eating disorders | Anorexia nervosa, bulimia nervosa, binge eating disorder, body dissatisfaction, pathological eating, and early childhood feeding disorders | All 6B8 codes: feeding or eating disorders |
| Obsessive-compulsive and related disorders | Obsessive-compulsive disorder, compulsive hoarding, trichotillomania, excoriation and body dysmorphic disorder, compulsive behaviour | All 6B2 codes (except 6B23): obsessive compulsive disorder or related disorders |
| Other mental health conditions | Conversion disorder, psychosomatic disorder, illness anxiety, dissociative states, gender incongruence, paraphilic disorders, pyromania, and kleptomania | .. |
| Other neurodevelopmental disorders | Learning disability, intellectual disability, dyslexia, dyscalculia, stutter, language impairment, Tourette syndrome, and tic disorder | All 6A codes (except 6A2 ASD and 6A5 ADHD): neurodevelopmental disorders |
| Personality disorders | All personality disorders; it does not include secondary personality change | 6D10 and 6D11: personality disorders and related traits |
| Post-traumatic stress and related disorders | Acute and post-traumatic stress disorder, including psychological trauma and adjustment disorder; also includes reactive attachment disorder | All 6B4 codes: disorders specifically associated with stress |
| Psychosis | Psychosis without specific mention of other conditions, and research on antipsychotics (eg. side-effects, prescribing) | Comparable to 6A23 (acute and transient psychotic disorder), 6A34 (delusional disorder), but not a perfect correspondence |
| Schizophrenia | Schizophrenia, schizoaffective, and schizotypal disorder | 6A20, 6A21, 6A22: schizophrenia, schizoaffective disorder, and schizotypal disorder |

| | | |
|---|--|---|
| Substance misuse and dependence (including gambling and gaming) | Substance dependence, use disorder and addictive behaviours, including harmful use of alcohol (appendix); it does not include studies on control policies, smoking cessation programmes, education programmes, or studies focusing on physical harm or crime | All 6C4 and 6C5 codes: disorders due to substance use or addictive behaviours |
| Self-harm | Although overlapping, self-harm and suicide are separate categories because studies can focus on one or the other, DSM-5 distinguishes non-suicidal self-injury, and prevalence statistics might be available separately | Not part of mental disorders under ICD-11 |
| Suicide | Although overlapping, self-harm and suicide are separate categories because studies can focus on one or the other, DSM-5 distinguishes non-suicidal self-injury, and prevalence statistics might be available separately | Not part of mental disorders under ICD-11 |

5. Target population

Some of the publications produced in Belgium on Mental Health deal with a specific population. To characterize this research in terms of the study population, different age ranges have been considered: infants, children, adolescents, adults and elderly people.

For the publications originally retrieved from PubMed, the different target populations were identified using various MeSH descriptors (and all the specific descriptors below them in the MeSH tree):

- **Infant:** A child between 1 and 23 months of age (MeSH id: D007223).
- **Child** A person 2 to 12 years of age (MeSH id: D002648).
- **Adolescent:** A person 13 to 18 years of age (MeSH id: D000293).
- **Adult:** A person 19 to 64 years of age (MeSH id: D000328; excluding 'Aged').

The generic MeSH adult was not included as it also covers elderly.

- **Elderly:** A person 65 years of age or older (MeSH id: D000368).

For publications retrieved from WoS, a search in the title of the publication was performed using several keywords (including their plural forms) to tag the study population:

- **Infant:** infant or baby or neonate.
- **Child:** child or kid or youngster or boy or girl.
- **Adolescent:** adolescent or teenager or teenaged or youth or young person or juvenile.
- **Adult:** adult.
- **Elderly:** elderly or senior

Again, the search in WoS based on the appearance of keywords in titles may lead in some cases to false positives.

6. Mental Health research involving animals

Some of the publications produced in Belgium in the realm of Mental Health involved the involvement of animals. To detect and tag these publications, we designed a specific strategy for PubMed consisting of the use of the MeSH Animals (MeSH id: D000818) and any of its specific MeSH descriptors, excluding Humans.

