



# **I.O.1: A STUDY ON MENTAL HEALTH IN YOUTH**



**2023**



# INDEX

Introduction	2
<hr/>	
Project Summary	3
<hr/>	
Methodology of the Research	5
<hr/>	
Overview of Mental Health	6
<hr/>	
BEFORE the impact of COVID 19.....	13
AFTER the impact of COVID 19.....	20
Needs Analysis	35
<hr/>	
Professional Help.....	35
Initiatives, programmes or projects that support the youth's mental health.....	42
Entities, organisations and associations that support the youth's mental health.....	47
Survey Questionnaire findings	50
<hr/>	
Artistic Methodologies for mental health	55
<hr/>	
Conclusion	66
<hr/>	

# Introduction

This study was the first Intellectual Output of the project **MINDful Theatre**, *I.O.1: A study on mental health in youth*. The study has been elaborated based on the compilation of information gathered from a desk-based research carried out by the partner entities of the project.

In this study you will find:

- An analysis of the current mental health status in Spain, Italy and Sweden.
- A detailed examination of the impact that the COVID-19 pandemic has had on our mental health, with a particular focus on the youth's mental health.
- An assessment of the current needs of young people, offering a close look into the available professional help, psychological services and therapy opportunities in the 3 countries.
- A compilation of initiatives, programmes and projects in the 3 countries that offer support to the youth's mental health.
- A directory of entities, organisations and associations in the 3 countries that actively contribute to the well-being of young individuals.
- A description of the artistic methodologies employed by the Partner Organisations, defending their use to promote the youth's well-being and mental health.
- The results of a survey questionnaire about mental health, disseminated among young people from the 3 countries.

The study is available for everyone in English, Spanish, Italian and Swedish.

# Project Summary

**MINDful Theatre** is a 2-year KA2 project, funded by the Erasmus+ programme. It was initiated by ON&OFF, the coordinating entity, after recognizing the profound impact the pandemic has had on mental health, particularly among young people. The primary objective of this project is to enhance the way young individuals engage with mental health by leveraging non-formal artistic education. Through MINDful Theatre, we aim to foster a more positive and informed mindset towards mental well-being among young people by means of non-formal artistic education.

## Specific objectives:

- To identify the needs of European young people when it comes to mental health
- To explore the existing initiatives, programmes, projects, entities, organisations and associations that support the youth's mental health in the 3 partnered countries
- To develop a programme of activities that initiate an open conversation with young people about their mental health and delve into the issues that concern them
- To offer pedagogical tools in non-formal youth work through different approaches
- To challenge the societal barriers, taboos and stigmas associated with mental illness
- To use theatre and art as catalysts for social action, advocating for the inclusion and integration of young people with mental illnesses while also raising awareness on the topic
- To give young Europeans a voice

The project has 3 Partner Organisations: **Asociación Juvenil Teatral ON&OFF** - Coordinator (Spain), **Calypso** (Italy) and **Caprifolen Voltige Klubb** (Sweden).

MINDful Theatre is set to produce 4 Intellectual Outputs throughout its 2 year development:

- **I.O.1: A study on mental health in youth**, to analyse the impact that the COVID-19 pandemic has had on our mental health, as well as to identify the current needs of young people.
- **I.O.2: Handbook** of sessions, activities and workshops that, through an artistic methodology, initiate an open conversation with the youth about their mental health.
- **I.O.3: Educational Videos** of the sessions previously developed, in order to make them more accessible for youth workers. The videos will include instructions, tips and guidelines for youth workers to implement the workshops with a group of young people.
- **I.O.4: FESTIVAL**, in which 3 groups of young people will perform 3 dramatic pieces about mental health.

## Identity of the Project

The project is co-funded by the EU Programme: Erasmus+ Key Action: Cooperation partnerships in youth.

Number of reference of the project:

**2022-1-ES02-KA220-YOU-000085923**

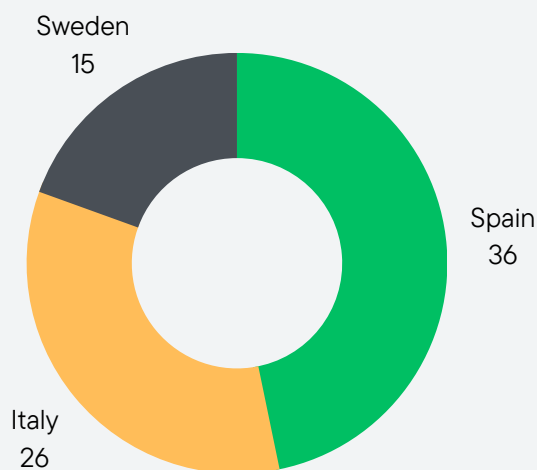


# Methodology of the Research

This study presents the findings of a desk-based research and the results from a survey questionnaire disseminated among young people from Spain, Italy and Sweden. The research was conducted by all the partners between January and May 2023.

