



INTERNATIONAL CONFERENCE

“PREVENTION OF MENTAL DISORDERS AND PROMOTION OF MENTAL HEALTH VALUES AMONG CHILDREN AND ADOLESCENTS IN THE EDUCATIONAL SETTING”

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Introduction

The mental health of children and adolescents is a crucial indicator of the well-being of the state, the nation’s spiritual and moral development, and its future social and economic status. The children’s and adolescents’ health agenda is becoming especially important due to the swift pace of life, enormous information loads, and the current global economic and political crisis.

From birth, onwards a child should be able to enjoy an environment required for fulfilling their potential at each stage of their development. This includes awakening a child’s interest in learning about the world around them. In this regard, education stands out as a determining factor required for the development, wellbeing and mental health of the growing generation.

In parallel over the last decade public health data provides evidence of a steady increasing trend of mental disorders among children and adolescents. The WHO epidemiological surveys state: “Worldwide 10-20% of children and adolescents experience mental disorders. Half of all mental illnesses begin by the age of 14 and three-quarters by mid-20s”ⁱ

Similarly, as reported by the Human Brain Institute of the Russian Academy of Sciences, mental health problems are seen in 15% of children, 25% of adolescents and up to 40% of army recruits in Russiaⁱⁱ.

As established in a US epidemiological study, 75% of all mental problems develop by the 25th year of age while 40% of mental disorders start before the age of 15.ⁱⁱⁱ The global burden of children’s diseases, including behavioral and

emotional disorders, mental development disturbances, and attention deficit/hyperactivity prevail over other health problems in children under 10^{iv}.

Mental Health Disorders impair the children's and young people's current functioning but also have longer term and often serious consequences. In turn depressive disorders are strongly associated with suicide in young people. According to the WPA figures those most susceptible to suicide are aged 15 to 19, with suicide being the second largest cause of death in adolescents in many countries.^v

Many surveys show that non-chemical dependencies also are a highly relevant problem of teenagers, including primarily the Internet, and social media sites. As per the American Anorexia and Bulimia Association, anorexia nervosa affects annually up to 1 000 000 women the USA, although there may be even more undetected cases. Given this, there is a clear relationship between disease incidence and age, with 95% of the cases being girls and young women aged 12 to 25. The alarming data has been published in recent years about the eating disorder "rejuvenation", starting at 6 to 7 years of age and raising the disease risk with every year of life^{vi}.

Currently adolescent aggression is also topping the agenda in Russia including discourse on a range of antisocial adolescent behaviors, such as public order violations, hooliganism and vandalism. Recent studies of disruptive behaviors in children and adolescents have shown that 50% to 70% of delinquent young people suffered with mental health problems and disorders. Another crucial driver of adolescent disruptive behavior are adverse family circumstances including domestic violence. For instance a traumatized child may show aggression towards other people a lot more often than children who have not been exposed to adversity^{vii}.

Family problems and adversity are strongly associated with mental health difficulties in young people. The profile of the nuclear family is changing with many more reconstituted and 'blended' families. Divorce rates are high in many countries. Children feel abandoned, lack emotional care by adults and end up feeling lonely and irrelevant. Internal distress may predispose to physical and mental disorders and their continuity into adulthood.

The current rate of recognition of neuro - developmental disabilities is growing i.e. 4.5% to 11%, including primarily autism spectrum disorders (Kanner's and Asperger's syndromes), learning disabilities, infantile cerebral paralysis sequela, Down's syndrome and the others^{viii}. Such disorders require comprehensive approaches in specialized care settings, including special education, training, and psychosocial rehabilitation (psycho-orthopedics).

The recognition and identification of mental health disorders and difficulties in children and adolescents have led to a better understanding of the magnitude of the burden of disease and the need for raising public awareness and developing resources including teaching and training of mental health professionals. This implies the need for destigmatisation and training of both professionals (general practitioners, pediatricians, child and adolescent psychiatrists, clinical and educational psychologists, special educational needs teachers and primary mental health workers) and the psychological education of parents and relatives in the public and those whose children and adolescents present with mental health difficulties.

The need for raising awareness of mental health issues and training can only be tackled at an inter-disciplinary level, with inter-agency and inter-sector coordination, involving both professionals and non-professionals, volunteers and NGOs. This level of collaboration and work at the interfaces will inevitably put the need for training and skills development at top of the list of the re-organization of mental health services for children and adolescents.

Goals and Objectives

Goals:

- Tackling stigma and improving attitudes to mental illness
- Developing comprehensive approaches to improving knowledge and skills of mental health disorders in professional groups
- Promoting mental health values among children and adolescents.

