



Youth Mental Health Promotion and Prevention: An international imperative

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Mental Health of Young People in the EU

- Most young people in the EU enjoy good mental health and well-being;
- However, some young people experience mental health problems, which go beyond the usual mood swings which are a normal part of growing up.
- Mental health problems during youth are an important precursor of such problems in later life;
- Services to provide young people with mental health problems with support of treatment in countries are often not able to meet demand, but significant differences exist;
- Promotion and prevention are not mainstreamed and often underfunded.





School-Children Mental Health in Europe-project (SCHME)

A snapshot from 7 countries*. Some key findings:

- The percentage of children with mental health problems requiring psychiatric care was on average 4.4% (ranging between 5.7% in Lithuania and 3.2% in Italy);
- 68% of these children were not in contact with any health professional;
- 64.3% were seen by a general practitioners, 42.8% by a paediatrician;
- Less than 20% were seen by a psychologist, psychotherapist or psychiatrist.

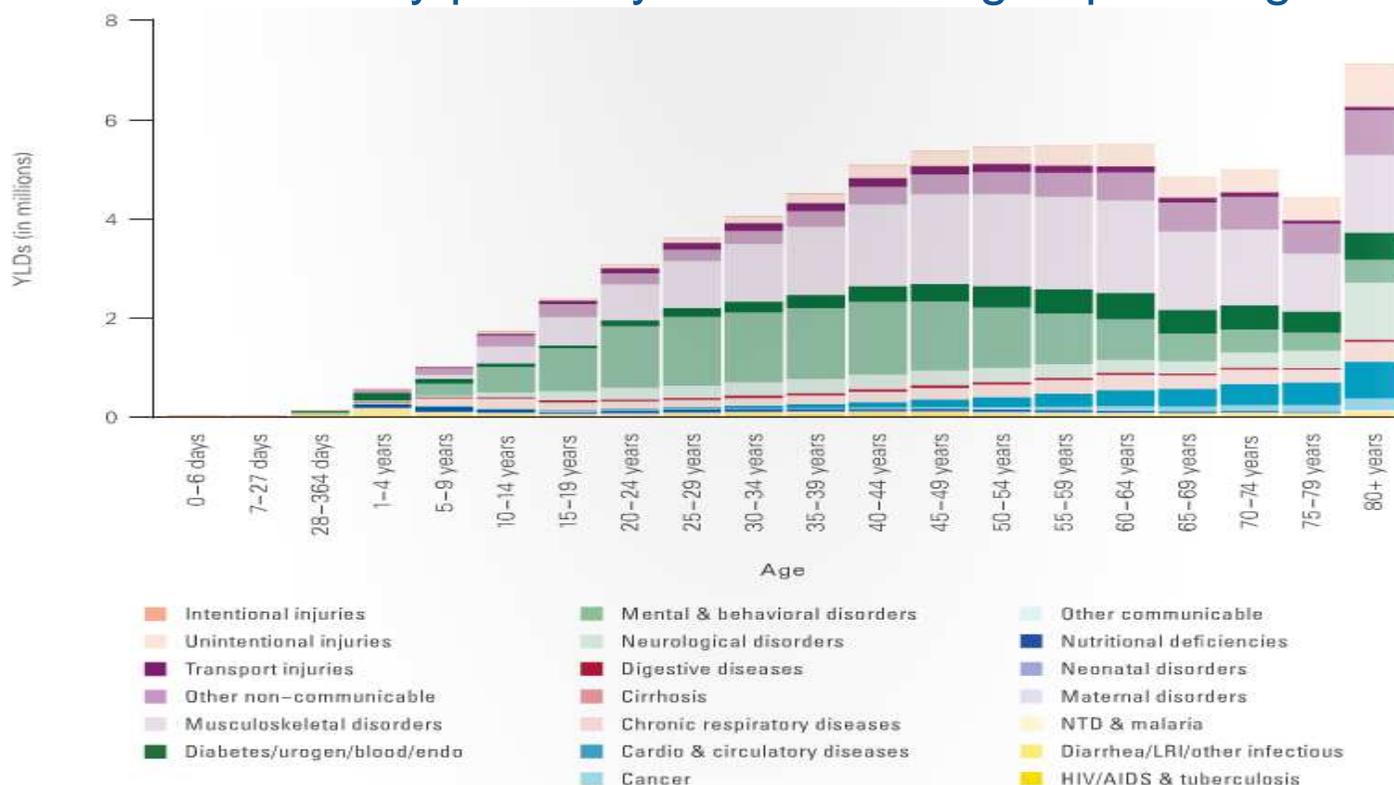
*Bulgaria, Germany, Italy, Netherlands, Lithuania, Romania, Turkey