In WoS, a strategy based on keywords (and their plural forms) was used. Any publication for which its title includes one or more of the following words was considered as a study using animals:

- Animal, rat, mice, pig, ant, sheep, snail, dog , bee, bird, snake, cockroach, Macaca, primate, lizard, horse, rabbit or zebrafish.

The search in WoS based on keywords in titles may lead to some false positives. For instance, the use of animals in Mental Health research does not necessarily relate to pre-clinical research in the development of new drugs, as it could also refer for instance to therapies involving pets.

7. Identification of research groups

The research groups involved in the Mental Health research conducted in Belgium were identified based on the publications collected in WoS. The objective is to identify the main researchers working at Belgian organisations that perform research related to Mental Health. We assume that the publications produced by these researchers are likely to be representative of their close collaborators, and therefore representative of their proper research group. Thus, this exercise does not aim at identifying each individual member of the research group. The identified research groups do not necessarily correspond to existing research groups as considered by their organisations.

The identification of research groups relies on an algorithm developed at CWTS which assigns scientific publications to individual researchers. This algorithm deals with common problems associated with author names in bibliographic databases (i.e. more than one researcher with the exact same author name or multiple author name variants for a given researcher).

The process for the identification of research groups consisted of two steps:

- We first identified researchers who could potentially be the most representative of their research groups based on the number of publications produced. This was an iterative process starting with the assumption that the researcher with the highest number of publications in the dataset of Belgian Mental Health-related publications was already the first potential group leader identified. We then created a new list of researchers by number of publications produced in descending order (excluding the publications

produced by the researcher with the highest number of publications in the dataset). The researcher with the highest number of publications in this new list was added to the group of potential group leaders and their publications were removed in order to create a new list of researchers by number of publications produced in descending order. This process was repeated for all researchers who had at least three publications not covered by the publications produced by the already identified potential group leaders.

- Identification of members of the same research group: after gathering all researchers who could potentially be group leaders, we assigned researchers to research groups. This was done following strict criteria. For each pair of researchers, we identified the number of publications they had produced together and considered the total number of publications of each researcher individually.. We then applied the following formula:

$$\frac{100 \times \text{Common pubs}}{\text{Common pubs} + \text{Pubs A} + \text{Pubs B}}$$

This formula provides the percentage of co-publications produced by a pair of researchers when taking into account the publication they produced without mutually collaborating. Pairs of researcher for whom the obtained value was at least 25% were considered to be part of the same research group.

The identification of research groups based on scientific publications is challenging for various reasons, not only because of the often incomplete information provided by the bibliographic databases or the various types of errors they include. Also, the algorithm that assigns publications to individual researchers does not always provide accurate results.

For the various research groups identified, the following information was retrieved:

- **Group_id:** identifier for a research group.
- **Organisation:** main organisation to which the researcher is affiliated (e.g. the name of a university). Many researchers indicate more than one affiliation in their publications (e.g. a university and a university hospital). In these cases, only one of the affiliations was kept.
- **Sub-organisation:** sub-unit within the main organization (e.g. faculty/department/lab etc. within the organization).

All the group-related details are extracted from the most recent publication collected for this study for a given research leader. This means that these details might not reflect later changes, for instance in affiliation.

Roughly 74% of publications covered in the study were assigned to at least one research group, while the other 26% remain unlinked to any of the identified research groups. Several factors might explain why publications were not assigned to research groups, including the fact that some researchers had published in areas covered in this study but these do not represent the main focus of their research. Furthermore, some foreign researchers active in Mental Health research might have been linked to a Belgian affiliation for a short period of time, for instance when visiting a Belgian research organisation.

Table 2 shows the number and percentage of publications not linked to research groups by MQ category.

