

11th Policy Forum of the Education For Inclusive Societies project

Engaging Learners: Fostering Inclusion Through Wellbeing

and Mental Health Support

March 14th 2024

YOUTH MENTAL HEALTH: INTEGRATING MENTAL HEALTH CARE, EDUCATION AND SOCIAL POLICIES

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Youth mental health: integrating mental health care, education and social policies – a roadmap for today

A New Benchmark for Mental Health Systems

Principles and policies that contribute to children/youth mental health

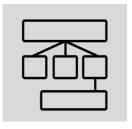
Integrated and Multi-sectoral care

An approach long-time championed by the OECD

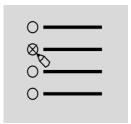
What else is next?

Additional progress and projects to follow





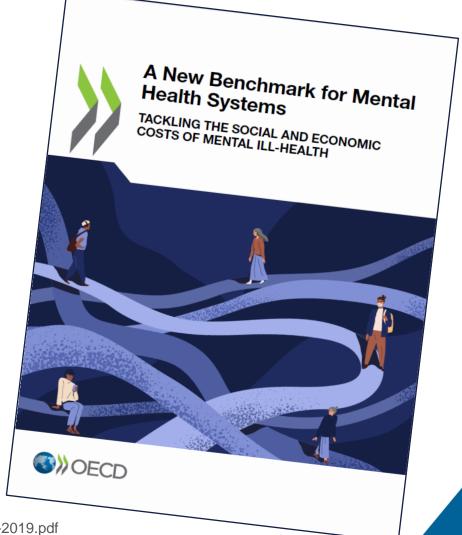
1. Development of an OECD Mental Health Performance Framework



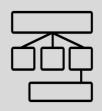
2. Collection of measures to understand performance in each domain of the OECD framework



3. Identifying promising policies to improve performance







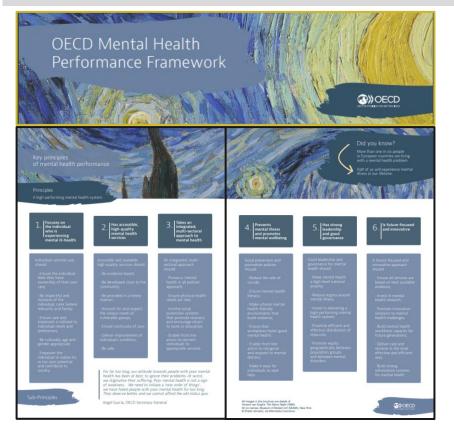
1. Development of an OECD Mental Health Performance Framework







1. Development of an OECD Mental Health Performance Framework



A high performing mental health system...



Focuses on the person who is experiencing mental ill-health



Prevents mental illness and **promotes** mental wellbeing



Has accessible, highquality mental health services



Has **strong leadership** and **good governance**



Takes an **integrated**, **multi-sectoral** approach



Is **future-focused** and **innovative**









two expert consultations

international data scan

extensive literature review Policy Questionnaire and Data Questionnaire



2. Collection of measures to understand performance in each domain of the OECD framework

Existing international data – OECD.Stat, WHO Mortality Database, WHO Atlas

New indicators – Policy Questionnaire and Data Questionnaire sent to all OECD countries

Work with international surveys – EHIS, Commonwealth Fund Survey

Identifying gaps where int'l data isn't available – telehealth, stigma





Principle 1. Focuses on the individual who is experiencing mental

2. Collection of measures to understand performance in each domain of the OECD framework

Table 1.1. OECD Mental Health System Performance Benchmark - Principles 1 and 2: Person-centred, high quality and accessible services

