

Global Youth Mental Health Crisis (10 – 25 years) – A commentary on the report of the Lancet Psychiatry Commission on Youth Mental Health from a German perspective

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Global Youth Mental Health Crisis

Two thirds to three quarters of all forms of mental illness manifest themselves by the age of 25. In contrast to somatic medicine, the phase of emerging adulthood (*Emerging adulthood, Arnett*) is the high-risk phase in which key decisions are made and which ultimately also determines later physical health and, not least, mortality. At this stage in life, mental illnesses are responsible for at least 45% of the overall economic burden of disease. Mental disorders are the main cause of disabilities (in Germany so-called "seelische Behinderung" (mental disabilities) according to §35 a SGB VIII for children and adolescents and according to §2 SGB IX for adults). Youth Welfare therefore is an important player when it comes to public health approaches, prevention as well as long-term care in Germany

Like many others, including the European Commission, the European Council and the European Parliament, the authors of the Lancet Psychiatry Commission¹ describe a Youth Mental Health Crisis, emphasising that a clearly perceptible deterioration has occurred in many countries where we have reasonable epidemiological data, namely over the last 20 years, and not just since Corona.

Development of Youth Mental Health in Germany

This cannot necessarily be maintained for Germany, as in the regular Child and Adolescent Health Survey (KiGGS survey), the frequency of emotional and behavioural problems in the overall population actually slightly decreased. In the end, the data showed that less than 1/5 of all young people suffered from such symptoms. Anxiety, depression and many other problems then also increased massively in Germany during Corona. At the latest since then, this led to increased utilisation and also a structural overload of the system.

A comparison of various European long-term studies that collected data on psychological stress regarding anxiety and depression before the coronavirus pandemic and with the same instruments after the pandemic (Ludwig-Walz et al. 2022 + 2023^{2,3}) showed a correlative relationship between the symptoms and the rigidity of the pandemic measures.

In this context, it is completely incomprehensible how German health politics, instead of investing more in comprehensible long-term data on the mental health of children and adolescents in the sense of preparedness, is abolishing the Child and Adolescent Health Survey (KiGGS) essentially during the course of a natural experiment - if the corona phase can be

described as such - and thus sending us all flying blind. Despite all understanding for the necessity of a reform of prevention research and prevention support in Germany (significantly stronger prevention activities in the area of mental health in children and adolescents and evidence-based research are also called for by the authors of the Lancet Psychiatry Commission), this self-damaging disruption in the necessary monitoring of the long-term burden of mental health problems in Germany must be avoided at all costs.

The authors of the Lancet paper say that we may now have the last chance to prevent a fatal tipping point. If we want to use metaphors from the climate sector, the German approach to the epidemiological recording of children's and adolescents' mental health means nothing other than the termination of the measurements. In German we have a saying "Was ich nicht weiß, macht mich nicht heiß" which literally translates to „What I don't know doesn't make me hot.“ (i.e. What you don't know won't hurt you.). To stay with the climate image though, the heat rises whether you measure it or not. The question is simply whether health policy still sees a place for itself in the driver's seat here or whether it is deliberately choosing to no longer look. Already when the national cohort (NAKO) was conceived in Germany, it was accepted that everything that happens in childhood and adolescence is not primarily relevant, and this cohort was only started in adulthood. And now we are astonished to see the retrospective findings on early childhood stress in the NAKO and realise how strongly this influences later health development, not only psychologically, but also in somatic health.

The Lancet Psychiatry Commission refers to global political, socio-economic and structural megatrends, such as: Inequality - especially intergenerational inequality - unequal distribution and transmission of wealth, violence in all its forms, marginalisation of groups, displacement due to wars, conflicts and climate impacts, as well as the countless changes brought about by digitalisation with risks and opportunities, etc. In particular, young people on their way to adulthood find themselves in an orientation phase and are therefore particularly sensitive to prevailing societal conflicts. The US Surgeon General states that these current crises are associated with foreseeable harmful effects on the mental health of this generation and that action must be taken.

In this respect, it is a positive sign at state level in Baden-Württemberg that the Ministry of Science in Baden-Württemberg intends to fund a Public Child Mental Health (PCMH) competence centre in a network between the University of Ulm and the Central Institute for Mental Health in Mannheim and to provide corresponding professorships for these public health topics in the field of mental health. We need to think beyond patient care and look for integrated solutions: From prevention to aftercare, in order to better deal with the described megatrends and current new crises and challenges in the sense of a 'rapid response' and, above all, in the sense of 'preparedness'.

Digitalisation and social media play a key role in two directions. Mental health problems often do not require treatment at the outset, but they need to be understood and overcome. We therefore need more "mental health literacy", i.e. more knowledge about mental problems and mental health and how we can provide support in our own social environment. The more mental health problems become entrenched and chronic, the more they become illnesses requiring treatment and the less chance there is of minimising their psychosocial consequences.

Addressing the Crisis

The Lancet Commission describes four levels of healthcare in the area of mental health in the transition age: 1. on the basis of regional, community-based care (including digital mental health platforms), so-called primary care. Building on this, secondary care and finally specialised tertiary care in clinics, which is actually particularly well developed in Germany compared to other European countries. However, this highly specialised tertiary sector cannot and should not be scaled accordingly in order to address the significantly increased need for support and advice. In Germany, it would be much more important to make formal and informal services at local authority level, mostly in the area of independent youth welfare organisations, more accessible and to link them more closely with digital services and offers in the healthcare sector.