The desk-based research involved the summary, collation and synthesis of existing data. The purpose of the desk-based research was to identify the current situation of mental health in the 3 partnered countries, with a focus on the youth's mental health, the impact of COVID-19 and the professional help provision.

The survey questionnaire engaged 77 people from the 3 partnered countries:



The survey respondents' age ranged from 13 and 42 years old.

The questionnaire was created with the tool Google Forms and was hosted in the cloud storage of the Coordinator. The partners distributed the questionnaire to young people in their networks.

It aimed to capture the attitudes of young people toward mental health, the professional help provision and efficiency in their countries and their specific needs for their well-being.

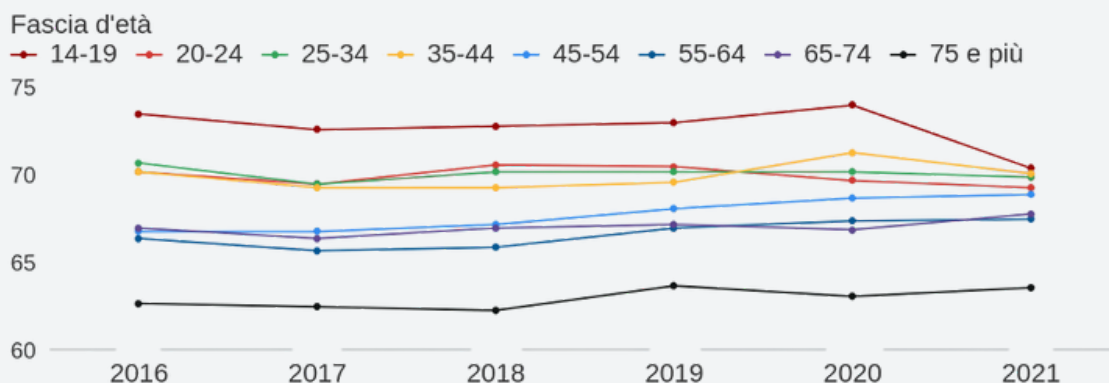
# Overview of Mental Health

There has been growing concern about youth mental health in our society over recent years. Numerous factors have significantly impacted the well being of young individuals.

And unfortunately, things have only worsened due to the COVID 19 pandemic. In order to effectively address these challenges it is essential that we grasp the current state of youth mental health. Here is an overview of each partnered country's mental health situation.

## Italy

In Italy, there has been a noticeable rise in the prevalence of mental health suffering over the past decade as described, for example, in this chart describing four dimensions of mental health: anxiety, depression, loss of control of behavioural and emotional reactions, and psychological well being. These indicators provide valuable insights into the overall mental health landscape in Italy and highlights the increasing burden experienced by individuals in these areas.





This overview is consistent with some of the findings extrapolated from the Global Burden of Disease (GBD) study “Gore et al. described for the first time the global burden of disease and the associated risk factors in young people aged 10-24 years using data from the 2004 Global Burden of Disease (GBD) Study. Their findings indicated that **neuropsychiatric disorders were the main cause of burden in high-income countries**. Moreover, self-harm was the first most common cause of injury related death among adolescents in many European countries in 2013, indicating the importance of early detection and effective management of mental health and substance use disorders as part of suicide strategies.”<sup>1</sup>

The right of young people to feel protected and benefit from a healthy psycho neural and socio economic development is guaranteed both by the UN Convention on childhood and adolescence, as well as by the Italian Constitution that states in article 32 that health is one of the fundamental rights of the individual and of the collectivity<sup>2</sup>. In Italy, as well as in other European countries, with and without the pandemic, we have experienced a confirmation of the fact that minors are more exposed and more at risk, based also on indicators of cultural background, their personality, the changes in the environment, and their perception of traumatic events<sup>3</sup>.

