E-Youth Project Policy Recommendations

Training: Empowering Youth Individuals with Fewer Opportunities Towards Citizenship

Background

According to the World Health Organisation (WHO), mental health is a state of mental well-being that enables people to cope with the stresses of life, realize their abilities, learn well and work well, and contribute to their community[1]. Mental health is an integral part of health and a basic human right. Good mental health is also crucial to personal, community and socio-economic development.

The COVID-19 outbreak and polycrises such as the rising cost of living, among others, have shed light on mental health, with the result of widespread awareness and an increased value given to mental health by individuals, communities, and governments. Such unprecedented situations have also highlighted the frailness of the health and social protection systems across the European Union as well as the emergence of increased persons in vulnerable situations. As such, groups in already vulnerable situations have been at increased risk of being subject to non-human rights-compliant practices due to the lack of effective support and services. This includes the lack of tailored support such as community-based services and frontline professionals' lack of resources and skills. There is a grave need to ensure standards align with human rights, including the UN Convention on the Rights of Persons with Disabilities (UN CRPD), as well as support for all relevant actors to ensure this is implemented.

Children and young people are among the groups more at risk of marginalisation and most impacted by socio-economic determinants of health and overall well-being.[2] Recent developments at European level have ensured concrete action on mental health and recognise the need to take extra measures to support the mental health of people in vulnerable situations, including young people. The European Commission's Communication on a comprehensive approach to mental health[3], the European Parliament INI report on Mental Health,[4] the advancement of the Spanish and the Belgium Presidency and the Opinion of the

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[1] WHO, 'Mental Health', available at: https://www.who.int/health-topics/mental-health#tab=tab_1

[2] Mental Health Europe, Young People & Mental Health, available at: https://www.mhe-sme.org/wp-content/uploads/2019/08/Young-People-and-Mental-Health-Infographic.pdf

[3] European Commission, 'A comprehensive approach to mental health', available at: https://commission.europa.eu/strategy-and-policy/priorities-2019-2024/promoting-our-european-way-life/european-health-union/comprehensive-approach-mental-health_en

[4] European Parliament, 'Report on mental health' available at: https://www.europarl.europa.eu/doceo/document/A-9-2023-0367_EN.html

EESC on Measures to Improve Mental Health[5] show inter-institutional commitment in the ambition to put mental health at par with physical health and leave nobody behind.

Before 2020, about one-third of 16–29-year-olds were at risk of poverty and social exclusion. At the same time, access to adequate housing has been increasingly challenging for young people, leaving them at a high risk of homelessness. This situation has worsened over the past years, as opportunities for adequate employment and education have decreased. Young people experiencing social exclusion are less likely to thrive in school and realise their full potential. All of this is leaving young people in front of an uphill path and placing them at elevated risk of experiencing mental health problems throughout their life course.

The incidence of mental health problems among people aged between 15 and 24 has doubled in most European countries during the COVID-19 pandemic.[6] Young people have been 30% to 80% more likely to experience depression, anxiety and loneliness than adults.[7] Furthermore, the pandemic has had a huge impact on the mental health of youth experiencing marginalisation, further enhancing exclusion, stigmatisation and restricting their access to healthcare.

Unmet needs of persons requiring complex support can also place strain on their families and wider communities. This can result in a general decline in (mental) health protective factors and an increase in risk factors. Moreover, where ill-equipped frontline professionals are unable to provide adequate and tailored support, this hampers the motivation and well-being of professionals, young people, families, and the wider community. Increased responsibilities without adequate support mechanisms can take a toll on professionals leading to feelings of being mistreated by the system, difficult work environment, additional stress, burnout, and future professionals being deterred from entering the profession. In an ever-changing society, promoting social inclusion of young persons with disabilities with complex needs and with fewer opportunities (NEETs) to ensure their human rights are respected, is needed now more than ever.

Therefore, now is the time to match this value with commitment, engagement, and investment by all stakeholders, across all sectors. Key priorities of action for the E-Youth Project include:
● addressing the unmet needs of persons with fewer opportunities and persons with disabilities in multiple aspects of their lives as well as increasing their employability and social inclusion.
● supporting the identity building and citizenship of persons with fewer opportunities and persons with disabilities.
● upgrading the quality of life and promoting the social inclusion of young persons with disabilities with complex needs and with fewer opportunities (NEETs) to ensure their human rights are respected.

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[5] EESC, 'Measures to improve mental health' available at, https://www.eesc.europa.eu/en/our-work/opinions-information-reports/opinions/measures-improve-mental-health

[6] European Parliament 'Mental health in the EU - European Parliament', available at:
https://www.europarl.europa.eu/RegData/etudes/BRIE/2023/751416/EPRS_BRI(2023)751416_EN.pdf

[7] WHO, 'Mental health, social inclusion and young people aged 18–29 in the WHO European Region', available at: https://www.who.int/docs/librariesprovider2/default-document-library/rapidevidencesynthesisdraft-for-consultation_final.pdf

Recommendations

System change to support persons with fewer opportunities requires joint action to ensure adequate **prevention** of social exclusion and associated negative outcomes such as mental health problems, meaningful **empowerment** and active **engagement** of professionals, young people and broader communities in decisions impacting them and ensuring tailored support is provided at every stage of life.

