Children's Mental Health across Europe

Taken from *Children's Rights: Political will or won't?* Eurochild 2023 report on children in need across Europe.

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Introduction

The World Health Organisation defines health as "*a state of complete physical, mental, and social well-being and not merely the absence of disease or infirmity,*" underscoring its multidimensional nature and the diverse indicators used to measure it.

The Eurochild 'Growing up in lockdown report' (2020) highlighted the significant impact of the COVID-19 pandemic on children's mental health, which exacerbated existing social inequalities and widened the educational and digital gaps. The lockdowns amplified financial stress, uncertainty about the future, and prolonged periods of confinement within households, inevitably leading to increased levels of anxiety and mental health challenges among children and young people.

Childhood is a critical stage of life for mental health and well-being. It is during these formative years that individuals develop essential skills in self-control, social interaction, and learning, which profoundly influence their mental health throughout their lives. Recognising this, addressing the mental health needs of children is not only crucial for ensuring their immediate well-being but also serves as a vital tool for prevention and building resilience.

There is a growing demand for mental health support among children. However, the existing mental health services across Europe are not equipped or sufficient to adequately address the increasing needs of this demographic. As a result, many children are unable to access the necessary support and treatment they require for their mental health issues. Moreover, the challenges faced by children in terms of mental health are often overlooked or disregarded. Despite the increasing numbers seeking support, there may be a lack of attention or prioritisation given to addressing the mental health needs of children within broader societal and healthcare discussions and policies. Such oversight can further exacerbate the difficulties faced by children in accessing appropriate care and support for their mental well-being.

In Eurochild's "Children's Rights: Political will or won't?" report, 38 Eurochild members in 26 countries provide recommendations on how to address among others, the impact and lived experiences of poverty and social exclusion, and discrimination on children.

Based on the information provided by Eurochild members on children's mental health, this sub-report provides practical, rights-based recommendations for addressing the needs and challenges faced by children and their families across European countries. These policy recommendations are grounded in practical insights, enhancing the potential for a real impact in improving the lives of children and their families.

Country Reports

Disclaimer: not all countries identified in the "Children's Rights: Political will or won't?" report, includes information on children's mental health.

1. Albania

The mental health care system is in **need of reform**, as practices and instructions are **outdated and overall lacking**. CRCA is criticising that mental health is mostly **adult focused** in Albania and lacking the perspective of children. Moreover, evidence is lacking - there are **no reports or data on children** being affected by mental health and thus no knowledge of the real situation on the ground.

2. Belgium

The Covid-19 pandemic has highlighted the importance of young people's mental health. Policymakers have taken measures in this regard, such as **increasing the affordability of psychological help**. However, waiting lists for mental health services remain very long, particularly for children.

Belgium is in the process of reforming its mental health care delivery system with the aim of simultaneously strengthening community care and improving integration of care. The new policy model attempts to strike a balance between hospitals and community services, and it is based on networks of services.

3. Bulgaria

The *National Strategy for the Mental Health of the Citizens of the Republic of Bulgaria 2020–2030* was adopted in 2021 and it **foresees strengthening the focus on child and youth mental health.** Activities include programmes supporting children with mental health conditions and their families, modules on the problems of violence against children and training of healthcare professionals and general practitioners to integrate activities and services for early diagnosis of mental health problems.

The **strategy outlines the development of a public register of approved qualified professionals providing mental health help to children and young people**. To extend these positive practices, **more robust collection of da**ta on children's mental health is needed. Eurochild members recommend a mapping on children's mental health needs and the provision of support by schools to help pupils cope with the demands of the education system.

4. Croatia

Croatia has 56 child psychiatrists and approximately 60 child psychiatry beds[1]. There has been an **increase in suicides among child and adolescent**, including young children. A **rising trend in anxiety and depressive states** of children and young people is visible, teenage girls are among the highest risk.

The Croatian government has developed a Strategic Framework for Mental Health (2022-2030). This includes principles, goals, results, indicators, their initial and target values, and areas of implementation and desired outcomes: preserving and improving mental health; prevention and early recognition of mental health problems; increasing the availability of effective biopsychosocial interventions while respecting human rights and protecting mental health in the community. The reform plans for mobile teams for mental health, and the return of mental health into the primary health protection system.