Already in 2017 and 2018 in Italy, **one in five adolescents** declared to suffer from a symptom of mental health disorder leading to a series of cultural and economic phenomena that interfered with their overall development. Because *“adolescence is a crucial period for brain development, the onset of risk-taking behaviours, and mental health problems [3]. Although prevention of depression and other psychiatric disorders is a key point in preventive medicine strategies, the underlying causal pathway that leads to the onset of mental health*

---

<sup>1</sup> Simone Amendola, *Burden of mental health and substance use disorders among Italian young people aged 10-24 years: results from the Global Burden of Disease 2019 Study*, January 2022, Social Psychiatry and psychiatric Epidemiology

<sup>2</sup> *Pandemia, neurosviluppo e salute mentale di bambini e ragazzi*. Documento di studio e di proposte. Autorità Garante per l'Infanzia e l'Adolescenza. Maggio 2022

<sup>3</sup> Istituto Superiore di Sanità. **Interim indications for the appropriate support of the children/adolescents' mental health during the pandemic COVID-19. Version of May 31, 2020.** ISS Working Group Mental Health and Emergency COVID-19 2020, 38 p. Rapporto ISS COVID-19 n. 43/2020

*problems among adolescents is complex and involves the interplay of several factors such as family history of depression, exposure to psychosocial stress, developmental factors, sex hormones, and psychosocial adversities”<sup>4</sup>.*

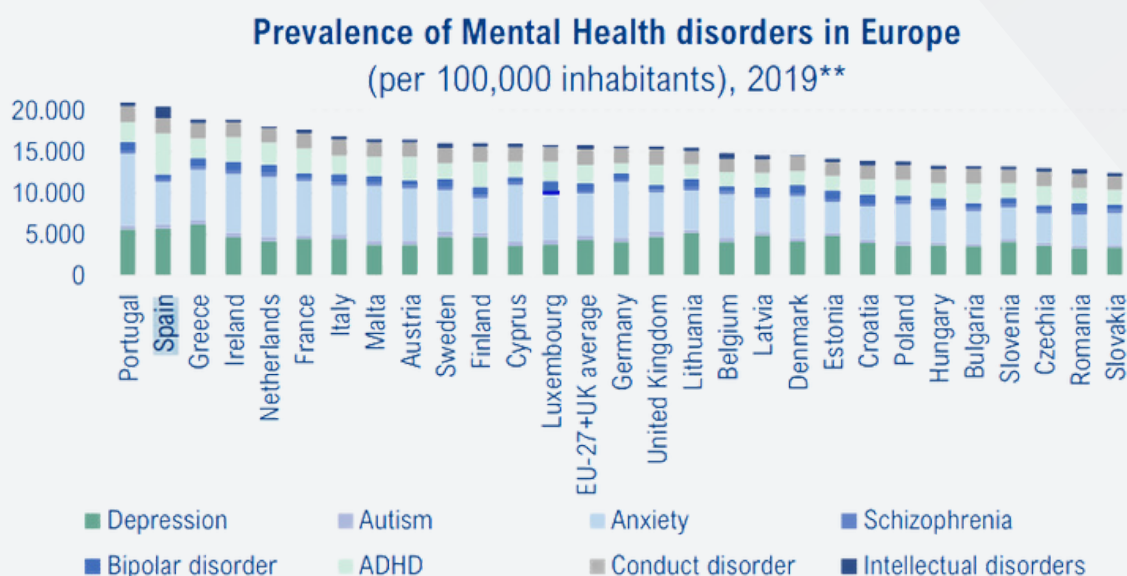
With the onset of the pandemic this complexity has become even more difficult to quantify but it has generated a closer attention to the issue of mental health for children and adolescents. Ahead of the realisation that even before the pandemic **almost one million youngsters** in Italy exhibited symptoms of mental health (such as alcohol and drugs consumption, depression, anxiety and eating disorders) scientists have tried to provide a greater attention to the issue and especially with the onset of the pandemic there has been a flourishing of studies that have looked into the behavioural responses and help requests from young people and the factors influencing their wellbeing. Although the statistical methods, the geographical regions and the samples differ we will present a series of studies that fundamentally agree upon the fact that children and adolescents have and are suffering from mental health issues and that those issues are dependant on internal and external factors and that we can try to investigate their impact through the analysis of indicators as: mental wellbeing, drug consumption behaviour, daily routine behaviour, sleep routine, screen time and digital exposure, social media usage and so on. These studies have their shortcomings but they do paint a picture and that is that mental health for children and young adolescents in Italy is a problem and it seems to be on the rise and thus requires adequate responses from legislature, private and third sector and citizens.

