

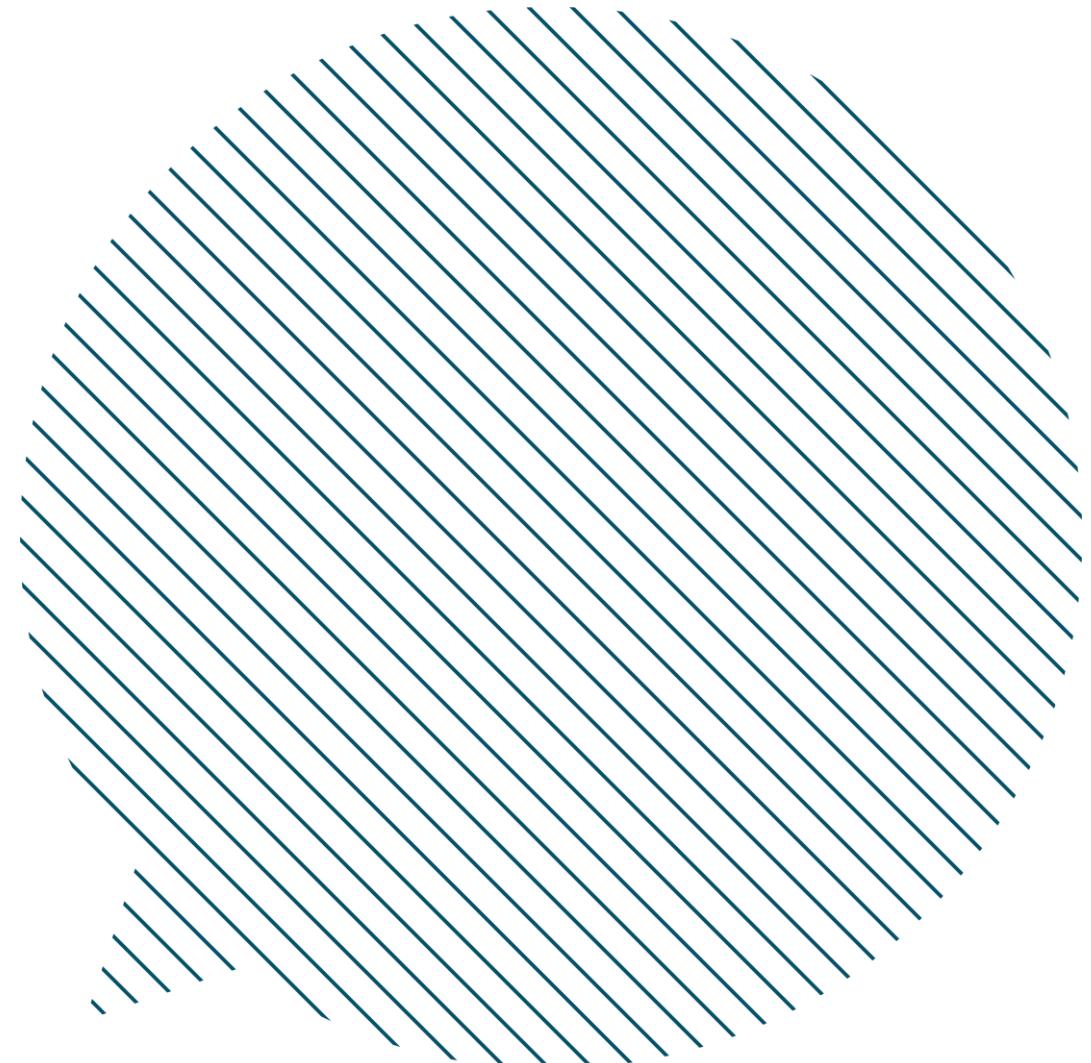
# Social and mental wellbeing in children and youth

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The national system managing child mental health issues

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Norwegian Directorate of Health



