Mental health care for children and adolescents in Europe

Challenges and future perspectives

Lecture by Prof. N. Sartorius,

- The broad socioeconomic context of care for children and adolescents with mental illness
- Factors directly affecting child growth and development
- Problems related to services providing mental health care for youth
- Action which might be useful
- Coda

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The socioeconomic context of care for children and adolescents

- Globalization
- Urbanization
- Decivilization
- Demographic changes
- Changes of the middle class
- Insularization

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Factors directly affecting child growth and development

- Early contacts with children from different cultures (urban or foreign migrants' children)
- Gradual predominance of single child families and siblingless children
- High numbers of single parent households
- Increasing frequency of serial monogamy
- Prolongation of period without responsibility (and shielding from real challenges)

Factors that may be directly affecting child growth and development

- Increasing numbers of children brought up by professional parent substitutes
- Changes of the middle class and the reduction of its preponderance with consequent weakening of support for moral norms

Factors that may be directly affecting child growth and development

- Reduction of time children spent with their (increasingly often single) parents due to organization of work, school and urban life creating bi-cultural families
- Differences in the definition of childhood and adolescence among neighbours in urban settings

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Problems related to services providing mental health care for youth

- Commoditification
- Fragmentation of medicine
- Changes of medical ethics, e.g.
 - The duty to live is being replaced by the right to die
 - Priority shift from the most complex to the easiest to treat cases
 - Inappropriate task shifting and community care

Problems related to services providing mental health care for youth

- Discontinuity of care from child to adolescent services and from those to services for adults partly due to independent growth and establishment of services
- Continuing uncertainty about primary responsibility for child health (Pediatrics? Child psychiatry? Family physicians? Parents? Schools? Social services? Religious institutions?)

Problems related to services providing mental health care to youth

- Primary prevention of mental disorders e.g.
 - iodine supplementation
 - perinatal mental health care
 - sensory deficit correction
 - general health checks
 - preparation of parenting

is rarely accepted as a primary responsibility of Child and Adolescent Mental health Services (CAMS)

Problems related to services providing mental health care to youth

- Lack of consensus about
 - the relative importance of interventions to promote child and adolescent health
 - The best distribution of tasks and responsibility for service interventions
 - Criteria for the evaluation of CAMS
 - The importance of basing action on evidence based medicine

Problems related to services providing mental health care to youth

- Many groups of children at high risk are not given attention in CAMS plans (e.g. children of prisoners, of the mentally ill, school dropouts, severly physically ill children,)
- Federal independence and bureaucratic (and payment) obstacles make data about child mental health and illness unreliable

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Action which might be useful

- Do the obvious with more vigour e.g.
 - Review legislation and rules relevant to child mental health
 - Do the possible and speak about it
 - Engage political leaders whose children are in CAM care
 - Educate in harmony with social structures

Action which might be useful

- Develop consensus on tasks that are essential for child health and development and scenarios for their accomplishment in different settings and conditions
- Learn skills of advocacy
- Reserve and use substantial amount of time for advocacy of action promoting child and adolescent health

Coda

 In his paper Child psychiatry: looking 30 years ahead Michael Rutter said

«The future depends on what we do in the years to come. To a large extent we can shape what happens....»

This was true in 1986. It is still true today.