Considering the data on the lack of child psychiatrists, accommodation capacity, waiting lists, increased suicides among children and young people, and difficulties related to mental health**, it is a worrying fact that the Strategic Framework does not foresee additional financial resources for its implementation.**

5. Denmark

Children continue to have **significant mental health struggles** in Denmark, as 15% of Danish young adults are diagnosed with mental disorders, which has been increasing over the last few years[2].

Despite the rising numbers, children and young people still have to wait for often several years to gain access to psychiatry wards and receive treatments, which also reflects the stress of professionals working in this field. **There is a lack of social services directed at children with mental health struggles as well as an insufficient number of professional workforce trained for working with children**. This also risks creating insecure early attachments for children due to high turnover of professional caregivers and teachers throughout childhood.

6. England

The pandemic caused an unprecedented increase in demand for Child and Adolescent Mental Health Services (CAHMS), **particularly eating disorders**. 409,347 children were referred for specialist mental healthcare, including suicidal thoughts and self-harm[3], up from 230,591 in 2019. 450,000 children are waiting or undergoing treatment for a mental health

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[1] Data presented at the thematic session of the Committee for Health and Social Policy on the state of child psychiatry in Croatia (March 2023).
[2] Euronews, Mental health: Is Denmark's youth living up to the country's happiness claims?, 2023.
[3] April-October 2021

condition – <u>the highest number on record since 2016</u>. **Children face high access thresholds**, **rejected referrals, and long waiting lists.**

<u>Inappropriate adult ward admissions persist</u> along with stays in inpatient wards for long periods, far from home, despite the UK government committing to <u>improve inpatient care for children</u>. <u>Black and mixed-race children</u> accounted for 36% of young people detained in acute mental health services[4], but only 5% of those accessing community based CAMHS.

Recommendations

To take urgent steps to:

- **increase the provision of preventative and early intervention support** within education and community settings, including the national roll-out of early support hubs;
- ensure children can receive mental health **treatment and support near their home**;
- **prevent unnecessary, prolonged stays in inpatient** settings and **address racial disproportionalit**y;
- ensure **high-quality** treatment.

7. Finland

The indicators describing the mental well-being of children and young people have developed in a **worrying direction**, especially after the pandemic. At the same time **youth experience difficulties in getting help**. Several civil society organisations (CSOs) have stated that mental health should be promoted in a broad-based and cross-administrative manner.

While the government programme recognises mental health as a social problem and targets mental health and preventative services, the (numerous) cuts included elsewhere in the programme may jeopardise this goal. The UNCRC has provided Finland with several recommendations concerning mental health, e.g. that Finland invest in preventive measures and address the underlying causes of mental health issues among children.

8. Germany

The significant **increase in treatment, mental health diagnoses, and inpatient psychiatric treatment** days in childhood and adolescence is of concern. Despite a significant increase in private practices, outpatient clinics and day hospital treatment places in Germany, **the demand is far from being adequately met**. The mental well-being of children and strengthening their resilience should be the focus of all responsible parties. There is a need for development and implementation of information and education services for parents, and further training measures for pedagogical specialists.

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[4] Despite making up 11% of the population

9. Greece

A recent study by the Child and Adolescent Mental Health Initiative revealed the most frequent mental health conditions of Greek children include attention-deficit/ hyperactivity disorder, anxiety, disruptive behaviour, depression, and bullying. Alarmingly, the daily practice of 22% of health professionals in the study involves the assessment of suspected child abuse and neglect. Educators agree on the s**carcity of training and support to aid in identifying and addressing students' mental health problems, and child abuse and neglect**. Parents identify that stigma is a barrier in Greek society, and they too need support to tackle their own stigma towards mental health.

ALMA calls for urgent action with a focus on early intervention in order to create supportive family and community environments to combat stigma for children with disabilities and with mental health problems.

There is a need to **establish clearer definitions on mental health issues** at a national level, and to **improve the availability of data** on mental health for children.