Nevertheless, the vast differences between countries from a cultural, social, and political perspective must be considered to understand the reflection of concerns, issues, and solutions presented by each partner country: Spain, Belgium, Denmark, France and Slovenia.

Professionals

Holistic support:

➢ Better coordinate different community-based services through an integrated approach (mental health services, social services, health services, educational systems, workplaces, etc.) to provide tailored support to children and young people at every stage of life. Special attention should be given to transitionary periods, such as young people moving from adolescence into young adulthood.

➢ Apply a whole-school approach to raise the quality and mental health standards across the entire school.

➢ Invest in school professionals with expertise in relevant fields (e.g. mental health and special education) that will be focal points, to support staff and ensure young people receive tailored support in school and outside school hours, including referral to other services when needed.

➢ Mainstream mental health in all policies and consider the needs of frontline professionals, children, their families and wider communities when developing policies. A holistic, (mental) health in all policies approach can promote good health, prevent health issues, and ultimately lower stigma and discrimination and create resilient communities.

➢ Develop or upscale multi-stakeholder local and/or national policy forums to consider suitable policies and to develop initiatives to influence locally or nationally identified challenges impacting persons in vulnerable situations. Depending on the specific action to be co-created, these fora could bring together people with lived experience, alongside experts by profession, such as local government representatives, social and health care professionals, educational professionals, service providers and the media.

➢ Introduce programmes to connect different initiatives focusing on supporting vulnerable young people at all levels, to encourage collaboration and sharing of experiences, rather than reinventing the wheel.

Skills & resources

➢ Develop communication and social skills of professionals to establish an individualised person-centred approach. This includes enhancing interpersonal, digital, communication, and critical thinking skills, which are highly valued in improving the communication process between professionals and young people.

- Ensure human rights education for future frontline professionals[8] is structured around a human rights-based approach so they are adequately equipped to prevent foreseeable issues, carry out early intervention, promote healthy habits resources, and provide person-centred support and referrals for users who may need them.
- Recognise the importance of professional education based on practice training over traditional models focused solely on theoretical content. Shape the curricula to transfer quantitative knowledge and information to allow for more qualitative interaction which will promote relationships between professions, children, young people and their families.
- Invest in training on meaningful support for young people through co-creation, which ensures respect for the human rights of individuals and fosters equal partnership, self-determination and agency.
- Promote a working culture that fosters dialogue and opportunities for professionals to improve the quality of care and support. Frameworks should be created to enable professionals to self-reflect on areas of improvement (at an individual and structural level). For example, providing platforms for professionals to share learnings and best practices.
- Recognise children as agents of change and ensure they are centred in co-creation. Enable meaningful participation of civil society organisations and children themselves.
- Conducting awareness campaigns, especially targeting professionals working with children and young people, to challenge preconceived negative stereotypes and break such negative values within society, including conscious or unconscious bias.
- Address gaps in human and material resources, especially in educational institutions and healthcare settings which have a collateral effect on the services provided. Due to limited capacity, frontline professionals, such as teachers, cannot provide adequate attention to students with special educational needs, which hampers the motivation and well-being of both students and teachers.
- Consider the mental health and well-being of frontline professionals, who are often overburdened due to professional demands. Ensure measures are implemented to address concerns, especially issues requiring structural changes.
- Ensure resources and tools available to frontline professionals are distributed equally to avoid fragmented services and leaving rural areas unprotected.

- Introduce flexible financing systems to aid achieve a holistic multisectoral approach to health.

Young People

Holistic support (implement a holistic approach to mental health by):
- Implement multisectoral and community-based approaches to reduce vulnerabilities and address the unmet needs of persons with fewer opportunities and persons with disabilities.
- Bring care and support services closer to young people who cannot access them and consider intersecting barriers preventing accessibility. For example, implementing or

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[8] Frontline professionals here refer to professionals who work with young people are individuals in various roles who directly interact with and support children, adolescents, and young adults. These professionals often provide essential services in education, healthcare, social services, mental health, and law enforcement. Their work is crucial in fostering the development, well-being, and safety of young people.

upgrading mobile/outreach services could address geographical barriers, especially for youth residing in rural areas.

➢ Provide tailored support based on the proportionate universalism approach to address the specific needs of the youth throughout the life cycle, including during transition periods. Some groups are particularly at risk of experiencing poor mental health, because they live in vulnerable situations or because of intersectional discrimination. The links between these identity markers or socio-economic conditions and mental health must be taken into consideration to develop preventive measures and tailored support.