# Municipal health services for children and youth

- Child and youth health centres and school health services (0-20 years)
- Regular general practitioners office (sometimes in collaboration with nurse)
- Maternity services via the health centre
- Other relevant services:
  - Dental care (regional level)
  - Care services – institutions and ambulant services
  - Habilitation and rehabilitation – including physical therapists
  - Services for substance abuse and mental health
  - Municipalities are currently staffing up by recruiting psychologists to work in primary care services



Photo: Ole Walter Jacobsen

# Child health centres: children 0-5 years

- A program consisting of 14 consultations
- 10 consultations before the child is 1 year old
  - Tracking the child's development
- Home visit 7 to 10 days after birth
  - Fuller understanding of the family/ home situation gives the opportunity to give more individualized guidance
- Examinations by a doctor at:  
6 weeks, 6 months, 1 year and 2 years of age.
- Individualized guidance in all consultations on different subjects
- Parental mental health should be addressed regularly



Photo: Ole Walter Jacobsen

## School health services: 5-20 years

- Thourough consultations at 1st grade and 8th grade
- Collaboration with the school
  - Teaching in classes or groups, on subjects such as sexual health, tobacco, drug and alcohol prevention and nutrition
  - Work to ensure a safe and good school environment
- Health promoting and preventive work based on the needs in the community
- Available for drop in consultations



Photo: Jojo Studio by John Fredrik Kvalnes

# Youth health centres

- Vital provider of information on sexual and reproductive health and rights, including contraceptions, STI testing etc.
- Detecting mental health problems and disorders:
  - Youth health centres should be particularly aware of adolescents with risk factors for developing mental problems and disorders
  - Adolescents suffering from mental health problems should be offered follow-up consultations as and when necessary
- Adolescent-friendly health services that are accessible, acceptable, equitable, appropriate and effective



Photo: Jojo Studio by John Fredrik Kvalnes

# Mental health services in the municipalities

- Educational and psychological counselling service
  - A public service agency that provides advice and guidance to municipalities on the establishment of measures and initiatives for children with special needs
  - Assessment not treatment
  - Guidance to other personell groups, i.e. public health nurses etc.
- Outpatient mental health care for children and youth (0-18y)
  - An integrated part of the **specialist health care**
  - Collaboration with municipalities and regions on measures and treatment
- Municipality psychologist
  - A few municipalities have integrated psychologists in their municipal health and care services for a decade or three, but not a generalized service
  - Measures are being made to secure access in all municipalities

# Status for mental and social wellbeing among adolescents

- A regular national youth survey (Ungdata) collect data on adolescent (13-19y) life and health, through questions about relationships, education, leisure activities, health and well-being, use of stimulants and experiences of threats or violence
- The last survey concludes that the current adolescent population is well-adjusted with good relationships with their parents, they are active and enjoy their school and local community
- But:
  - The proportion of adolescent expecting to live a good and happy life is declining
  - Almost 15 % of girls and 7 % of boys in secondary education reports loneliness
  - The proportion with symptoms of depression is increasing, and
  - Adolescents report high levels of stress i relation to expectations (grades, body, success etc)
  - Last 25 years – the proportion of students completing secondary education within five years has been stable at 70%