Table 2. Publications not linked to research groups

| MQ category | Total publications | Publications not linked to research groups | % Publications not linked to research groups |
|---|--------------------|--|--|
| General Mental Health | 1,574 | 342 | 21,7% |
| Basic psychology and neuroscience | 3,960 | 1,054 | 26,6% |
| Attention-deficit hyperactivity disorder | 102 | 20 | 19,6% |
| Anxiety disorders | 129 | 17 | 13,2% |
| Autism spectrum disorder | 225 | 47 | 20,9% |
| Bipolar disorders | 9 | 1 | 11,1% |
| Conduct disorder and other disruptive behaviour disorders | 17 | 0 | 0,0% |
| Depression | 740 | 129 | 17,4% |
| Eating disorders | 38 | 4 | 10,5% |
| Obsessive-compulsive and related disorders | 36 | 6 | 16,7% |
| Other mental health conditions | 336 | 85 | 25,3% |
| Other neurodevelopmental disorders | 356 | 95 | 26,7% |
| Personality Disorders | 135 | 15 | 11,1% |
| Post-traumatic stress and related disorders | 426 | 95 | 22,3% |
| Psychosis | 159 | 19 | 11,9% |
| Schizophrenia | 167 | 42 | 25,1% |
| Substance misuse and dependence (including gambling and gaming) | 243 | 56 | 23,0% |
| Self-harm | 48 | 10 | 20,8% |
| Suicide | 55 | 6 | 10,9% |

8. Interdisciplinary research

For the various research groups identified, we estimated the degree of interdisciplinarity in their research (IDR). We used the Shannon index (sometimes called the Shannon-Wiener Index) to try to capture the diversity of disciplines embedded in the research produced by the research group. The formula of the Shannon index is as follows:

$$H = - \sum_{i=1}^N P_i \ln (1/P_i)$$

Where N is the number of publications produced by a given research group and P_i is the proportion of publications produced in the scientific discipline i . We used the WoS Subject Categories to represent the scientific disciplines. The higher the IDR value, the higher the number of disciplines embedded in the research output of the group. An IDR equal to 0 would indicate that all the publications of the research group are produced within a single discipline.

The table below show an example of the calculation of the indicator for two research groups A and B with a similar number of publications, 13 and 12 respectively³. The group with publications in a higher number of different disciplines and with a relatively more even distribution of its publications across these disciplines will score higher in this indicator.

³ A given publication can be classified in several fields simultaneously, if so one full publication is counted for each field.

Table 3. Example of the calculation of the Shannon index

| Group A: 13 publications | # Pubs | % Pubs | LN(Pubs) | % Pubs * LN(Pubs) |
|-------------------------------|--------|--------|------------|-------------------|
| Behavioural Sciences | 2 | 0.09 | -2.40 | -0.22 |
| Neurosciences | 2 | 0.09 | -2.40 | -0.22 |
| Pharmacology & Pharmacy | 2 | 0.09 | -2.40 | -0.22 |
| Psychiatry | 12 | 0.55 | -0.61 | -0.33 |
| Psychology | 2 | 0.09 | -2.40 | -0.22 |
| Psychology, Clinical | 1 | 0.05 | -3.09 | -0.14 |
| Psychology, Multidisciplinary | 3 | 0.14 | -1.99 | -0.27 |
| | | | IDR | 2.61 |
| | | | | |
| Group B: 12 publications | # Pubs | % Pubs | LN(Pubs) | % Pubs * LN(Pubs) |
| Emergency Medicine | 1 | 0.08 | -2.48 | -0.21 |
| Psychiatry | 11 | 0.92 | -0.09 | -0.08 |
| | | | IDR | 0.29 |

9. Research specialisation

In order to assess whether and the extent to which Belgium is specialised in specific topics or areas in the Mental Health research domain, we compared the Belgian activity profile across Mental Health topics against two other profiles. First we take the profile of the EU27 and also the profile considering all the publications worldwide. The analysis of the specialisation is based on the broad areas in Mental Health research represented in the MQ classification (see Table 1).

The specialisation is obtained by applying the Bassala Index, formulated as follows:

$$\text{Bassala Index} = \frac{BE_i / C_i}{BE / C}$$

Where BE_i is the number of Belgian publications in the Mental Health topic i and BE is the total number of Belgian publications in Mental health, while C_i is the number of publications of the comparator (either the EU27 or worldwide publications) in the Mental Health topic i and C is the total number of publications of the comparator in Mental Health. Here the topics are represented by the MeSH1.