When it comes to access to health-care services, **children with disabilities face additional challenges**. Lack of public services force families to use private health services for children's rehabilitation. Furthermore, the shortage of specialist doctors in the Disability Certification Centers (KEPA) causes significant delays in issuing disability certificates and entitlement for specialised benefits and care. Increased investment and awareness raising in health and mental health services for children is needed to make them more accessible in rural areas, and for vulnerable/low-income groups such as Roma and children with disabilities.

10. Hungary

In several areas concerning children, there is **no official data available**. Children's mental health, for instance, relies on statistical data from previous years that raises awareness of deviancies such as alcohol consumption, risky sexual behaviour, teenage pregnancy, and suicide attempts; however, there is no official data from 2022 concerning children's mental health. Our member in Hungary **urges for the recognition of the problem by the state**, which they consider a great step forward. In addition, HCR sees the need for accessible information regarding sexuality and contraception, which currently is a task left to schools only as non-governmental organisations (NGOs) are excluded from educational institutions.

11. Ireland

In December 2020 there were 2,755 children and young people waiting for mental health services. By the end of February 2023 this had risen to 4,434. In July 2023, Ireland's Mental Health Commission published its Independent Review of the provision of Child and Adolescent Mental Health Services (CAMHS). The final report lays bare concerns on **significant shortcomings** with 49 recommendations for action. Alarmingly, **services cannot**

give assurance to children and families that they will get the support they need, and they deserve, within the current system.

Mental health services are completely stretched thin with **most services significantly understaffed**. The Health Service Executive needs to consider alternative ways to deliver healthcare to ensure the children that need support the most, have access to it, regardless of where they live. Special attention is needed for children who face difficulties accessing support, for example: the Traveller Community, asylum seekers, refugees and migrants (including those in Direct Provision), children in care and young LGBTI people.

12. Latvia

The main problems in mental health in Latvia are related to the **shortage and availability of professionals.** In addition, societal stigma towards mental health persists, which affects the speed with which mental health professionals are contacted, if at all.

Children from 14 years old can receive psychological counselling without parental consent. LCWN is calling for this age limit to be removed and for a child to receive psychological counselling at whatever age they require it. If such access is free, this would significantly expand the possibilities for children to receive psychological support anonymously and timely. Mental health support and services for children are expensive, and these **costs are either not covered by the State or insufficiently covered.** School psychologists are available to children but are often used in schools as a punishment for inappropriate behaviour.

Moreover, according to the legislation, psychological counselling is one of the coercive measures of an educational nature, which consequently does not promote trust in mental health professionals among the general public, including children.

In addition, there are **no medical and rehabilitation services available for children with addictions** in Latvia. Despite the extremely widespread problem of addiction, there is only one motivational programme for young people with addictions, and only if they do not want to continue treatment.

13. Malta

According to MFWS, there is a **lack of resources** regarding mental health for children in Malta. Civil society organisations (CSOs) are stepping up to provide such services. The Malta Trust Foundation (TMTF), a sister organisation of MFWS, offers counselling services in schools through the Blossom Project.

In 2022, MFWS and TMTF, collaborated with Dr Paulann Grech, a Maltese academic and expert on mental health, to embark on a joint Skola Sajf (Summer School) initiative to raise awareness regarding children's mental health. The project aimed to explore the experiences of young children aged between 5 and 7 years old and understand how children's mental health is being affected. Through this project, it emerged that children as young as 5 years old **can communicate on aspects related to their mental health.**

When given the time and space to express themselves, children can explain what they feel and experience well. Children participating in this project expressed that their personality, experience, familial community, and neighbourhood context can greatly determine their mental health.

14. Netherlands

The proportion of young people (12-15 years old) with mental health complaints, which was exacerbated by the Covid-19 crisis, has **decreased only slightly** since the end of the last lockdown in early 2022. In June 2022, the **Secretary of State launched an Action Plan to tackle mental health problems** in five different domains: society in general, neighbourhoods, school, work and online. The action plan however has no clear objectives, terms and conditions and budget. **Youth mental health care is struggling** with the same issues since the 1980s, budget cuts, long waiting lists and low quality of care.