Helsedirektoratet

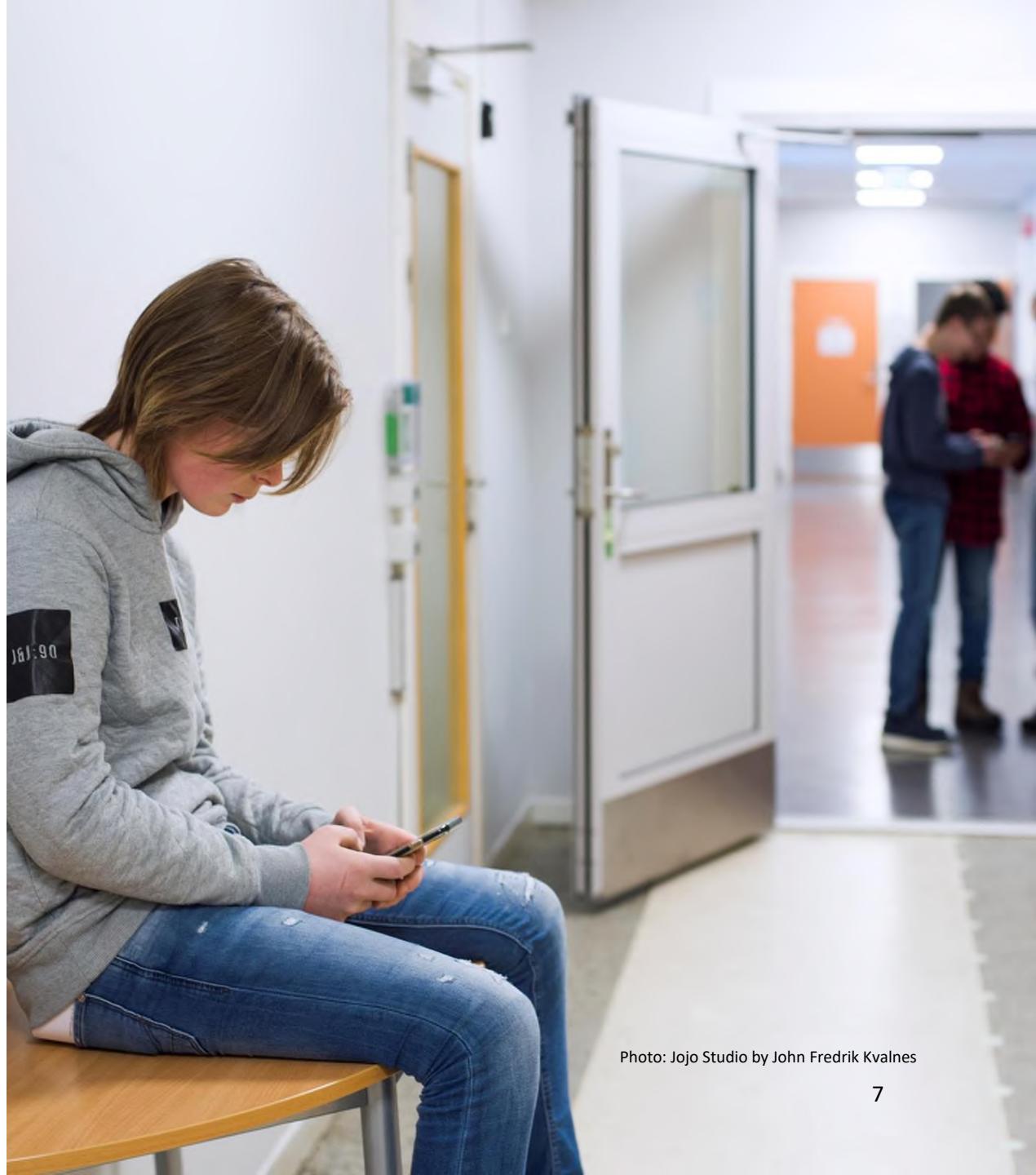


Photo: Jojo Studio by John Fredrik Kvalnes

# How did Norwegian youth handle the pandemic?

- A report was recently published summarising the responses of 140,000 young people around Norway to the Ungdata survey, a large, well-known study conducted annually across the country.
- Despite living with the pandemic for a year, the survey indicates that the younger generation has, in general, done fine and have dealt with these challenges well.
- The surveys were carried out about a year after the emergence of the coronavirus pandemic in Norway. Around 89 percent agree with the statement “My life is good” and 77 percent feel that they have everything they want in life.
- 3–6 percent of the youths’ quality of life has been poorer during the coronavirus. Close to 30 percent also said they felt more unhappy, sad, or depressed during the pandemic than before.
- 68 percent felt that the pandemic had a positive effect on their lives
- The most significant difference between the pandemic year and other years is observable by the changes in participation at school or during leisure activities. Close to half of the young people felt they had participated in fewer leisure activities than before the pandemic.