---

<sup>4</sup> Francesco Donato, Maria Triassi, Ilaria Loperto, Alessia Maccaro, Sara Mentasti, Federica Crivillaro, Antonella Elvetico, Elia Croce, Elena Raffetti, *Symptoms of mental health problems among Italian adolescents in 2017–2018 school year: a multicenter cross-sectional study*  
<https://environhealthprevmed.biomedcentral.com/articles/10.1186/s12199-021-00988-4>

## Spain

"Headway Mental Health 2022"<sup>5</sup>, a publication that delves into mental health issues across countries in Europe, ranks Spain as the second country in Europe with the highest prevalence of mental health disorders, right below Portugal. Both countries stand out as being exceptional with an occurrence rate exceeding a significant threshold of above 20%.



(\*) Dlouhy, Martin, "Mental Health policy in Eastern Europe: a comparative analysis of seven Mental Health systems", 2014. (\*\*) For ADHD, conducts disorders and intellectual disorders, the prevalence among <20 years old is considered.

In Spain, according to the Annual Report of the National Health System 2020 - 2021<sup>6</sup>, 29% of the population suffers from some Mental Health disorder. The recorded prevalence of mental disorders is 286.7 cases per 1,000 inhabitants, higher in women than in men.

<sup>5</sup> Headway - Mental Health Index 2.0: A new roadmap in Mental Health [https://eventi.ambrosetti.eu/headway/wp-content/uploads/sites/225/2022/09/220927\\_Headway\\_Mental-Health-Index-2.0\\_Report-1.pdf](https://eventi.ambrosetti.eu/headway/wp-content/uploads/sites/225/2022/09/220927_Headway_Mental-Health-Index-2.0_Report-1.pdf)

<sup>6</sup> Ministerio de Sanidad. Informe Anual del Sistema Nacional de Salud 2020-2021 [https://www.sanidad.gob.es/estadEstudios/estadisticas/sisInfSanSNS/tablasEstadisticas/InfAnualSNS\\_2020\\_21/INFORME\\_ANUAL\\_2020\\_21.pdf](https://www.sanidad.gob.es/estadEstudios/estadisticas/sisInfSanSNS/tablasEstadisticas/InfAnualSNS_2020_21/INFORME_ANUAL_2020_21.pdf)

Shedding light on Spain's scenario further is a study conducted in collaboration between the Confederation of MENTAL HEALTH SPAIN and Fundación Mutua Madrileña in regards to mental health situations throughout Spain in 2022: '*The situation of mental health in Spain*'<sup>7</sup>. It reflects a concerning finding that reveals approximately four out of every ten Spaniards (39.3%) perceive their present state of mental health negatively. This comprehensive research involved over 2,000 participants, including both the general population and individuals who have experienced mental health problems, as well as healthcare professionals.

The most prevalent psychological illnesses present within Spanish society today are depression, anxiety, and attention deficit hyperactivity disorder (ADHD). Notably, Spain devotes itself to grappling with the highest incidence of ADHD cases across European countries; such instances account for approximately 5% of the total number of reported cases.

Equally disconcerting is the unexpected emergence of suicide surpassing all other causes as the primary cause of death within Spain's youth demographic. Latest records designate that in 2019 alone 309 lives were lost to suicide among those aged 15 to 29, surpassing the number of deaths resulting from traffic accidents, which amounted to 307. This data was furnished by the Spanish Foundation for Suicide Prevention<sup>8</sup>, underscoring and emphasizing just how significant this issue truly is.

---

<sup>7</sup> CONFEDERACIÓN Salud Mental España: *La Situación de la Salud Mental en España* (2023) <https://www.consaludmental.org/publicaciones/Estudio-situacion-salud-mental-2023.pdf>

<sup>8</sup> <https://www.fsme.es/>

## Sweden

The majority of the population in Sweden reported good mental well being, but mild mental health problems such as anxiety, stress, and sleep disorders have increased in recent years. Women, young people, and those with low incomes report mental health problems at higher rates than others<sup>9</sup>.