			ill-health																	
Developed in	 individual ownership of care - respectful of user, carer, family - treatment tailored to individual's wishes, age, gender, culture - empowers the individual 				evidence-based - community-based - timely - accounts for needs of subsensible community-ordinal relationship of case - debens inconvenient - Table 1.2. OECD Mental Health System Performance Benchmark – Principles 3 and 4: Integrated and multi-sectoral, prioritises pre									ritises prevention	n and					
Benchmarking Indicators		ns in mental vice involve1:	Patient- reported	People with a mental health problem who	Unmet needs for mental health care due to	Repeat admissions to inpatient care [3 or more	promotion													
	Service User	Carer or Representative	outcomes - OECD PROM Pilot	reported being treated with courtesy and respect by doctors and nurses during hospitalisation [%] ²⁻³	financial, wait times, or transport [%]*	times in 1 year, %]*			n integrated, multi-sectoral ves social protection syste indiv	ms • pron		m to work	or educat					• ensure mental health I Table 1.3. OE(d promotes mental well-being literacy - mental health friend CD Mental Health novation and susta	dly System
OECD	22	20	_	80.6%	67.20%	12.11%	Benchmarking	Rate of higher	Employment rate of		Mental	health tra	ining is pr	ovided to t	front line a	ctors1	Life Satisfactio	prioritiese iiii	ovacion and odds.	
Australia	V			84%			Indicators	education (ISCED	those with mental	_							(Average score		Pr	rinciple 5. I
Austria	V	✓			56.70%			three educational groups) of those with	distress to those without other				60				OECD Better Li Index ⁴		• make mental health	
Belgium	V	✓				4.80%		mental distress to	disabilities or mental		*		Doctors			50	index.		invest in mental h	
Canada	V	✓		78%		12.80%		those without other	distress [Value of		nt Staff		Ž			8				raphically,
Chile								disabilities or mental	100 means that		lle ll	40	ill ill	eut		8		Benchmarking	Spending on mental	Levels
Colombia								distress [Value of	people with mental	1 26	bart	edic	2	l fe	.8	12 12		Indicator	health as % of total	
Costa Rica								100 means that	distress are equally	, s	l õ	Lau	offone	ie Depar	Police	ant S			government health	Natio
Czech Republic					59.70%			people with mental	likely to be employed	-	ergency	90	100	<u>e</u>		James 1			spending 1 2	regi
Denmark	· ·	√			75.80%	34.50%		distress are equally	as those without]3		8		- E			de .				attitud stigma
Estonia	· ·	V			50 500/			likely have higher			in in		Ja de			l e				sugma
Finland				89%	59.50%			education as those					Ø			-				
France	-			76%	66.00% 73.50%		0500	without]3	79.8	40	21	45	23	18	19	45				
Germany	-	_		/ 1070	70.00%		OECD Australia	78.7	79.8	19	21	16	23	18	19	16	7.2 7.6	OECD	6.7%	2
Greece	· ·	· ·			70.60%		Austria	74.9	76.2	-	-	1	1	-	· /	· ·	8.0	Australia	7.6%	
Hungary	-	_			70.60%			71.0	78.0	· /	· /	· /	V	1	V /	· ·	7.6	Austria		
Iceland Ireland	· ·	· ·			84.30%		Belgium	81.9	85.4	· /	· /	٧.	· ·	V .	· /	٧.	8.1	Belgium		
Israel	· ·	-			04.3070	12.30%	Canada Chile	65.4	81.1	·			· ·	· ·	*	· ·	0.1	Canada	10.6%	
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							Czech Republic	79.7	87.4		V	-	V		V	· ·	7.4	Czech Republic	4.0%	
							Denmark	83.3	73.8		· ·		V	V	V	V	8.0	Denmark		
							Estonia	84.6	84.4	·	V	V	V	V	V	· ·	7.0	Estonia	2.9%	

Principle 2. Accessible, high-quality mental health services

or receive mental measurements promotes mental meals friendly

all

Table 4.2 OECD Montal Month Control People Control People Montal Month Month Montal Month Mont

Table 1.3. OECD Mental Health System Performance Benchmark – Principles 5 and 6: Mental health leadership and governance that prioritises innovation and sustainability