# Rise in eating disorders

- In March 2021, the National Commission of Inquiry for the Health and Care Service reported a clear increase in mental health problems among children and young people.
- Severe depression and severe eating disorders in particular showed an increase in prevalence.
- The health service reports a large increase in eating disorders during the pandemic, and that it is challenging to treat everyone properly. The patients are both younger and sicker.
- The increase has had consequences for several health authorities, and the low-threshold services tell of explosive growth in the number of enquiries.
- New figures from National institute of public health (FHI) point to indications that the number of patients with eating disorders have specifically increased in both primary and specialist healthcare (unpublished findings, FHI)

Research Letter | Pediatrics

July 13, 2022



## Eating Disorder Diagnoses in Children and Adolescents in Norway Before vs During the COVID-19 Pandemic

Pål Surén, MD, PhD<sup>1</sup>; Anne Benedicte Skirbekk, MD, PhD<sup>2</sup>; Leila Torgersen, PhD<sup>1</sup>; et al

<https://jamanetwork.com/journals/jamanetworkopen/fullarticle/2794170?resultClick=24#figure-table-tab>

*"We found a substantial increase in the number of girls diagnosed with eating disorders in Norway starting after onset of the COVID-19 pandemic. The timing of the trend disruption suggests that the increase was associated with societal changes induced by the pandemic, including restrictions placed on youth's lives, education, and activities."*

# What does supervisory authorities and official reports say?

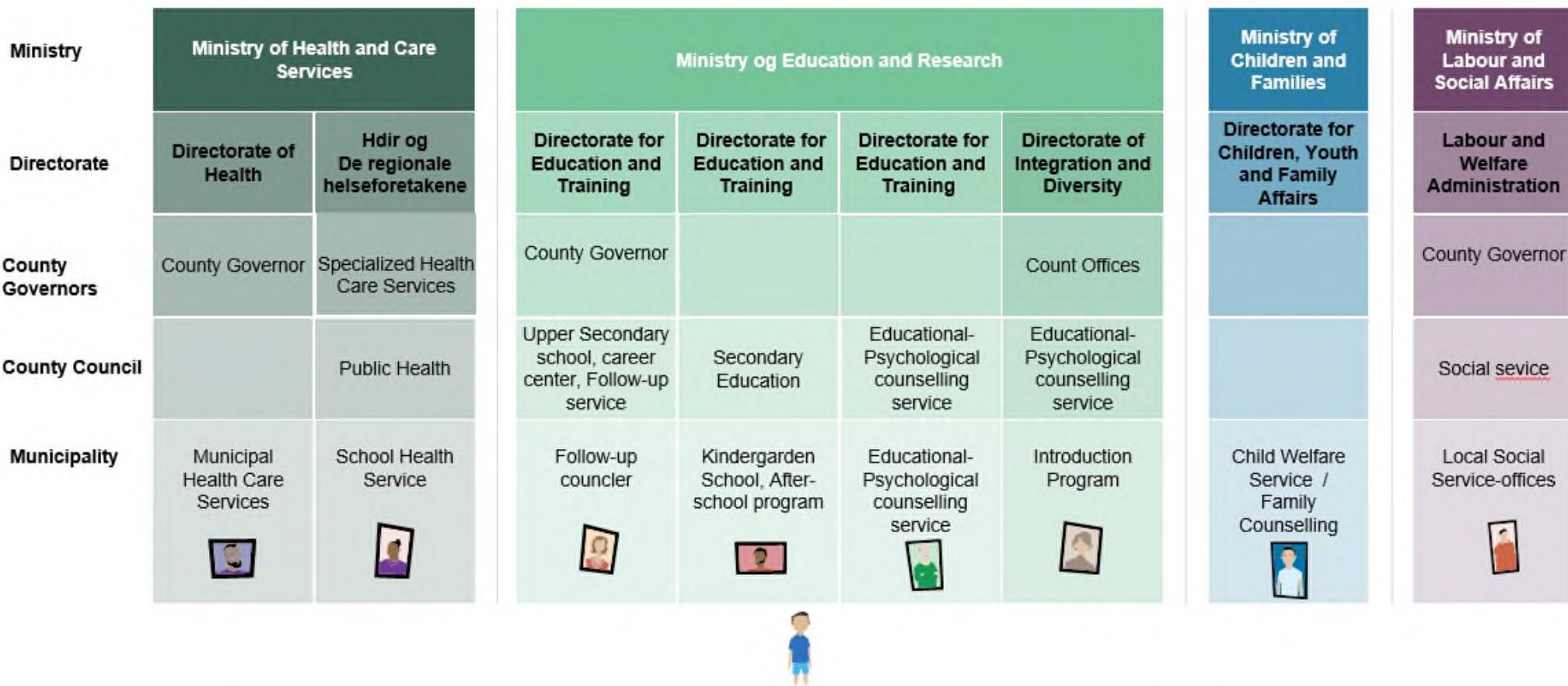
Official Norwegian Report «Failure and betrayal» from 2017 – a green paper/ policy recommendation found:

- Lack of time and resources to collaborate
- Lack of knowledge of other services' work, roles and regulation
- Lack of procedures to ensure collaboration
- Lack of collaboration and information sharing in specific cases
- The public services spoke very little to the children themselves.
- Children have not received help, received poor help or late help.
- The authorities and services have not seen the totality of the child's situation.



# Complex challenges needs complex measures

- «The main recommendation, in policy development, is to think coherently. It involves thinking life cycle and context for the individual rather than within sector-specific responsibilities »
- «We can not only focus on measures and efforts within the educational system, or just focus on measures in the labour market»
- End report from 'The Nordic Committee for Children and Young People'



At a service level:

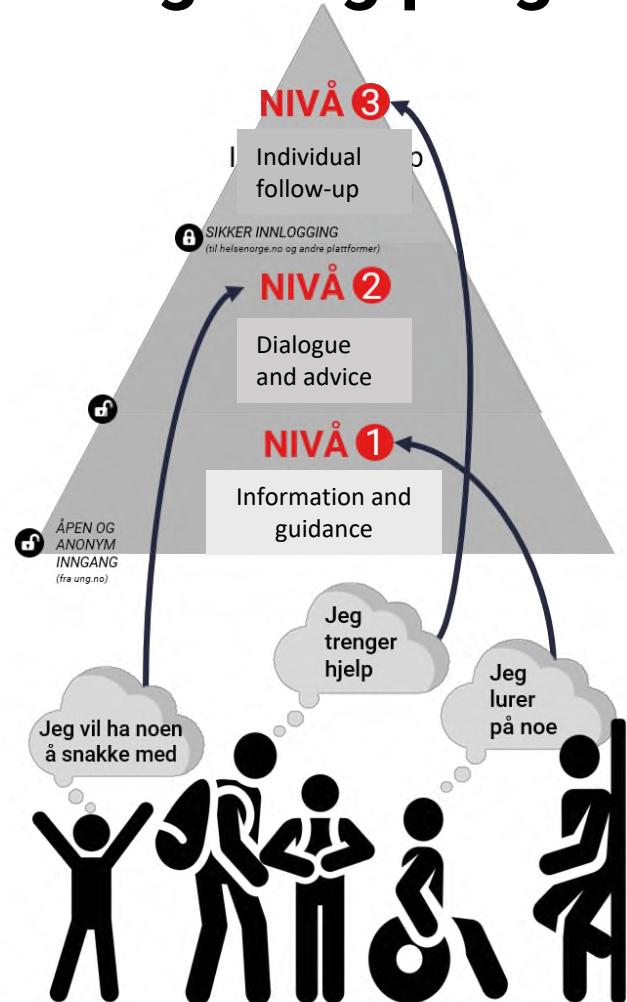
Early, interdisciplinary intervention for pregnant women and families with young children

- An educational training program „Early In“
- The target group is municipal staff, their leaders and general practitioners who provide services to pregnant women and young children
- The participants undergoes training in the use of assessment tools and methods for counselling families on topics like substance and alcohol misuse, mental health and violence
- The aim of the program is to systematically address substance and alcohol misuse, mental health and violence in consults with pregnant women and families with young children, to ensure early, interdisciplinary intervention