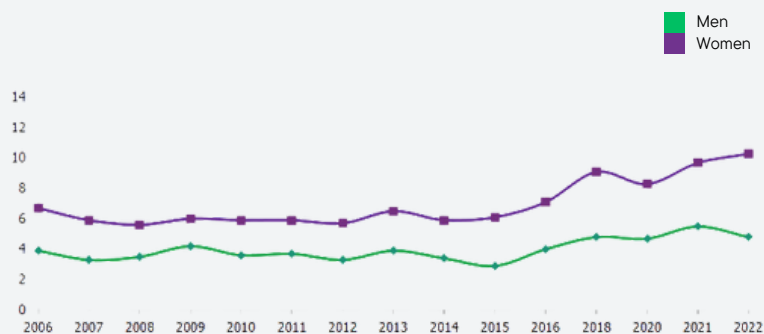
However, the proportion of those reporting good mental well being has remained stable over time, despite an increase in the reporting of mental health problems. The differences in mental health between different groups in Sweden are systematic, with women, young people, those with lower education, and lower incomes reporting mental health problems more often than others. This information is based on the latest available statistics collected by the Swedish National Institute of Public Health. Mental health problems are more common among girls and women than boys and men, and this difference is closely related to age. The gender differences are largest among teenagers and young adults, while the differences are often less pronounced among older age groups and younger schoolchildren. For example, women report severe anxiety, worry, or fear twice as often as men (11% of women and 5% of men reported this in 2022). Mild anxiety, worry, or fear is much more common and is reported by 41% of women and 30% of men. Similar gender differences exist for several other mental health problems, both mild and severe, and the trend is increasing, with a growing proportion reporting mental health problems. However, for some health measures, gender differences are less pronounced. For example, 4% of women and 3% of men reported having suicidal thoughts in the past year. There is also less difference in the reporting of good mental well being, which is reported by 85% of women and 87% of men who are 16 years or older<sup>10</sup>.

---

<sup>9</sup> www.folkhalsomyndigheten.se. (n.d.). *Mental health - The Public Health Agency of Sweden*. [online] Available at: <https://www.folkhalsomyndigheten.se/the-public-health-agency-of-sweden/living-conditions-and-lifestyle/mental-health/>.

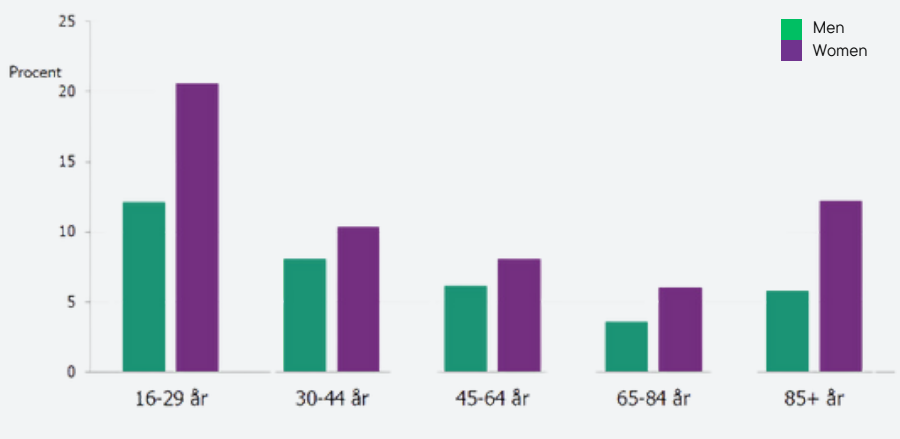
<sup>10</sup> www.folkhalsomyndigheten.se. (n.d.). *Statistik psykisk hälsa – Folkhälsomyndigheten*. [online] Available at: <https://www.folkhalsomyndigheten.se/livsvillkor-levnadsvanor/psykisk-halsa-och-suicidprevention/statistik-psykisk-halsa/>.

(Proportion of men and women aged 16–84 who reported severe problems with anxiety, worry or anxiety 2006–2022)



Adolescents and young adults report mental health problems more often than others, especially girls and young women. The reporting of severe mental distress is highest in the youngest age group (16–29 years) and lowest in the second oldest age group (65–84 years). The gender differences are present in all age groups, but are most pronounced among the youngest and oldest<sup>11</sup>.

(Proportion of men and women in different age groups who reported serious mental stress in 2022. Source: National public health survey)



<sup>11</sup> www.folkhalsomyndigheten.se. (n.d.). *Statistik psykisk hälsa – Folkhälsomyndigheten*. [online] Available at: <https://www.folkhalsomyndigheten.se/livsvillkor-levnadsvanor/psykisk-halsa-och-suicidprevention/statistik-psykisk-halsa/>.

## **Overview of Mental Health BEFORE the impact of COVID-19**

Concerns about mental health have persisted among European citizens even before feeling the full effects brought by the COVID 19 pandemic. It is important to highlight that depression stood out as one of the major global illnesses and ranked second on this troubling list. Additionally, suicide represented a distressing reality for young individuals aged between 15 and 29 years old by becoming their second most common cause of death.