We divide two percentages, the percentage of Belgian publications in a given Mental Health topic by the percentage of publications of the comparator in the same Mental Health topic. A Bassala Index value of 1 or close to 1 means that both Belgium and the comparator devote a relatively similar effort to the topic (taking scientific publications as a very rough proxy of research effort). A Bassala index value of more than 1 indicates that Belgium is more specialised in that topic, while values below 1 would indicate that Belgium is less specialised than the comparator.

Annex I Selected MeSH and MQ classification

Table 4. Selected MeSH within the various MQ categories and the number of Belgian publications

| MQ category | MeSH descriptor | # Publications |
|--|---|----------------|
| Anxiety disorders | Anxiety Disorders | 126 |
| Anxiety disorders | Mutism | 3 |
| Attention-deficit hyperactivity disorder | Attention Deficit Disorder with Hyperactivity | 102 |
| Autism spectrum disorder | Autism Spectrum Disorder | 225 |
| Basic psychology and neuroscience | Affect | 139 |
| Basic psychology and neuroscience | Anger | 35 |
| Basic psychology and neuroscience | Anticipation, Psychological | 48 |
| Basic psychology and neuroscience | Anxiety | 391 |
| Basic psychology and neuroscience | Apathy | 14 |
| Basic psychology and neuroscience | Behavioural Medicine | 1 |
| Basic psychology and neuroscience | Behavioural Research | 9 |
| Basic psychology and neuroscience | Bereavement | 18 |
| Basic psychology and neuroscience | Boredom | 6 |
| Basic psychology and neuroscience | Cognition | 836 |
| Basic psychology and neuroscience | Courage | 2 |
| Basic psychology and neuroscience | Disgust | 4 |
| Basic psychology and neuroscience | Emotional Regulation | 74 |
| Basic psychology and neuroscience | Euphoria | 1 |
| Basic psychology and neuroscience | Executive Function | 167 |
| Basic psychology and neuroscience | Fear | 209 |
| Basic psychology and neuroscience | Forgiveness | 6 |
| Basic psychology and neuroscience | Frustration | 30 |
| Basic psychology and neuroscience | Genetics, Behavioural | 3 |
| Basic psychology and neuroscience | Guilt | 18 |
| Basic psychology and neuroscience | Happiness | 35 |

| MQ category | MeSH descriptor | # Publications |
|-----------------------------------|------------------------|----------------|
| Basic psychology and neuroscience | Hate | 2 |
| Basic psychology and neuroscience | Hope | 16 |
| Basic psychology and neuroscience | Hostility | 7 |
| Basic psychology and neuroscience | Intention | 95 |
| Basic psychology and neuroscience | Jealousy | 5 |
| Basic psychology and neuroscience | Learning | 362 |
| Basic psychology and neuroscience | Loneliness | 50 |
| Basic psychology and neuroscience | Love | 8 |
| Basic psychology and neuroscience | Mentalization | 35 |
| Basic psychology and neuroscience | Mindfulness | 54 |
| Basic psychology and neuroscience | Perception | 962 |
| Basic psychology and neuroscience | Pleasure | 39 |
| Basic psychology and neuroscience | Procrastination | 5 |
| Basic psychology and neuroscience | Psychiatry | 92 |
| Basic psychology and neuroscience | Psycholinguistics | 35 |
| Basic psychology and neuroscience | Psychological Distress | 51 |
| Basic psychology and neuroscience | Psychology | 209 |
| Basic psychology and neuroscience | Psychopathology | 67 |
| Basic psychology and neuroscience | Psychophysics | 13 |
| Basic psychology and neuroscience | Psychophysiology | 13 |
| Basic psychology and neuroscience | Sadness | 14 |
| Basic psychology and neuroscience | Sexology | 17 |
| Basic psychology and neuroscience | Social Sciences | 25 |
| Basic psychology and neuroscience | Sociobiology | 2 |
| Basic psychology and neuroscience | Spatial Navigation | 12 |
| Basic psychology and neuroscience | Theory of Mind | 33 |
| Basic psychology and neuroscience | Thinking | 777 |
| Basic psychology and neuroscience | Volition | 8 |

