Response and comments on the Green Paper by Prof. J. TSIANTIS, President of UEMS CAP Section, Prof. G. KOLAITIS, Athens University Medical School, and Dr E. SOUMAKIS, Vice President ESCAP, representing the Hellenic Society of Child and Adolescent Psychiatry (HSCAP)

INTRODUCTION

We consider that the initiative to produce the Green Paper and the messages given by it is important for all EU countries, as the policy objectives covered include the life span approach covering health, social welfare, quality of life and economic aspects.

Secondly, it can be used as a starting point to formulate support for collaboration between different European countries under the active participation and collaboration of EU and WHO. It also emphasizes that actions to promote mental health and to prevent illness should be evidence-based if they are available.

The issue of serious mental illness has been identified as a challenge and the issue of fighting against stigma and promoting social integration and respect of the rights of the patients and their families.

However, we would like to stress from the beginning that the issue of mental health of young babies and their mothers, children and adolescents has not been sufficiently addressed. Similarly it seems that the focus is on the burden of mental disorders than on mental health promotion and prevention as well as on the maintenance of good health.

CURRENT SITUATION FOR CHILDREN AND ADOLESCENTS IN EUROPE

We should take into consideration the current trends of the social and economic climate in Europe, recent social changes especially in European countries in the state of transition, characterised at least in some of them by migration of populations, stress imposed in families and children which may lead in disorganization of the family cohesion, thus creating increasing forms of violence such as bullying at schools, suicide and attempted suicide, adolescent pregnancies, conduct disorders and dropping out of school, substance and/or alcohol use, sexual exploitation and new forms of violence such as cyberbullying.

At the same time there are not adequate mental health promotion and prevention programs starting from very early as well as other health education and adequate services to meet these needs.

MENTAL HEALTH SERVICES

We consider it very important to have adequately developed community mental health services for all ages; these services are integrated in the community, have with adequate in number and well trained staff working as multidisciplinary teams, have the necessary funds and are integrated in primary health care.

It is equally important to develop community mental health services for the whole life span which will ensure comprehensiveness and continuity in care, especially for the severe mentally ill persons.

There is also a need for monitoring and evaluation of the existing services in terms of quality of care and quality assurance.

The approach of «balanced care» as it is suggested in the WHO paper (by Thornicroft and Tansella) should be treated with caution as it might become an obstacle in the planning and development of community care by preventing the social integration of people with mental illness especially those who are severely ill.

Regarding the existing services we need to have information from the policy makers and administrators. We here refer to a country survey on services and training (Levav et al 2004). One of the main findings in this survey was the existing differences across EE in the organization and delivery and quality of care. Different countries have different systems and organization of care ad training of child mental health professionals and allied professions. In the above survey it was also found that this was related to the gross national product.

TRAINING

Upgrading, harmonization and support of the training of child psychiatrists, and other mental health professionals working in multi-disciplinary teams, the development of academic posts on child psychiatry within medical schools and universities would also enhance the quality of training, research and development of child mental health services.

It should be mentioned that EUMS CAP Section has produced a log book on training of child psychiatrists, as well as psychotherapy guidelines (available on request to the UEMS Board and CAP Section Secretary Prof Georg Spiel: <u>georg.spiel@kabeg.at</u>, Georg.Spiel@lkh-klu.at).

MENTAL HEALTH PREVENTION, PROMOTION AND EARLY INTERVENTION

This is a crucial issue regarding the mental health of young people as it could have an impact on them not only currently but also in their future adult years, affecting their quality of life, psychosocial integration, employment etc.

Mental health prevention, promotion and early intervention programs should start from early years of life, enhancing baby mother bonding and attachment, looking after nursery school and kindergarden years right through to adolescence and young adult years. Empowerment and support of parenthood is an important aspect for enhancing the readiness of future parents to have children.

Mental Health Europe has undertaken the coordination of a series of projects which completed with the publication of three Directories containing a wide range of preventive initiatives collected by the national partners («Mental Health Promotion for Children up to 6 Years», 2000, «Mental Health Promotion of Adolescents and Young people», 2001 and «Mental Health Promotion and Prevention Strategies for Coping with Anxiety, Depression and Stress related disorders in Europe», 2003).

Another example of collecting evidence-based information in the area of promotion and prevention is a recent publication on successful prevention and youth development programs «Across Borders» by Laura Ferrer-Redder (2004), sponsored by the Swedish National Board of Care, Centre for Evaluation of Social Services and Swedish National Board of Institutional Care.

Special emphasis should be given to specific vulnerable populations eg immigrants, refugees, poor children, those affected by local wars, pregnant adolescents and those with sexually transmitted diseases, sexually and physically abused children, as well as children with parents who are mentally or somatically ill. In addition, it should be mentioned that very little is written on intellectual disabilities and especially for young ages; to this end a special project has currently been implemented in Europe, regarding the rights of people with intellectual disabilities and their access to education and employment (OSI/EU, 2006).

Existing models of mental health promotion and prevention programs should be evaluated, communicated to different EU countries and authorities and funded.

Preventive actions/programs should be integrated if possible in the primary health care system; there should also be a functional liaison between centers as well as coordination.

SOCIAL INCLUSION AND RIGHTS OF CHILDREN AND ADOLESCENTS

It seems as if there are increasingly more cases of violation of the rights of children and adolescents in different ways within their own families, in school settings, in society ie child trafficking, sexual exploitation, pornography, through media (TV, internet and generally cyberbullying). The role of the media should be discussed as they could become supporters and allies for children's rights instead of undermining these rights.

Due to increasing percentages of divorces and intrafamilial /violence, quite often children become engaged in their parents' conflicts and court fights which might lead to their rights being violated. The judisticial systems across Europe are different depending on several factors including cultural (ref. Detrick Sharon Law for juveniles: Equality in Justice, European Forum For Child Welfare 2001 – 2002).

Special policies and measures should be developed to prevent and to care for the children and adolescents by educating the public and children/adolescents themselves. At the same time effective measures should be taken to protect individuals involving collaboration with professionals in new technology and computer science and the legal framework.

In several countries independent authorities and organizations exist for the monitoring and protection of children's rights and it seems that these bodies could play a role in safeguarding the righta and needs of children and adolescents.

CONSUMERS AND THEIR FAMILIES

The group of users/consumers and their families should be seen as partners and collaborators of mental health professionals, policy makers and administrators, health planners and should be consulted in the development of appropriate policies, laws regarding the rights of the patients.

Similarly, NGOs as they frequently represent consumers have played and play a substantial role, as indicated by the experience in several countries, in care planning and the development of services.

In conclusion, the following steps/measures should be taken:

- investment in development of community services, collaboration with primary health care and staff training
- development of mental health prevention and promotion
- the gap between research and clinical practice should be bridged
- decrease stigmatization
- help NGOs with funding
- the need for monitoring TV and internet use.

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J. Tsiantis, Department of Child Psychiatry, Athens University Medical School "Ag.Sophia", Thivon & Levadeias Street, 115 27 Athens, GREECE, Tel: +30 210 7473811, E-mail: itsianti@cc.uoa.gr May 12th, 2006

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