Objectives:

- To set up a platform for sharing experiences in developing educational policy in the field of mental health care for children and adolescents.
- To present the evidence base of the best relevant academic and practical achievements in the fields of prevention of mental disorders and promotion of mental health values among children and adolescents.
- To develop guidelines for improved training in child and adolescent mental health services.

Thematic Fields

Thematic Field 1. Public Policy for Children's and Adolescents' Mental Disorders Prevention and Promotion of Mental Health Values in the Educational Setting.

National and regional prevention education programmes. Education in law and mental health care regulation. Inter-disciplinary and inter-sector approaches to education and training in mental health services. Improved public awareness of mental health care for children and adolescents. Information security and psychological safety. Health saving and mental health disorders prevention. Promotion of mental health values and the healthy lifestyle mindset. Basic notions and mental disorders prevention principles in children's and adolescents' environments. Community monitoring of mental health status in children's and adolescents' environments. Effectiveness of regional mental health strategies and legislation. Prevention medicine in mental health. Public regulation for the mental health care system. Interagency action for mental disorders prevention among children and adolescents. Assessment of prevention cost effectiveness. Public and non-governmental financing of mental health care programmes for children and adolescents. Coordinating agencies and management frameworks for interagency mental health care programmes. Mental health care institutional models.

Thematic Field 2. Teaching and Training in Mental Health Disorders in Children and Adolescents and Prevention

Children's mental health and pregnancy pathology prevention. Family mental health; teaching and training for children's and adolescents' mental health promotion. Family: a pathogenic and rehabilitative driver of children's and adolescents' mental health. Family psychoeducation. Role of family in mental health promotion and emotional wellbeing of children and adolescents. Role of mother and father in child development. Dysfunctional and disharmonic families. Families with children with mental health problems and learning disability. Psychological support for family is the basis of a healthy nation. Normal and abnormal mental development in childhood and adolescence. Artificial acceleration: risk for mental health and development in children. Information-based socialization and related risks. Mass media and the Internet, and their impact on personality development. Escapism and flight from reality; computer-related, game and other dependencies. Pubertal crisis and mental health. Adolescent stresses. Psychopathologic syndromes in adolescents. Psychoactive substance use and non-chemical dependencies in adolescents. Drug abuse prevention. Aggressive and suicidal behavior. In-school bullying and coping strategies. Deviant and delinquent behavior

prevention. Mental health and schooling. Physical exercises and sport: impact on mental health in children and adolescents. Inclusive education. Quality of life of children and adolescents with mental problems. Social and cultural rehabilitation for children with mental problems.

Thematic Field 3. Educational Tools for Promotion of Children's and Adolescents' Mental Health Values

National, international, regional and municipal education programmes in the field of promotion of mental health values among children and adolescents. Approaches to education in mental health care at kindergartens, schools, general and vocational education colleges, and universities. Educational approaches and techniques. Role of mass media in mental health promotion among children and adolescents. Education agents in mental health for children and adolescents. Capacity building and education for educators in the field of promotion of mental health values among children and adolescents. Improved public awareness in the promotion of mental health values among children and adolescents. Proven educational programme models. Educational programme efficiency evaluation.

ⁱ http://www.who.int/mental_health/maternal-child/child_adolescent/en/

ⁱⁱ Davydova N. S., MD, Dyachenko E.V., PhD (Medicine), Associate Professor, Ufimtseva M. A., PhD (Medicine), Moskvina E.V., Samoilenko N. V., Nikolaeva K. I., the Ural State Medical University, Special Educational Institution for Learners with Deviant (Socially Dangerous) Behaviour, Yekaterinburg, Russian Federation// PSYCHO-EMOTIONAL WELL-BEING OF CHILDREN IN DIFFICULT SITUATIONS, AND ITS ROLE IN MEDICAL AND PREVENTIVE WORK. Collection of scientific papers of the I Congress on Mental Health: Meeting the Needs of the XXI Century. -M., 2016.-p.37

ⁱⁱⁱ Milavić G., Dr., MD, F.R.C. Psych//NATIONAL MENTAL HEALTH PREVENTION AND SERVICE MODELS FOR CHILDREN & ADOLESCENTS. Collection of scientific papers of the I Congress on Mental Health: Meeting the Needs of the XXI Century.-M., 2016.-p.58-60