| MQ category | MeSH descriptor | # Publications |
|---|--|----------------|
| neuroscience | | |
| Bipolar disorders | Bipolar and Related Disorders | 6 |
| Bipolar disorders | Cyclothymic Disorder | 1 |
| Bipolar disorders | Mania | 2 |
| Conduct disorder and other disruptive behaviour disorders | Conduct Disorder | 14 |
| Conduct disorder and other disruptive behaviour disorders | Disruptive, Impulse Control, and Conduct Disorders | 3 |
| Depression | Antidepressive Agents | 86 |
| Depression | Depression | 465 |
| Depression | Depressive Disorder | 329 |
| Eating disorders | Feeding and Eating Disorders | 38 |
| General Mental Health | Behaviour Control | 3 |
| General Mental Health | Counselling | 69 |
| General Mental Health | Criminal Psychology | 1 |
| General Mental Health | Ergonomics | 29 |
| General Mental Health | Mental Health | 283 |
| General Mental Health | Mental Health Services | 77 |
| General Mental Health | Personality Assessment | 18 |
| General Mental Health | Psychiatric Somatic Therapies | 5 |
| General Mental Health | Psychological Techniques | 292 |
| General Mental Health | Psychological Tests | 627 |
| General Mental Health | Psychology, Military | 2 |
| General Mental Health | Psychotherapy | 245 |
| General Mental Health | Schizophrenic Psychology | 35 |
| Obsessive-compulsive and related disorders | Body Dysmorphic Disorders | 2 |
| Obsessive-compulsive and related disorders | Compulsive Behaviour | 7 |
| Obsessive-compulsive and related disorders | Obsessive-Compulsive Disorder | 27 |
| Other mental health conditions | Child Behaviour Disorders | 10 |
| Other mental health conditions | Dissociative Disorders | 11 |
| Other mental health conditions | Elimination Disorders | 3 |
| Other mental health conditions | Fire setting Behaviour | 2 |
| Other mental health conditions | Neurocognitive Disorders | 200 |
| Other mental health conditions | Paraphilic Disorders | 5 |
| Other mental health conditions | Sexual Dysfunctions, Psychological | 33 |
| Other mental health conditions | Sleep Wake Disorders | 66 |
| Other mental health conditions | Somatoform Disorders | 11 |

| MQ category | MeSH descriptor | # Publications |
|---|--|----------------|
| Other neurodevelopmental disorders | Communication Disorders | 42 |
| Other neurodevelopmental disorders | Neurodevelopmental Disorders | 322 |
| Personality Disorders | Personality Disorders | 135 |
| Post-traumatic stress and related disorders | Psychological Well-Being | 9 |
| Post-traumatic stress and related disorders | Reactive Attachment Disorder | 5 |
| Post-traumatic stress and related disorders | Stress, Psychological | 337 |
| Post-traumatic stress and related disorders | Trauma and Stressor Related Disorders | 79 |
| Psychosis | Schizophrenia Spectrum and Other Psychotic Disorders | 159 |
| Schizophrenia | Schizophrenia Spectrum and Other Psychotic Disorders | 167 |
| Self-harm | Self-Injurious Behaviour | 48 |
| Substance misuse and dependence (including gambling and gaming) | Behaviour, Addictive | 52 |
| Substance misuse and dependence (including gambling and gaming) | Gambling | 25 |
| Substance misuse and dependence (including gambling and gaming) | Substance-related disorders | 186 |
| Suicide | Suicide | 55 |

Because a given publication might carry more than one MeSH descriptor within the same MQ category, obtaining the number of publications by MQ category from the previous table might lead to duplicate counts. Table 5 contains the number of unique publications within each MQ category.