The Dutch Health Behaviour in School-Aged Children (HBSC) study revealed that the percentage of girls experiencing emotional problems has almost doubled between 2017 and 2021 and the situation did not improve in 2022. Adolescents growing up in families with a low socioeconomic status or that grow up with one parent report relatively high levels of mental health problems.

15. Northern Ireland

According to official government statistics, the presentation of **young people experiencing mental health crisis continues to be particularly acute** within Emergency Departments at hospitals, with annual referrals increasing year on year. As highlighted by NICCY, numbers referred from Emergency Departments has more than doubled between 2018/19 (n=484) and 2021/22 (n=1,028). **Waiting lists for mental healthcare remain a significant problem**. In March 2022, the overall number of children waiting for Child Acute Mental Health Services was 2106, the highest since 2017, when the Children's Commissioner started monitoring waiting times.[5]

16. Romania

There is a concern for children's mental health in Romania. Targeted measures are foreseen as part of the new national strategy for the promotion and protection of children's rights, which is currently being developed, as well as measures in initiatives of the government and authorities.

The Ministry of Health carried out an EU-funded project that aims to support developing community services for the children's mental health. While the right to access services for

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[5] NICCY, Still Waiting-Implementation NICCY Progress Update Monitoring Report 4, 2023, p. 5.

mental health is guaranteed in Romania by law (as part of the right to medical care), these **services are scarce and unequally distributed** between urban and rural areas.

17. Serbia

According to a UNICEF survey, 21.9% of children reported nervousness at least once a week, 10.8% of school students reported bad mood and 4.1% of the total population showed symptoms of depression. The number of mental health centres and community level service networks is **insufficient**, and **coordination between services is poor or non-existent**. The institutions such as counselling centres, psychiatric hospitals, and daily clinics cope with high number of patients and are not accessible in rural regions. Network of Organisations for Children of Serbia and Pomoc Deci call for reform of mental health system in Serbia to be able to identify mental health issues at an early stage and to provide adequate treatment because delays have long-term consequences for children.

18. Slovenia

Mental health of children and its **inadequate treatment** had been an issue even before Covid-19 pandemic's lockdowns. During the pandemic, SAFY's TOM telephone (national helpline) was the first point of contact for children with mental-health issues. In 2020-21 there has been alarming statistics among young people's mental health, compared to the period 2015-19. 67% increase of mental problems, of which 27% reported depression, and a 3.7-fold increase of suicidal tendencies, which means every 13th call/contact. In 2022, the situation had slightly improved and the most issues children reported to suffer from were misunderstandings and conflicts with peers, family, psychological problems, school, and bullying.

Children themselves, during the Children's Parliament meetings, have identified mental health of children and young people as the central topic of discussions. Even if they voice their problems, there are **several practical obstacles to reaching the help they seek**. For example, there are long waiting lists to get appropriate specialists (e. g. child psychiatrists, clinical psychologists). SAFY points out children's mental health must be prioritised for public policy and investment, because children themselves voice this need so immensely.

19. Spain

Despite an alarming increase in the child population affected by mental health problems, the **necessary support measures are still not being established**. There is a need to implement a 'National Mental Health Policy for Children and Adolescents' by mainstreaming the child-rights approach in the new National Mental Health Strategy and the right to mental health in the new *National Strategic Plan for Children and Adolescents*.

The specialty of Clinical Child and Adolescent Psychology should be created, and all schools should have a psychologist as well as invest in awareness raising programmes.

20. Sweden

Children's mental health is the most common reason for children contacting the BRIS helpline. There are **many shortcomings** regarding children's mental health in Sweden. In a recent national debate featuring several experts on children's mental health, in Sweden's national news media (Dagens Nyheter), BRIS asked for more knowledge on why an increasing number of children in Sweden are dealing with mental health issues.

There are also areas for improvement in the Swedish healthcare system. The waiting list for specialised psychiatric care for children and adolescents (Barnoch ungdomspsykiatrin - BUP) is too long. The initial healthcare professional that children have contact with, often lacks knowledge of child healthcare.