### **Italy**

The pandemic has definitely pinpointed the need to focus more intensely on the wellbeing of all citizens and categories and not take for granted that some issues will resolve themselves in time, as is the general assumption specifically with the suffering of young people. Yet the pandemic has only managed to render visible that which was an insidious long-term and pre-existing trend of damaging suffering and isolation of young people as individuals that require a dedicated and specific dialogue and regard.

In the specific case of Italy this discussion is further amplified by a series of political and social economic phenomena that should not be discarded in the overall analysis of the matter. In 2019, adolescents and young adults aged between 10 and 24 years constituted only 14.5% of the Italian population<sup>12</sup>. As is well established the Italian population is the first European country with the greatest percentage of elderly and retired people<sup>13</sup>.

---

<sup>12</sup> Simone Amendola, *Burden of mental health and substance use disorders among Italian young people aged 10-24 years: results from the Global Burden of Disease 2019 Study*, January 2022, Social Psychiatry and psychiatric Epidemiology.

<sup>13</sup> <https://www.ispionline.it/en/publication/the-not-so-sweet-life-of-italys-elders-107051>

Needless to say this has an impact on the labour market, on the pension system and on the future perspectives of young people that are extremely sensitive to the greater generational divide that is portraying the social landscape and that leaves young people feeling without options and means of improvement of their condition<sup>14</sup>.

As mentioned by Amendola, in her study on the implications of the results from the Global Burden of Disease: “Anxiety, depressive and attention-deficit/hyperactivity disorders were the three most common mental health disorders diagnosed among young people in 2019 (Online Resource 1). **In Italy, 0.6** (95% UI 0.5–0.8), **0.3** (95% UI 0.2–0.3) **and 0.2** (95% UI 0.1–0.3) **millions of young people suffered from anxiety, depression and attention-deficit/hyperactivity disorders**, respectively, with a rate of 7052 (95% UI 5538–8881), 3093 (95% UI 2414–3884) and 2408 (95% UI 1676–3414) per 100,000 young people. Moreover, anxiety, depressive and conduct disorders were the three diagnoses associated with the highest burden in terms of YLDs in 2019. In particular, 60.5 (95% UI 40.7–86.4), 50 (95% UI 31.9–74.6) and 21.6 (95% UI 12.2–34) thousand of YLDs were attributed to anxiety, depressive and conduct disorders, respectively, among Italian young people in 2019 with rates of 694.6 (95% UI 466.7–992.1), 574.4 (95% UI 365.8–856.6) and 248.4 (95% UI 139.7–390.3) per 100,000 young people.”<sup>15</sup>