^{iv} Milavić G., Dr., MD, F.R.C. Psych//NATIONAL MENTAL HEALTH PREVENTION AND SERVICE MODELS FOR CHILDREN & ADOLESCENTS. Collection of scientific papers of the I Congress on Mental Health: Meeting the Needs of the XXI Century.-M., 2016.-p.58-60

^v Vikhristyuk O.V., PhD (Psychology), Bannikov G. S., MD, PhD (Medicine), Moscow State University of Psychology and Education// PROPHYLAXIS OF SUICIDAL BEHAVIOUR OF TEENAGERS IN THE EDUCATIONAL SYSTEM OF THE CITY OF MOSCOW. Collection of scientific papers of the I Congress on Mental Health: Meeting the Needs of the XXI Century.-M., 2016.-p.30-31

^{vi} Kholmogorova A. B., Psy.D., Moscow State University of Psychology and Education//MENTAL HEALTH OF CHILDREN AND YOUTH IN THE AGE OF INFORMATION REVOLUTION. Collection of scientific papers of the I Congress on Mental Health: Meeting the Needs of the XXI Century.-M., 2016.-p.98-100

^{vii} Oshevsky D. S., PhD (Psychology), Serbsky Federal Medical Research Centre of Psychiatry and Narcology, Moscow State University of Psychology and Education//RISK FACTORS FOR DELINQUENT BEHAVIOUR AMONG JUVENILES WITH MENTAL DISORDERS. Collection of scientific papers of the I Congress on Mental Health: Meeting the Needs of the XXI Century.-M., 2016.-p.67-69

^{viii} V.I.Borodin, E.V.Makushkin, S.V.Danilova, E.A.Panchenko Post-diploma education in psychiatry: current conditions and perspectives//Psychiatry. – 2016. – № 17

References

1. Kessler RC, Amminger GP, Aguilar-Gaxiola S, et al. (2007)Age of onset of mental disorders: a review of recent literature. *Curr Opin Psychiatry* 20, 359-64

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2. Kessler RC, Berglund P, Demler O, et al. (2005) Life-time prevalence and age-of-onset distributions of DSM –IV disorders in the National Comorbidity Survey Replication, *Arch Gen Psych*, 62:593-602
 3. Jaffee SR, Harrington H, Cohen P, Moffitt TE (2005). Cumulative prevalence of psychiatric disorder in youths. *Journal of the American Academy of Child and Adolescent Psychiatry* 44(5): 406-407.
 4. Murray C, Vos, T, Lozano, R et al. (2012) Disability adjusted life years (DALYs) for 291 diseases and injuries in 21 regions, 1990- 2010: a systemic analysis for the Global Burden of disease study 2010, *Lancet* 380:2917-223
 5. Insel, T R. (2014) Mental Disorders in Childhood: shifting the focus from behavioural symptoms to neurodevelopmental trajectories *JAMA*; 311:1727-8
 6. Kieling C, Baker-Henningham H, Belfer M, et al. (2011) Child and Adolescent Mental Health Worldwide : evidence for action, *Lancet*; 378:1515-25
 7. Collins PY, Patel, V, Joestl SS, et al. Grand Challenges in global mental health. (2011) *Nature* 475:27-30
 8. Joint Commissioning Panel for Mental Health (2013) <http://www.jcpmh.info/wp-content/uploads/jcpmh-publicmentalhealth-guide.pdf>
 9. Green H, McGinnity A, Meltzer H, et al (2005). Mental health of children and young people in Great Britain, 2004. London: Office of National Statistics.
 10. Meltzer H, Harrington R, Goodman R et al (2001) Children and adolescents who try to harm, hurt or kill themselves. A report of further analysis from the national survey of the mental health of children and adolescents in Great Britain in 1999. ONS.
 11. Fergusson DM, Horwood LJ, Ridder EM (2005). Show me the child at seven: the consequences of conduct problems in childhood for psychosocial functioning in adulthood. *Journal of Child Psychology* 46: 837-849.
 12. Sainsbury Centre for Mental Health (2009) The chance of a life time: preventing early conduct problems and reducing crime.London :SCMH
 13. Knapp M, McDaid D, Parsonage M Eds (2011) Mental health promotion and mental illness prevention: the economic case. Department of Health.
 14. Beecham J, Baingana F, Bonin E et al. (2010) School -based universal violence prevention programmes. PSSRU, London School of Economics and Political Science. Unpublished paper for the Department of Health, referenced in Joint Commissioning Panel for Mental Health (2013) <http://www.jcpmh.info/wp-content/uploads/jcpmh-publicmentalhealth-guide.pdf>