School-based approaches and school social work also need to be better integrated. However, before any intervention, prevention is key which the Lancet Psychiatry Commission also notes. This must address the harmful megatrends and therefore also include political decisions for children and young people in our society to grow up in a mentally healthy way. Selective prevention aimed at risk settings such as child abuse and other early childhood stresses, peer victimisation and bullying and substance use can more easily demonstrate effectiveness than universal prevention measures, such as mindfulness exercises at school. However, this is more due to the methodological measurement difficulties. In Germany, we therefore urgently need to think about how we can provide more support for learning self-regulation in kindergarten, school and adolescence in order to create the individual and social conditions for learning as well as the acquisition of social skills for constructively living together.

A major problem in relatively rich countries such as Germany is the existence of pillarized support systems that are not coordinated and interconnected in stages and therefore do not work together effectively, but instead exist in parallel. In addition, modern approaches with digital technology are not yet integrated into the highly qualified settings of clinical intervention. This means that where we treat to the highest standards according to guidelines, the new technological developments have hardly found their way in. While at the same time there is a low-threshold variety of more or less non-curated health information and programmes available on the Internet that young people can access.

Following a consultation process, the WHO recently adopted so-called guiding principles on online mental health content for young people⁴. We need to adapt these for the European and German context and derive a digitalisation movement in the highly professional field of specialised intervention from them. At the same time, we need to promote the professionalisation and ultimately regulation of the uncontrolled and sometimes dangerous proliferation of offers and information on mental health for children and young people on the Internet.

A central problem is also the shortage of skilled specialists, because a Youth Mental Health reform worthy of the name requires skilled professionals from many disciplines who are well trained, not only in the health professions, but also in many other psychosocial areas. In principle, the existing healthcare systems need to be critically scrutinised and rethought.

Investment in the mental health of young people must be cross-sectoral and should cover the entire transition age.

Recommendations: Prevention and political action

In summary, the Lancet Psychiatry Commission concludes that two central political imperatives can be derived from its analysis: prevention, and in particular the behaviour and structural prevention, which address critical megatrends, must be massively strengthened and the approaches must be scientifically substantiated. For us in Germany, too, well meant is not well done. For the prevention of violence in schools alone, there are whole folders full of individual well-intentioned projects, but the number of well-evaluated approaches is very small and such approaches are not offered locally, including for example regarding self-regulation.

In the view of the Lancet Psychiatry Commission, the second goal must be to make mental health care for young people a central political objective in all countries of the world. However, it is hereby important not to further increase the stigma caused by mental health problems or even stigmatise entire generations. In Germany, we are familiar with terms such as "Generation Corona" and read many articles about the particularly lazy, particularly frequently ill "Generation Z" etc.. There is no need to berate those who already have a burdened development. We need positive examples and a framework that makes it clear that dealing with problems and finding one's own path is a human issue and has always been a central challenge for young people.

I was surprised that the Lancet Psychiatry Commission, which summarises numerous scientific findings, also takes this up and points out the significance of hero myths, myths of growing up, which are told in all cultures of the world and follow a general pattern. Joseph Campbell and his book "The hero with a thousand faces"⁵, which was first published in 1949, are explicitly quoted. Based on sources such as C.G. Jung's theory of archetypes, he worked out the central elements of a hero myth: The call, the departure into adventure, the encounter with one or more mentors, the finding of companions of the same age, the first trials, the decisive battle and finally the return to life.

This pattern has also influenced filmmakers such as George Lucas (Star Wars) and directors such as Stanley Kubrick and Steven Spielberg also refer to Campbell's book. We need more successful "heroic stories" about how individuals successfully dealt with these challenges, even though it was difficult for a while, they had massive fears, they doubted the meaning of life, etc. So-called "high profile society champions and political influencers" could serve as examples, because a change in society is needed. Corporations are currently spending huge amounts of money on placing influencers in the media as role models, e.g. for appearance, thereby further increasing the pressure that young people already put on themselves. What would be important here is a counter-reality disseminated in the same media, with the same means, that encourages individual development.

The time to act is now

To summarise, the Lancet Psychiatry Commission warns that now may be the last possible time to rethink and act proactively worldwide. In this respect, the right to mental health or the right to grow up mentally healthy is not only a human rights issue, but in Germany, for

example, the specific issue of children's rights to development and developmental support. Following the coronavirus pandemic, the National Ethics Council in Germany has described this as a question of intergenerational justice. The way the coronavirus pandemic was handled and the fact that the legitimate interests of young people were largely disregarded makes the demand for children's rights in the constitution even more urgent, namely as rights to promote development and as a prerequisite for free personal fulfilment.

I recently pointed this out in an essay in the German newspaper Frankfurter Allgemeine under the headline "Zeitenwende auf Kosten der Kinder"⁶ (The turn of an era at the expense of children). As the Scientific Advisory Council on Family Issues called for during the coronavirus pandemic, we must finally "move away from the watering can" principle. We need targeted and effective support for young people in problematic situations and we must address the key political issues of the future through a cross-departmental political agenda for the future.

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