	Pr	inciple 5. Has strong	Principle 6. A future-focused and innovative approach services based on best available evidence • invest in research • promote innovative solutions • build a sustainable workforce • good mental health data •								
		a high-level nationa ealth • efficient and aphically, between									
Benchmarking Indicator	Spending on mental health as % of total		a attitudes towards mental health	National strategy for key population	Use of telemedicine in mental health services –		rce capac populatio		Availability of mental health indicators 1 4		
	government health spending 1 2	National or regional attitudes or stigma survey ¹	Attitudes towards mental health – indicator not internationally available	groups – one or more ¹	indicator not internationally available	Psychiatrists	Psychologists	Mental Health Nurses	National Mental Health Data Set	OECD HCQO Mental Health Indicators	
OECD	6.7%	22		19		0.18	0.53	0.52	19	22	
Australia	7.6%	1	-	✓		0.17	1.03	0.91	1		
Austria		✓	-	✓	_	0.18	1.18		1		
Belgium			-	✓	-	0.17	0.10	1.26	✓	1	
Canada	10.6%	✓	-	✓		0.18	0.49	0.69	1	1	
Chile	2.1%			✓		0.10				1	
Colombia		1			-						
Costa Rica											
Czech Republic	4.0%	1	-	✓		0.15	0.03	0.31	1	1	
Denmark		✓		✓		0.19	1.62		1	1	
Estonia	2.9%				-	0.19	0.06	0.23			
Finland	5.6%				_	0.24	1.09			1	
France	15.0%		-			0.23	0.49	0.98			
Germany	11.3%					0.27	0.50				
Greece	3.9%			✓	-	0.26	0.09	0.13	1		
Hungary					_	0.15	0.02	0.34			
Iceland	5.7%	1		✓		0.21	1.37	0.00	1	V	
Ireland	6.0%	1				0.19			1		



3. Identifying promising policies to improve performance

WHICH PRINCIPLES AND POLICIES WERE IDENTIFIED FOR CHILDREN AND YOUTH MENTAL HEALTH?

- Children and young people should be key focus for promoting good mental health and preventing mental illness (principle 4)
- Early intervention techniques can effectively target adolescents or young adults (principle 2)
- More efforts are needed to support young people with mental health during critical moments in their education or transition to work (principle 3)
- Individual-centred mental health services should be **culturally, age and gender** appropriate (principle 1)
- Youth peer-led interventions have become increasingly popular and can be an important driver for embedding a person-centred care approach (principle 1)



Integrated and Multi-sectoral care

OECD Mental Health System Performance Framework

1. Focuses on the individual who is experiencing mental ill-health

Individual-centred care should:

- Ensure the individual feels they have ownership of their own care;
- Be respectful and inclusive of the individual, carer (where relevant), and family:
- Ensure care and treatment is tailored to individual needs and preferences;
- Be culturally, age and gender appropriate;
- Empower the individual to realise his or her own potential and contribute to society.

2. Has accessible, high-quality mental health services

Accessible and available high-quality services should:

- Be evidence based;
- Be developed close to the community;
- · Be provided in a timely manner;
- Account for and respect the unique needs of vulnerable groups;
- Ensure continuity of care;
- Deliver improvement of individual's condition;
- Be safe.

3. Takes an integrated, multisectoral approach to mental health

An integrated, multi-sectoral approach should:

- Pursue a 'mental health in all policies' approach;
- Ensure physical needs are met;
- Involve social protection systems and encourage return to work or education;
- Enable front line actors to connect individuals to appropriate services.

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4. Prevents mental illness and promotes mental well-being

Good prevention and promotion policies should:

- · Reduce the rate of suicide;
- · Ensure mental health literacy:
- Make schools mental health-friendly environments that build resilience;
- Ensure that workplaces foster good mental health:
- Enable front line actors to recognise and respond to mental distress;
- Make it easy for individuals to seek help.

5. Has strong leadership and good governance

Good leadership and governance for mental health should:

- Make mental health a high-level national priority;
- Reduce stigma around mental illness;
- Invest in delivering a highperforming mental health system;
- Prioritise efficient and effective distribution of resources;
- Promote equity geographically, between population groups, and between mental disorders.

6. Is future-focused and innovative

A future-focused and innovative approach should:

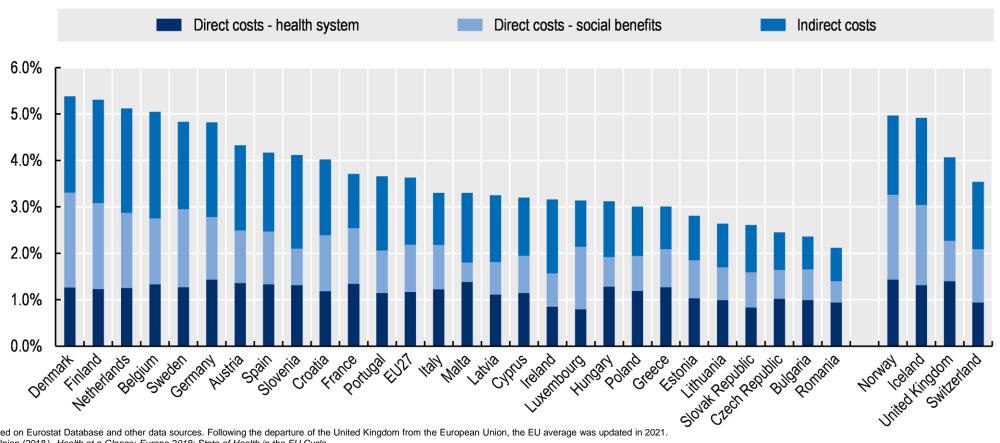
- Ensure all services are based on based available evidence:
- Invest in mental health research;
- Promote innovative solutions to mental health challenges:
- Build mental health workforce capacity for future generations;
- Deliver care and services in the most effective and efficient way:
- Build strong information systems for mental health.



Integrated and Multi-sectoral care: makes good economic sense

Estimated direct and indirect costs related to mental health problems across European countries

As a percentage of GDP, 2015



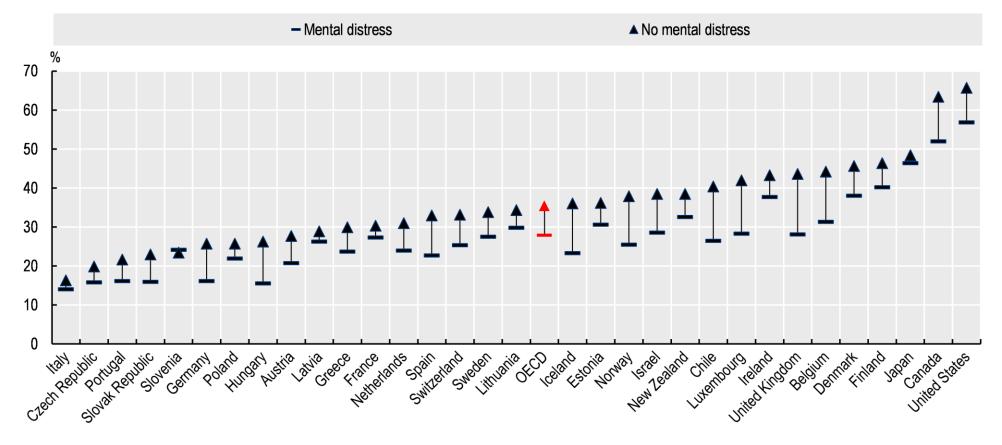
Note: OECD estimates based on Eurostat Database and other data sources. Following the departure of the United Kingdom from the European Union, the EU average was updated in 2021 Source: OECD/European Union (2018), Health at a Glance: Europe 2018: State of Health in the EU Cycle, https://doi.org/10.1787/health_glance_eur-2018-en.



Integrated and Multi-sectoral care: encourage return to work or school

Persons with mental health conditions are less likely to complete a high-level education

Share of working age individuals with an education at ISCED 5 or higher, by mental health status, mid-2010s





Integrated Mental Health, Skills and Work Policy

2012: Sick on the Job? Mental Health and Work

Outlines link between mental health, education and labour market

2015: Fit Mind, Fit Job - From Evidence to Practice High-Level Policy Forum on Mental Health and Work

Identifies transformation needed in health, education and employment policy

2016: Recommendation of the Council on Integrated Mental Health, Skills and Work Policy

2021: Fitter Mind, Fitter Jobs - From awareness to change in integrated mental health, skills and work policies

Summarises steps taken by OECD countries in the past five years towards implementing the Council Recommendation.

2026: 10-year review of the Council Recommendation implementation





Integrated Mental Health, Skills and Work Policy

Council Recommendation sets out policy principles for better support for individuals with mental health conditions and a

3-way transformation across 4 policy fields:

- 1. Supporting young people through education and support
- 2. Developing an employment-oriented health system
- 3. Improving workplace policies to promote mental health
- 4. Making the **welfare system** fit for individuals with mental health issues





What is good policy to support young people?