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Mental Health in the Life Course

Disability patter by broad cause group and age

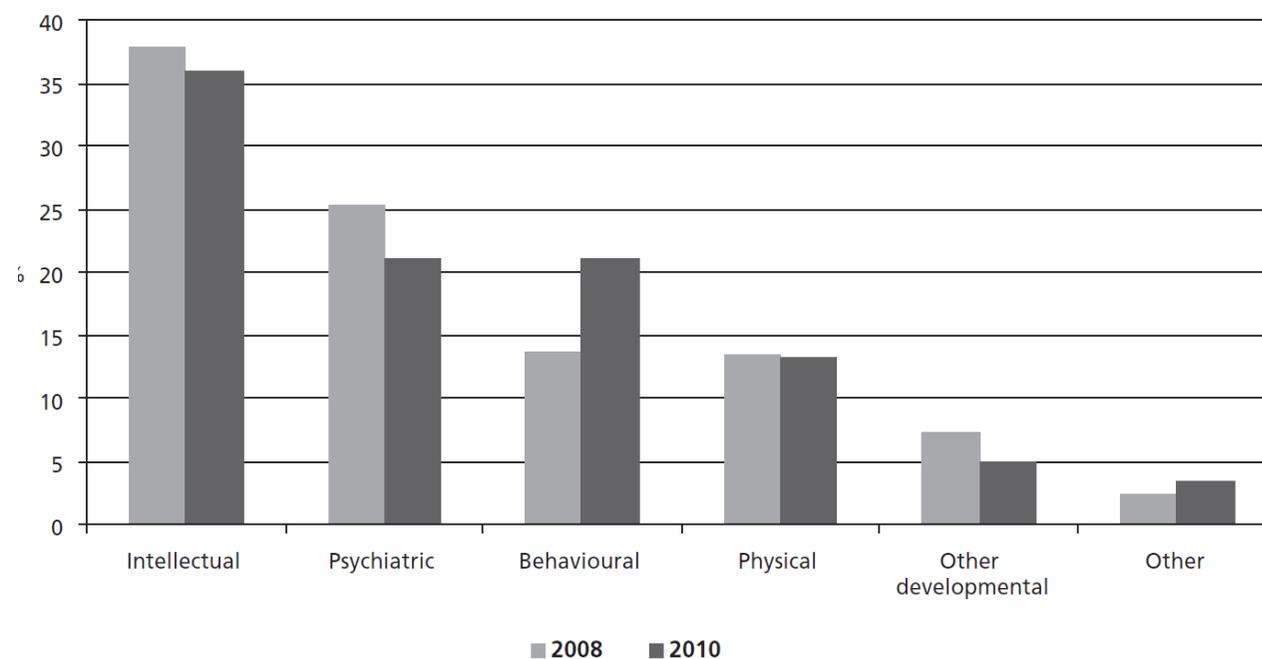


Source: The Global Burden of Disease: Generating Evidence, Guiding Policy – European Union and European Free Trade Association Regional Edition. Seattle, WA: IHME, 2013.