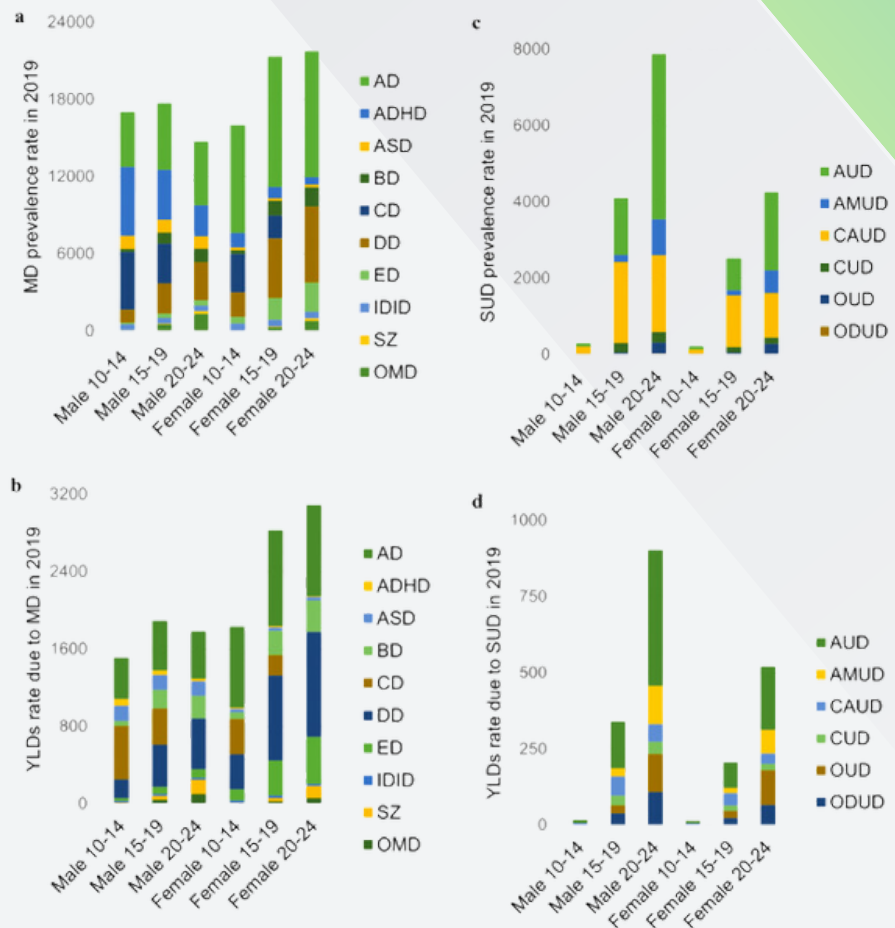
---

<sup>14</sup> Eurofound (2021), *Impact of COVID-19 on young people in the EU*, Publications Office of the European Union, Luxembourg.

<sup>15</sup> Simone Amendola, *Burden of mental health and substance use disorders among Italian young people aged 10-24 years: results from the Global Burden of Disease 2019 Study*, January 2022, *Social Psychiatry and psychiatric Epidemiology*



**Fig. 3** a Prevalence rate and b YLDs rate of mental disorders (MD) as well as c prevalence rate and d YLDs rate of substance use disorders (SUD) by age group and sex. *AD* anxiety disorders, *ADHD* attention-deficit/hyperactivity disorder, *ASD* autism spectrum disorders, *BD* bipolar disorders, *CD* conduct disorder, *DD* depressive disorders, *ED* eating disorders, *IDID* idiopathic developmental intellectual disability, *SZ* schizophrenia, *OMD* other mental disorders, *AUD* alcohol use disorders, *AMUD* amphetamine use disorders, *CAUD* cannabis use disorders, *CUD* cocaine use disorders, *ODUD* other drug use disorders



Obviously, and as previously anticipated, this experience of suffering is related to internal and external factors and is gender, age and socio-cultural background specific as is thoroughly explained in this study from 2018<sup>16</sup>, “one student out of five reported symptoms of mental health problems, with a more than double proportion among girls than boys (28.7% vs 10.4% with depressive symptoms, respectively). Thirty percent and 40% of students smoked tobacco or drank alcoholic beverages at least once in the past month, and more than 40% reported being victims or authors of bullying in the past 6 months. Smoking behaviour, alcohol consumption, screen time, bullying, and negative school climate had 1.2- to 3.3-fold increased odds of symptoms of mental health problems without substantial differences between sexes and geographical area.”

<sup>16</sup> Francesco Donato, Maria Triassi, Ilaria Loperto, Alessia Maccaro, Sara Mentasti, Federica Crivillaro, Antonella Elvetico, Elia Croce, Elena Raffetti, *Symptoms of mental health problems among Italian adolescents in 2017–2018 school year: a multicenter cross-sectional study* <https://environhealthprevmed.biomedcentral.com/articles/10.1186/s12199-021-00988-4>

In his study conducted in the areas of Brescia and Naples in 2017 and 2018, interviewing through the means of a questionnaire that consisted of 27 items investigating age, parental education, mental health, school climate, tobacco smoking, alcohol consumption and use of technology more than two thousand respondents, Francesco Donato managed to create an overview of issues affecting adolescents before the pandemic. This study confirmed the **high rates of alcohol consumption** “Alcohol consumption was more prevalent than tobacco smoking, as it was reported by 40.4% of students, especially among males (46.5%).” **as well as a significant incidence of cases of online and offline bullying** “Bullying was reported by about 40% of the students (41.4% victims and 39.8% authors), with a higher proportion of victims among females than males (43.7% vs 38.4%), whereas more males than females referred to have been authors (48.4% vs 33.1%).” and especially confirmed the evidence that has emerged from other studies as well <sup>17</sup> **that mental health issues are impacting a higher percentage of girls**, growing with age (higher after the age of 14) and has more enduring consequences as “particularly regarding internalising symptoms” <sup>18</sup> .

Basically, what we can observe is that mental health issues in minors and adolescents has been an issue before covid, striking in one way or another **almost 1 in 5 individuals**, and has had a deeper and stronger impact on girls, embedded in their daily life going from school climate, use of technology, of drugs and the risk of developing psychological disorders.