➢ Invest in peer support to help transform health systems, cater for specific needs and provide person-centred support. Peer involvement is vital for transforming health and social protection systems, as people with lived experience bring understanding, resilience, and trust to services. Peer support can help individuals to achieve and maintain wellness, and to navigate the social and mental health system more efficiently. Depending on the context, peer involvement may take many forms, from peer-support specialists to independent peer-run services.

Increasing (mental) health literacy & addressing stigma

➢ Develop or support comprehensive awareness-raising campaigns on human rights, to address mental health stigma and discrimination. Negative perceptions of society regarding young people can have a significant impact on the deterioration of their self-conception and their possibilities, limiting themselves and being limited in the process.

➢ Bring community-based support closer to settings which young people occupy e.g. schools.

➢ Embed mental health promotion in schools through the adoption of innovative and holistic organisational models and approaches within school ecosystems and educational programmes, including in vocational education (VET).

➢ Ensure (mental) health and social sector services engage and collaborate in a practical and meaningful way, to provide integrated community-based care and support.

Funding:

➢ Make mental health support affordable and accessible to all young people, including the most vulnerable among youth.

➢ Recognise and support the essential role of youth organisations in providing support, information and services to young people regarding their mental health and wellbeing.

➢ Ensure budgets and projects dedicated to youth or community-based organisations consider the specific nature and operational realities of youth-led initiatives and organisations and ensure funding is flexible accessible and sustainable.

Promote social inclusion:

➢ Ensure access to affordable public transportation and cultural activities.

➢ Reduce social isolation and loneliness by improving infrastructure (e.g., transport, digital inclusion), by funding innovative approaches which create cultures of belonging and build stronger social connections, as well as through laws and policies, (addressing, for instance, ageism, inequality and the digital divide).

➢ Social inclusion initiatives should expand reach to people of all ages, and invest in intergenerational connection.

➢ Provide social protection schemes for households in vulnerable situations, debt recovery and financial hardship support. Ensure access to safe, affordable, long-term and quality housing, as a major protective factor for people's mental health.

- ➢ Intervene with evidence-based methods to minimize the consequences of stressful and traumatic events in childhood and families.
- ➢ Strengthen prevention and response mechanisms to support families in vulnerable situations e.g. domestic violence and abuse.

Families (& broader communities)

Communities have a substantial role in people's mental health. They can provide people with a sense of belonging, act as a powerful source of support, offer a feeling of purpose, and enable societal changes that are needed to achieve good mental well-being.

The involvement of social, family and community networks to which an individual belongs is a well-recognised approach to efficiently promoting mental health, preventing mental health problems and designing tailored mental health solutions. This allows for an individual to draw on existing and build new support structures, family relationships and ties to the community, rather than relying on institutional support. This can lead the person to feel they have control over difficult situations, with the right support. Moreover, communities have a central role in preventing and tackling mental health stigma. Today, community-based services are considered a backbone of rights-based services that should promote holistic recovery approaches and the right to legal capacity, informed consent, participation, and community inclusion. Many are renowned for being human rights compliant, accessible, affordable and of high quality. Intrinsically, community care can succeed in maintaining family relationships, friendships, and employment based on the person's preferences while receiving mental health care or social support.

Support for community-based actors and services:
- ➢ Prioritise deinstitutionalisation, from institutions to community-based care to guarantee personalised care that fosters better integration, support, and outcomes, leading to improved overall mental health and well-being.
- ➢ Establish enabling environments for community providers. For instance, governments should make resources (i.e., funds and spaces) available to community-based initiatives that can activate and strengthen helpful community support for people with mental health problems.
- ➢ Equip community actors with skills and understanding of mental health and its broader determinants, for instance by providing training to decision-makers, social care and health professionals.
- ➢ Invest in digital literacy among the population, especially people in vulnerable situations (e.g., children and young people), including awareness about appropriate digital use and risks, to stay safe online.
- ➢ Funds should solely be directed to (the transition towards) community-based and recovery-oriented services.

Support for families:
- ➢ Prioritise and ensure targeted support to children from families in need.
- ➢ Implement work-life balance policies that provide caregivers with the time and resources they need to implement their role in a way that supports the mental well-being of those they care for and thrive. For instance, generous parental leave can

mitigate and prevent mental health problems among parents, with a snowball effect on children's well-being.

➢ Ensure the provision of interventions to support caregivers (in childcare and long-term care) in their role, specifically their caregiving and mental health knowledge, attitudes, skills and practices.

➢ Provide training on (mental) health literacy. Ensure training and resources are available in languages spoken by community members.

➢ Recognise and support the essential role of community and youth organisations in providing support, information, and services to young people regarding their mental health and well-being. For example, closing gaps through cultural mediators.

➢ Invest in intergenerational work to foster dialogue between age groups and aid in breaking the stigma and promoting cohesion between families and within communities.

Co-creation:

➢ Ensure collaboration between frontline professionals, institutions (e.g. schools) and broader (families, social and health) networks of support and community actors to warrant smoother referral pathways and the best outcomes possible.