Table 5. Number of Belgian publications by MQ category

| MQ Category | # Publications |
|---|----------------|
| Anxiety disorders | 129 |
| Attention-deficit hyperactivity disorder | 102 |
| Autism spectrum disorder | 225 |
| Basic psychology and neuroscience | 3,960 |
| Bipolar disorders | 9 |
| Conduct disorder and other disruptive behaviour disorders | 17 |
| Depression | 740 |
| Eating disorders | 38 |

| | |
|---|-------|
| General mental health | 1,574 |
| Obsessive-compulsive and related disorders | 36 |
| Other mental health conditions | 336 |
| Other neurodevelopmental disorders | 356 |
| Personality disorders | 135 |
| Post-traumatic stress and related disorders | 426 |
| Psychosis | 159 |
| Schizophrenia | 167 |
| Self-harm | 48 |
| Substance misuse and dependence (including gambling and gaming) | 243 |
| Suicide | 55 |

Annex II Subject Categories considered for the search in WoS

Table 6. Subject categories considered for the search in WoS

| MQ Category | # Publications |
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| Anxiety disorders | 129 |
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| Post-traumatic stress and related disorders | 426 |
| Psychosis | 159 |
| Schizophrenia | 167 |
| Self-harm | 48 |
| Substance misuse and dependence (including gambling and gaming) | 243 |
| Suicide | 55 |

Annex III WoS Subject Categories within broad areas of research

| Category | WoS Subject Category |
|--------------------------------------|--------------------------------------|
| Basic Medical Sciences | Anatomy & Morphology |
| Basic Medical Sciences | Biochemical Research Methods |
| Basic Medical Sciences | Biochemistry & Molecular Biology |
| Basic Medical Sciences | Biophysics |
| Basic Medical Sciences | Biotechnology & Applied Microbiology |
| Basic Medical Sciences | Cell & Tissue Engineering |
| Basic Medical Sciences | Cell Biology |
| Basic Medical Sciences | Chemistry, Medicinal |
| Basic Medical Sciences | Endocrinology & Metabolism |
| Basic Medical Sciences | Genetics & Heredity |
| Basic Medical Sciences | Immunology |
| Basic Medical Sciences | Medicine, Research & Experimental |
| Basic Medical Sciences | Microbiology |
| Basic Medical Sciences | Nutrition & Dietetics |
| Basic Medical Sciences | Pathology |
| Basic Medical Sciences | Pharmacology & Pharmacy |
| Basic Medical Sciences | Physiology |
| Basic Medical Sciences | Toxicology |
| Healthcare, Rehabilitation & Nursing | Ergonomics |
| Healthcare, Rehabilitation & Nursing | Geriatrics & Gerontology |
| Healthcare, Rehabilitation & Nursing | Gerontology |
| Healthcare, Rehabilitation & Nursing | Health Care Sciences & Services |
| Healthcare, Rehabilitation & Nursing | Medical Informatics |
| Healthcare, Rehabilitation & Nursing | Nursing |
| Healthcare, Rehabilitation & Nursing | Primary Health Care |
| Healthcare, Rehabilitation & Nursing | Rehabilitation |
| Medical Specialty | Andrology |
| Medical Specialty | Anaesthesiology |
| Medical Specialty | Cardiac & Cardiovascular Systems |
| Medical Specialty | Critical Care Medicine |
| Medical Specialty | Dentistry, Oral Surgery & Medicine |
| Medical Specialty | Dermatology |
| Medical Specialty | Emergency Medicine |
| Medical Specialty | Gastroenterology & Hepatology |
| Medical Specialty | Haematology |
| Medical Specialty | Infectious Diseases |
| Medical Specialty | Integrative & Complementary Medicine |
| Medical Specialty | Medical Laboratory Technology |
| Medical Specialty | Medicine, General & Internal |
| Medical Specialty | Obstetrics & Gynaecology |
| Medical Specialty | Oncology |
| Medical Specialty | Ophthalmology |
| Medical Specialty | Orthopaedics |
| Medical Specialty | Otorhinolaryngology |
| Medical Specialty | Paediatrics |
| Medical Specialty | Peripheral Vascular Disease |
| Medical Specialty | Reproductive Biology |
| Medical Specialty | Respiratory System |