- Monitor and improve the overall school and preschool climate to promote socialemotional learning, mental health and wellbeing and the prevention of mental stress, bullying and aggression at school
- Improve the awareness among education professionals and the families of students,
 of mental health conditions young people may experience
- Promote timely access to co-ordinated, non-stigmatising support for children and youth living with mental health conditions or social-emotional problems
- Invest in the prevention of early school leaving at all ages and support for school leavers living with mental health conditions
- Provide non-stigmatising support for the transition from school to higher education and work for students living with mental health conditions



Fitter Mind, Fitter Jobs

From awareness to change in integrated mental health, skills and work policies

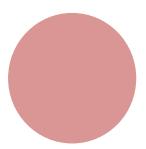
UNEVEN PROGRESS DURING THE FIRST 5 YEARS



Youth support systems show most progress and are prioritised by many OECD countries (focus on prevention, mental health competence, low-threshold support, early school leaving



Health care systems (via technology and mental health competence) and workplace policies (via psychosocial risk assessment) show mixed progress

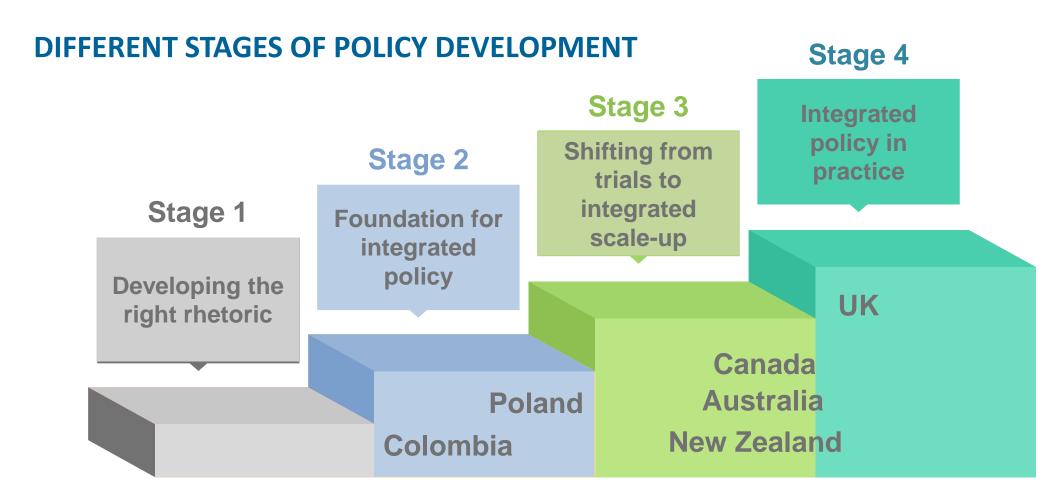


Social protection systems and **welfare policies** lag behind in implementing integrated practices (e.g. no focus on mild-to-moderate mental health conditions)



Fitter Mind, Fitter Jobs

From awareness to change in integrated mental health, skills and work policies



NB. Empirically observable stages, not a requirement or recommendation for policy change)

YOUTH SUPPORT SYSTEMS AND EDUCATION POLICIES SHOW SIGNIFICANT PROGRESS

- Timely intervention to prevent mental ill-health is a priority in schools
- Efforts to increase mental health competence of teachers and educators are widespread
- Preventing early school leaving is being prioritised in several OECD countries
- Low-threshold and non-stigmatising mental health support for children and young people
- Scaling up mental health supports for young people in the school-to-work transition



Recommendation of the Council on Creating Better Opportunities for Young People



Mental Health and the 21st Century Megatrends

Digitalisation, Inequalities, Demographic Transformation, Climate Change

Best practices and public policy evaluation and modelling

Best practices on children and youth mental health and modelling of health and economics impacts of school-based mental health policies



OECD 2018



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- A New Benchmark for Mental Health Systems
- Fitter Minds, Fitter Jobs From Awareness to Change in Integrated Mental Health, Skills and Work Policies
- Tackling the mental health impact of the COVID-19 crisis: An integrated, whole-of-society response
- Supporting young people's mental health through the COVID-19 crisis
- Establishing standards for assessing patient-reported outcomes and experiences of mental health care in OECD countries