Mental health problems as major cause of disability benefits for young people

Health conditions of *Wajong* new entrants, NL, 2008 and 2010



Eurofound: Active inclusion of young people with disabilities or health problems, 2012





Some recent developments

In Germany, the number of inpatient mental health treatments for young people with depression increased by the factor 6 between 2000 and 2012 (from 2.145 to 12.567).

In Denmark, young people with mental health conditions accounted for 46% of the total inflow into early retirement pensions in 2007, compared to 26% in 1999.





Mental Health Promotion in Member States (EuroPoPP-report, 2013)

A number of countries include actions for mental health promotion / disease prevention in their mental health policies / strategies, such as:

- **Italy**, National Prevention Plan 2011;
- **Netherlands**, encouraging people to make healthy lifestyle choices;
- **Norway**, promotion and preventions as important features of mental health services;
- **Slovakia**, National Mental health programme includes goals for promotion, prevention and destigmatisation;
- **Slovenia**: draft Mental health programme has emphasis on promotion and prevention;
- **UK**, mental health policy widens arrangements for improving mental health with partners (local authorities, user and care organisations), including through promotion.

(Samele et. Al: EuroPoPP-report, October 2013)



Mental Health Promotion in Member States (EuroPoPP-report, 2013)

In some countries it is not yet recognised as a priority:

- Country profile for Bulgaria:

“Very little attention has been given on prevention of mental illness and promotion of mental health both at policy level and in terms of activities on the ground, although a small number of programmes were reported in schools and the workplace.”

- Country profile of Romania:

“Mental health promotion and prevention activities are sparse”



Mental Health Promotion in Schools (EuroPoPP-report, 213)

Number of programmes by setting and approach from the 29 participating countries:

	Prevention	Promotion	Combined	Total
Schools	100	40	29	169 (44.3%)
Workplace	48	15	23	86 (22.6%)
Older people	16	5	4	25 (6.6%)
General	75	4	22	101 (26.5%)
Total	239 (62.7%)	64 (16.8%)	78 (20.5%)	381 (100%)