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| Medical Specialty | Rheumatology |
| Medical Specialty | Sport Sciences |
| Medical Specialty | Surgery |
| Medical Specialty | Transplantation |
| Medical Specialty | Tropical Medicine |
| Medical Specialty | Urology & Nephrology |
| Natural Sciences | Acoustics |
| Natural Sciences | Biology |
| Natural Sciences | Chemistry, Analytical |
| Natural Sciences | Chemistry, Applied |
| Natural Sciences | Chemistry, Inorganic & Nuclear |
| Natural Sciences | Chemistry, Multidisciplinary |
| Natural Sciences | Chemistry, Organic |
| Natural Sciences | Chemistry, Physical |
| Natural Sciences | Computer Science, Artificial Intelligence |
| Natural Sciences | Computer Science, Cybernetics |
| Natural Sciences | Computer Science, Information Systems |
| Natural Sciences | Computer Science, Interdisciplinary Applications |
| Natural Sciences | Computer Science, Software Engineering |
| Natural Sciences | Computer Science, Theory & Methods |
| Natural Sciences | Developmental Biology |
| Natural Sciences | Evolutionary Biology |
| Natural Sciences | Geosciences, Multidisciplinary |
| Natural Sciences | Logic |
| Natural Sciences | Mathematical & Computational Biology |
| Natural Sciences | Mathematics |
| Natural Sciences | Mathematics, Applied |
| Natural Sciences | Mathematics, Interdisciplinary Applications |
| Natural Sciences | Optics |
| Natural Sciences | Physics, Applied |
| Natural Sciences | Physics, Mathematical |
| Natural Sciences | Physics, Multidisciplinary |
| Natural Sciences | Statistics & Probability |
| Natural Sciences | Virology |
| Natural Sciences | Water Resources |
| Neurosciences, Neurology & Imaging | Behavioural Sciences |
| Neurosciences, Neurology & Imaging | Clinical Neurology |
| Neurosciences, Neurology & Imaging | Engineering, Biomedical |
| Neurosciences, Neurology & Imaging | Neuroimaging |
| Neurosciences, Neurology & Imaging | Neurosciences |
| Neurosciences, Neurology & Imaging | Radiology, Nuclear Medicine & Medical Imaging |
| Psychiatry & Substance Abuse | Psychiatry |
| Psychiatry & Substance Abuse | Substance Abuse |
| Psychology and cognitive sciences | Psychology |
| Psychology and cognitive sciences | Psychology, Applied |
| Psychology and cognitive sciences | Psychology, Biological |
| Psychology and cognitive sciences | Psychology, Clinical |
| Psychology and cognitive sciences | Psychology, Developmental |
| Psychology and cognitive sciences | Psychology, Educational |
| Psychology and cognitive sciences | Psychology, Experimental |
| Psychology and cognitive sciences | Psychology, Mathematical |
| Psychology and cognitive sciences | Psychology, Multidisciplinary |
| Psychology and cognitive sciences | Psychology, Psychoanalysis |
| Psychology and cognitive sciences | Psychology, Social |

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| Public Health & Policy | Health Policy & Services |
| Public Health & Policy | Public, Environmental & Occupational Health |
| Social Sciences | Anthropology |
| Social Sciences | Area Studies |
| Social Sciences | Business |
| Social Sciences | Communication |
| Social Sciences | Criminology & Penology |
| Social Sciences | Cultural Studies |
| Social Sciences | Demography |
| Social Sciences | Economics |
| Social Sciences | Education & Educational Research |
| Social Sciences | Education, Scientific Disciplines |
| Social Sciences | Education, Special |
| Social Sciences | Environmental Studies |
| Social Sciences | Ethnic Studies |
| Social Sciences | Family Studies |
| Social Sciences | Geography |
| Social Sciences | Hospitality, Leisure, Sport & Tourism |
| Social Sciences | Industrial Relations & Labor |
| Social Sciences | Information Science & Library Science |
| Social Sciences | International Relations |
| Social Sciences | Law |
| Social Sciences | Management |
| Social Sciences | Operations Research & Management Science |
| Social Sciences | Political Science |
| Social Sciences | Public Administration |
| Social Sciences | Social Issues |
| Social Sciences | Social Sciences, Interdisciplinary |
| Social Sciences | Social Sciences, Mathematical Methods |
| Social Sciences | Social Work |
| Social Sciences | Sociology |
| Social Sciences | Transportation |
| Social Sciences | Urban Studies |
| Social Sciences | Women's Studies |