Photo: Ole Walter Jacobsen

# DIGITAL COORDINATION OF YOUTH SERVICES – the digi-Ung program



**YOUNG PEOPLE WANT** information, advice and counselling from the public sector gathered in one place

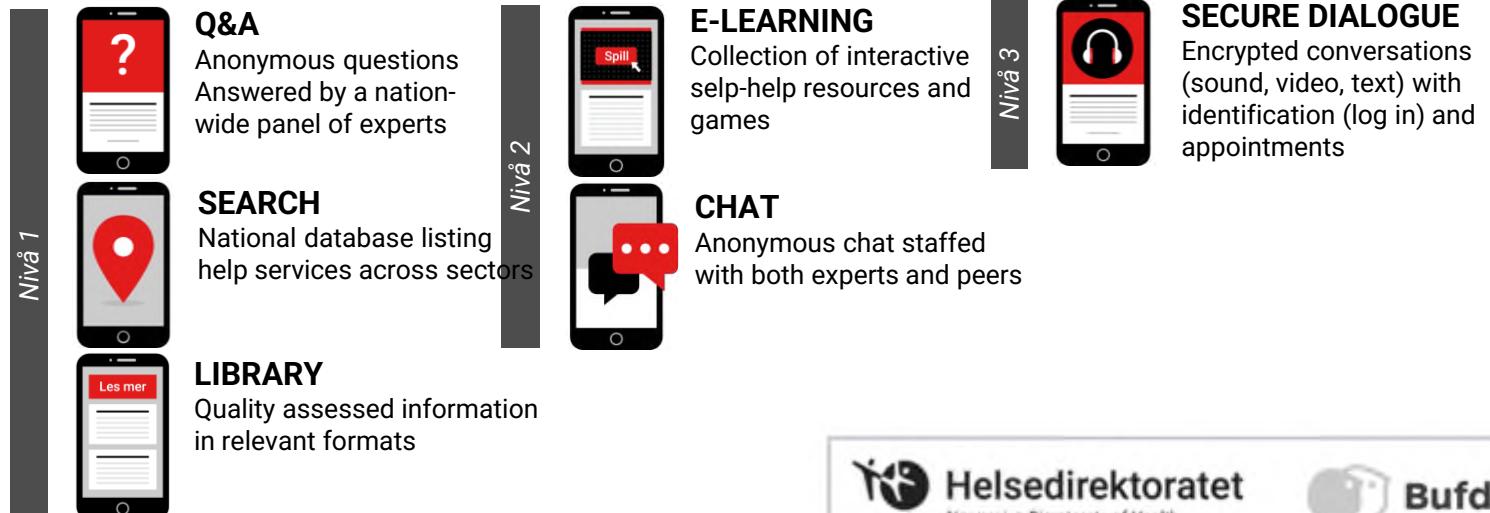
## AIM

The **DIGI-UNG** program shall provide easy access and quality assessed information, guidance and services to youth, through a comprehensive digital service across sectors to incite self-efficacy and self-management.

## KEY PREMISES

- #User-centered with active user-involvement in all processes
- #One seamless user experience across sectors and help-services
- #Universal accessibility
- #Sharing and reusing components across services and platforms

## FUNCTIONALITIES



# New policies: The escalation plan for good mental health among children and adolescents

- **A society that promotes mental health and quality of life and reduces social differences among children and adolescents**
  - Nourishing families and childhoods
  - Learning environment that promotes self-efficacy and mental health
  - Safe digital arenas
- **Early intervention**
  - Early discovery of problems
  - Early interventions to strengthen parental skills
  - More young engaged in education, activity and work
- **User involvement**
  - Children and adolescents should be involved – both at an individual and group level, including development of services
  - Children and adolescents with mental health issues shall receive individualized care and treatment
  - Children and adolescents shall receive knowledgebased interventions

## Increased knowledge

- Research and implementation of knowledge
- Strengthen competence and management



Photo: Ole Walter Jacobsen



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