Source: EuroPoPP country profiles

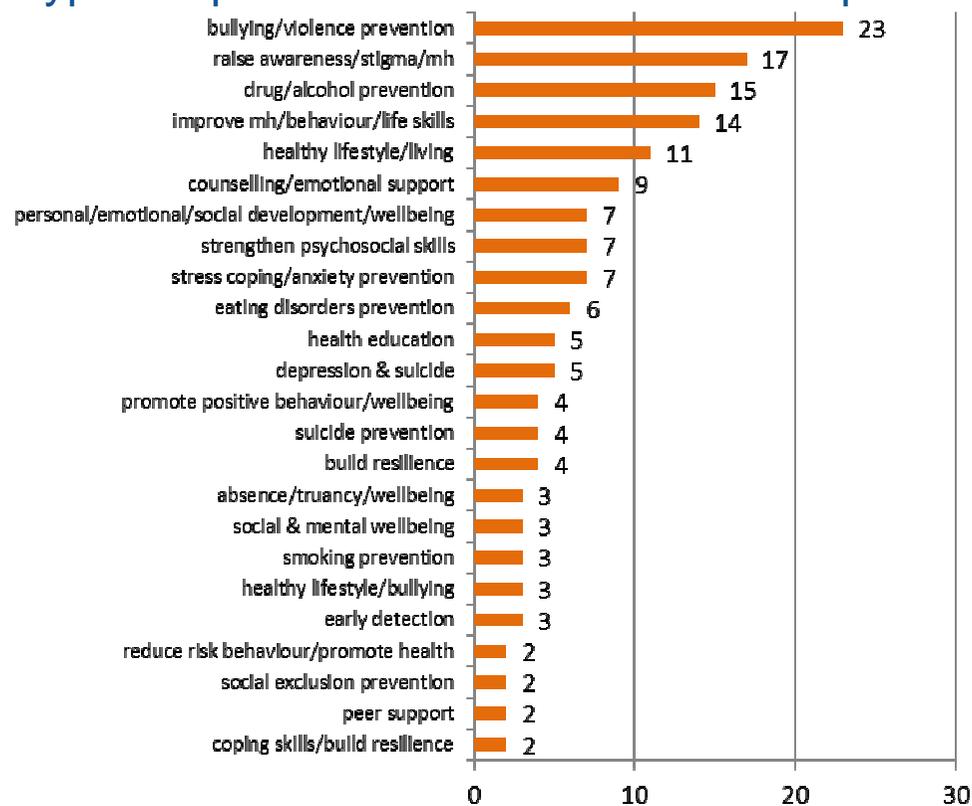




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Mental Health Promotion in Schools (EuroPoPP-report, 213)

Number and types of prevention and mental health promotion in schools
(n=161*)

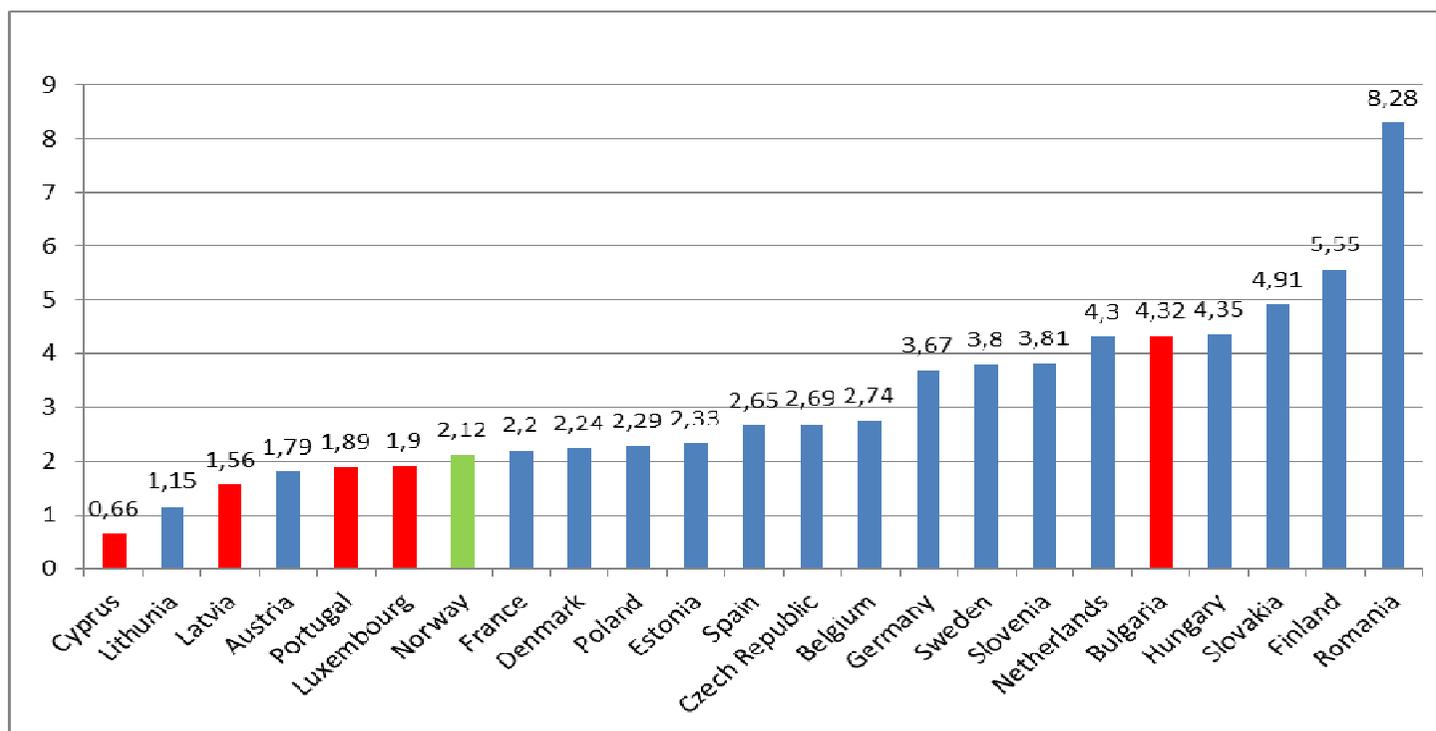


Source: EuroPoPP country profiles

*8 programmes were 'other'