21. Türkiye

Currently, there is **no comprehensive strategy in place** to safeguard the mental health of children. While hospitals do have psychiatrists, psychologists, and social workers, access to these professionals is often limited to families who visit the hospital. Government hospitals, in particular, allocate very brief periods for mental health care, typically around 10-15 minutes.

Private mental health services come with **high costs**, making it challenging for families to access qualified care when a child requires mental health support. Additionally, identifying children in need of mental health assistance is difficult due to the absence of implemented prevention and protection strategies.

22. Wales

The Welsh government published their NEST framework for children's mental health and well-being in 2023. The NEST framework aims to improve mental health and well-being services for babies, children, young people, and their families. **Mental health is a significant issue amongst children in Wales**, aggravated by the Covid-19 pandemic and the cost-of-living crisis. The Children in Wales publication State of Children's Rights in Wales outlines the situation for children regarding mental health and provides eight recommendations for the Welsh government.

These include:

- **Invest in timely, appropriate, and universally accessible early intervention support for all children**, alongside integrated multi-agency community based support services for the 'missing middle'.[6]
- **Publish a new mental health strategy** that fully encompasses the specific needs of all children, including those with protected characteristics and experiencing poverty, and make infant mental health an explicit priority, alongside ensuring that reporting and accountability mechanisms continue to feature strongly.
- **Publish statutory guidance to enable school staff to deliver the mental health duty** as part of the new curriculum.
- Provide **a well-resourced specialist Child and Adolescent Mental Health Services** (CAMHS), accessible at the point of need, with greater accountability through improved performance data collection, and implement consistent rights-based transitional planning arrangements to adult services

Policy Recommendations

Based on the information provided by Eurochild members on children's mental health, here are some practical, rights-based recommendations for addressing the needs and challenges faced by children and their families across European countries. These policy recommendations are grounded in practical insights, enhancing the potential for a real impact in improving the lives of children and their families.

1. **Invest in Early Intervention**: Prioritise funding and resources towards early intervention programs aimed at identifying and addressing mental health issues in children before they escalate.
2. **Expand Access to Services**: Increase the availability of mental health services for children, including reducing waiting times for appointments and improving access to specialists in both urban and rural areas.
3. **Promote Integration and Collaboration**: Encourage collaboration between different sectors such as healthcare, education, and social services to provide holistic support for children's mental health needs.
4. **Promote children's well-being online**: Implement initiatives at national and EU levels to ensure their online safety, promote children's digital literacy and empower them, their parents, and educators with the necessary skills to navigate the online environment safely.
5. **Combat Stigma**: Implement campaigns to reduce stigma surrounding mental health issues, both among children and their families, as well as within society at large. Education and awareness programs can help normalise discussions and perceptions about mental health.

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[6] The 'Missing Middle' refers to the lack of 'intermediate' service options, for children who fall between different levels of support. See *State of Children's Rights in Wales*, p. 53-56. 8 Welsh government, *Consultation on the draft Child Poverty Strategy for Wales, 2023*

6. **Enhance Data Collection and Monitoring**: Improve data collection efforts to better understand the prevalence and trends of mental health issues among children. This data can inform policy decisions and resource allocation.
7. **Strengthen Training and Education**: Provide training and education for healthcare professionals, educators, and parents on recognising, addressing, and supporting children's mental health needs effectively and in a timely manner.
8. **Increase Funding:** Allocate additional financial resources to support mental health services for children, including funding for staff, facilities, and outreach programs.
9. **Empower Children**: Involve children in decision-making processes regarding their mental health care and support, ensuring their voices are heard and their needs are prioritised.
10. **Address Equity and Access**: Implement policies and initiatives aimed at reducing disparities in access to mental health care, particularly for marginalised and vulnerable populations, which are specific to each Member State.
11. **Monitor and Evaluate Progress**: Establish mechanisms for monitoring and evaluating the effectiveness of mental health initiatives and interventions for children, adjusting strategies as needed to ensure positive outcomes.

By implementing these recommendations, mental health care systems can better provide more comprehensive and effective support for the mental well-being of children across European countries.

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