Financing resources

Percentage of health expenditure spent on prevention and public health



Source: Eurostat 2012





Good practice Mental Health and Schools: Norway (EuroPoPP-report, 2013)

Mental Health of Young People identified in several Government Plans and in Education Act

- Schools a central point being responsible for psychosocial conditions of students;
- 'Mental Health in Schools'-Programme implemented through a national action plan financed and run by the Norwegian Directorate for Health and Social Affairs.
- Teachers receive free training along with school nurses and youth workers.
- Schools, from infants to upper secondary levels, receive financial support in implementing the programme in which participation is voluntary.
- Seventy percent of all upper secondary schools across 19 regions have participated in the programme since 2004.





Our activities

- EU-Health policy actions on children and young people
- Commission Recommendation: Investing in Children, Breaking the Cycle of Disadvantage, 2013
- Joint Action Mental Health and Well-being, with work package "Schools and Mental Health"
- Project activities under EU-Health and Research framework Programmes, beginning with CAMHEE-project
- ADOCARE-preparatory action for the European Parliament
- European Youth Report (2015)
- Development of EU Compass for Action on Mental Health and Well-being (2015)





EU-Health policy actions on children and young people

Focus areas:

- Nutrition and Physical Activity;
- Alcohol;
- Tobacco
- Vaccination





Commission Recommendation: Investing in Children, Breaking the Cycle of Disadvantage, 2013

Objective: protect the rights of the child, combat social exclusion and discrimination, promote social justice and protection:

Relevant recommendations:

- Access to affordable quality services (early childhood education and care,
- Improve education systems' impact on equal opportunities,
- Improve the responsiveness of health systems to address the needs of disadvantaged children: *Devote special attention to children with disabilities or mental health problems, undocumented or non-registered children, pregnant teenagers and children from families with a history of substance abuse*





Joint Action Mental Health and Well-being, work package "Schools and Mental Health"

- Joint Action led by Portugal, work package by Veneto Region/ Italy;
- Implemented 2013 – 2016
- Objectives: Assess situation in the participating group of countries, identifying good practices, developing a framework of action with policy recommendations.





PROYOUTH-project on eating disorders in young people

- Promotion of young people's mental health through technology-enhanced personalization of care, 2011 – 2014, led by University of Heidelberg / Germany
- Broad and sustained implementation of an Internet-based platform for mental health promotion and the prevention and early intervention in eating disorders
- Cofunded from EU Health Programme

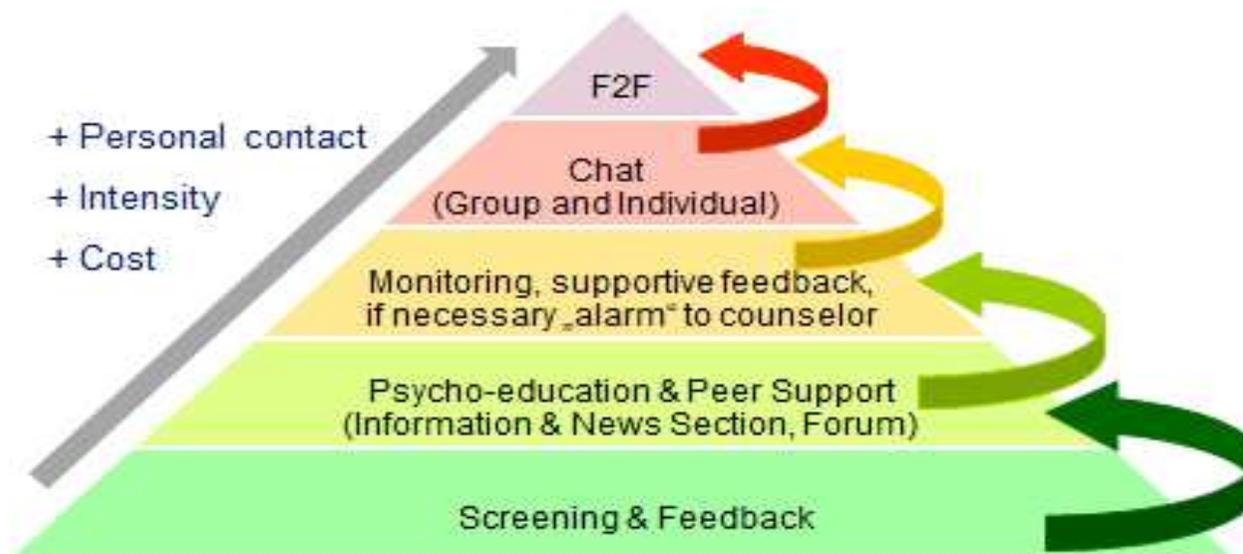


PROYOUTH-project on eating disorders in young people



UniversityHospital Heidelberg

The ProYouth Platform: Modules



Aims

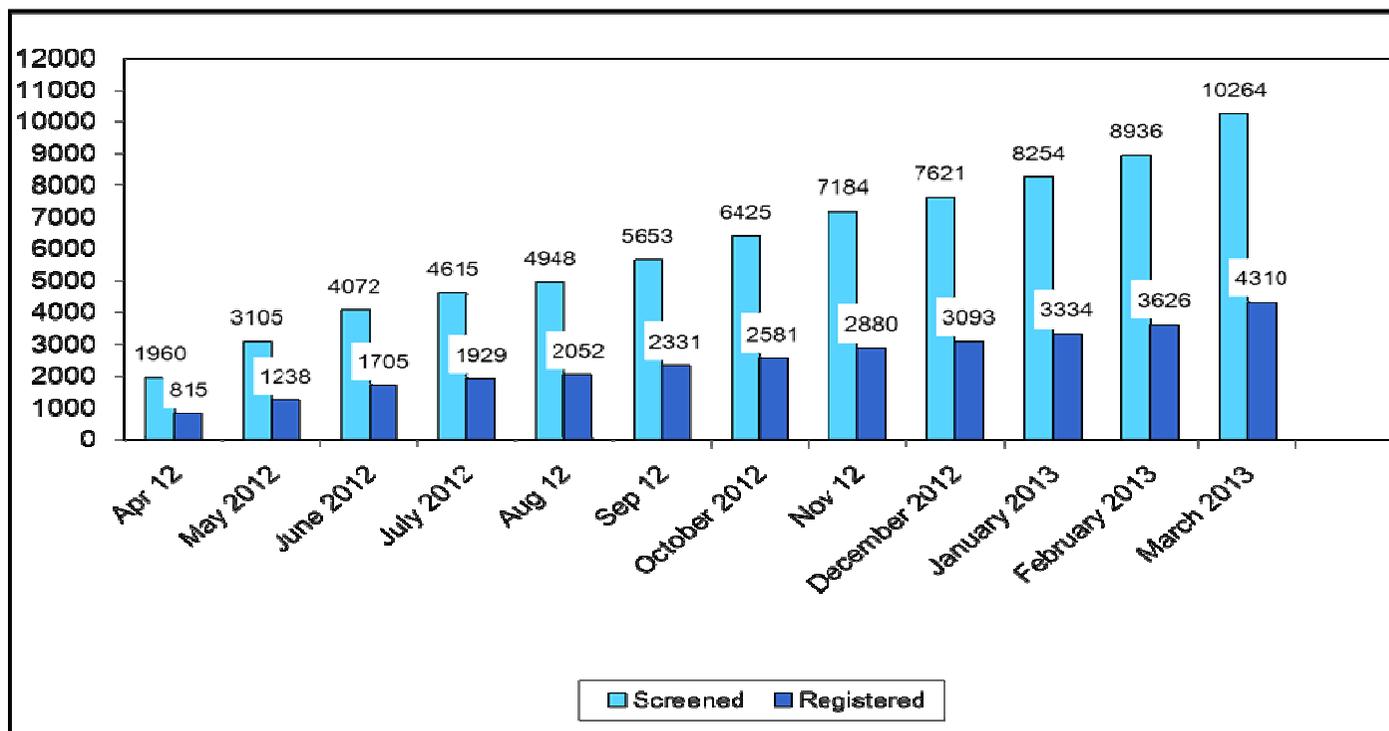
- Match intensity of intervention to individual need for support
- Facilitate transition from online to face-to-face (F2F) support





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Development of user figures PROYOUTH 2012-2013





SEYLE project on school-based suicide prevention

- Led by Karolinska Institute Sweden
- Funded from 7th FP Research.





SEYLE project on school-based suicide prevention

- The SEYLE project is a randomized controlled trial (RCT) testing mental health promoting interventions for adolescents in European schools.**
- The SEYLE project is registered at the German Clinical Trials Register (DRKS00000214).**

Wasserman D et al. BMC Public Health. 2010;10:192



SEYLE Awareness intervention

Awareness of HRB and mental health intervention for pupils 4-week 5 hours intervention

- ❖ Pedagogical booklet about lifestyles, health risk behaviours, suicidal behaviours and mental health problems.
- ❖ Lectures with role-play
- ❖ Posters in the classroom
- ❖ Manual for instructors





SEYLE Awareness intervention

Awareness Intervention

- The observed reduction in incident suicide attempts was more than 50%.
- This effect is higher than those seen in other successful universal public health interventions regarding:
 - Bullying and bully victimization (17-23%)
 - Certain types of school-based interventions addressing smoking cessation (14%).



ADOCARE-project on adapted care for adolescents with mental health problems

- Implemented 2014 to 2015, led by Action for Teens-consortium
- Objectives: Identify and analyse the transferability multidisciplinary support infrastructures adapted to the needs of adolescents with mental health problems
- One model: Maisons de Solenn (Houses for Teens) in France
- Funded by the European Parliament





EU-Compass for Action on Mental Health and Well-being

- To be further developed and implemented 2015-2017

Objectives:

- Raise greater awareness about mental health as a priority for actors across several sectors and bring leaders and good practices together
 - create a critical mass of actors and visibility in order to create peer pressure and political commitment;
- Disseminate the framework of action resulting from Joint Action Mental Health and Well-being.
- Promote and monitor its implementation over time by inviting annual activity reports from Member States
 - organise annual mental health events that attract attention.



EU-Compass for Action on Mental Health and Well-being

A cycle of annual work over three years (2015-2017):

- Disseminate the framework of action resulting from Joint Action Mental Health and Well-being and other relevant information.
- Invite activity reports from Member States;
- Invite activity reports from stakeholders;
- Identify good practices;
- Prepare annual reports;
- Organise annual Forum events.

→ Children and youth mental health will be a priority of this process and the participants in this conference are invited to contribute reports about their activities.





Conclusions

Youth is a priority of EU-mental health policy;

- Based on several past and ongoing project activities and statements, the Joint Action Mental Health and Well-being is preparing a proposal for a framework of action on mental health and well-being;
- In order to attract even more visibility and policy interest for mental health, and to encourage more implementation, the EU Compass for Action on Mental Health and Well-being will be further developed;
- The participation of youth (mental) health professionals, school and social policy actors, NGOs etc. in this process is a precondition to its success and impact.