Unfortunately, before the COVID outbreak we have less data and less complexity in the data as far as migrants, children with disability, adolescents from fragile socio-economic and adolescents coming from isolated or depressed geographical areas goes. This lack of data is also extended to the analysis of the number and the intensity of help requests from young people before the outbreak, a data that has been rendered more evident with the pandemic, as we shall see further.

---

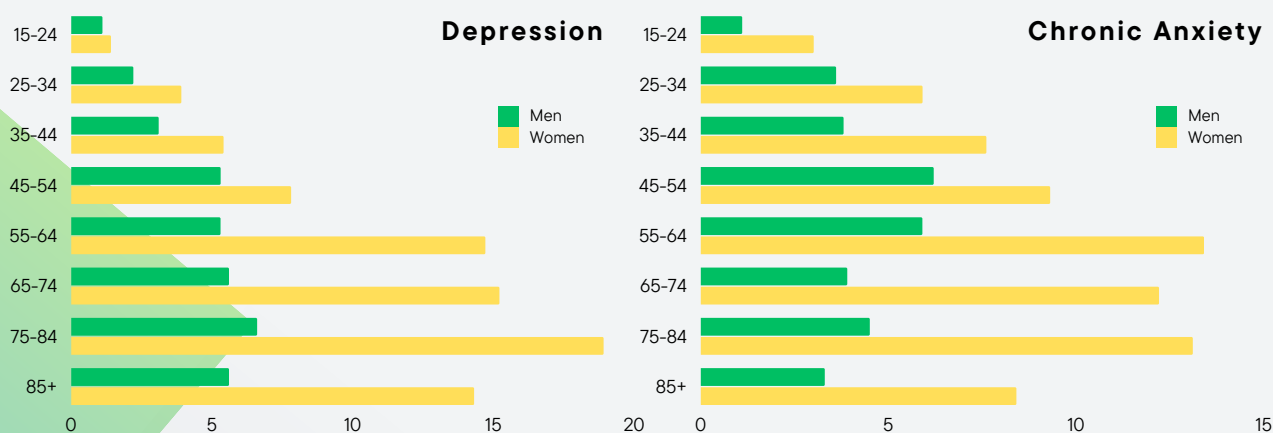
<sup>17</sup> Bersia, M.; Charrier, L.; Berchiolla, P.; Cosma, A.; Comoretto, R.I.; Dalmasso, P. *The Mental Well-Being of Italian Adolescents in the Last Decade through the Lens of the Dual Factor Model*. *Children* 2022, 9,1981. <https://doi.org/10.3390/children9121981>

<sup>18</sup> Francesco Donato, Maria Triassi, Ilaria Loperto, Alessia Maccaro, Sara Mentasti, Federica Crivillaro, Antonella Elvetico, Elia Croce, Elena Raffetti, *Symptoms of mental health problems among Italian adolescents in 2017–2018 school year: a multicenter cross-sectional study* <https://environhealthprevmed.biomedcentral.com/articles/10.1186/s12199-021-00988-4>

# Spain

Even prior to COVID-19, the Spanish population was already dealing with several grave psychological conditions. In 2018, for example, anxiety became preeminent amongst all other mental illnesses, affecting at least 6% if not more from overall population. This ranking placed Spain third, behind Netherlands and Norway, when comparing percentages based on anxiety prevalence. It is estimated that around 10% of children and 20% of adolescents were already affected by mental disorders, with potential long-lasting effects throughout their lives.

According to the results of the ENSE 2017<sup>19</sup>, more than one in ten people aged 15 and over reported having been diagnosed with a mental health problem (10.8%). Of the 32 diseases or health problems surveyed by the ENSE, chronic anxiety and depression rank 10th and 11th in self-reported prevalence in the population aged 15 and over, with almost the same proportion (6.7%).



Prevalence of depression and chronic anxiety in the population aged 15 and over, according to sex and age group.

## Spain 2017 ENSE, MSCBS/INE <sup>19</sup>

<sup>19</sup> ENSE: Encuesta Nacional de Salud, España 2017

[https://www.sanidad.gob.es/estadEstudios/estadisticas/encuestaNacional/encuestaNac2017/SALUD\\_MENTAL.pdf](https://www.sanidad.gob.es/estadEstudios/estadisticas/encuestaNacional/encuestaNac2017/SALUD_MENTAL.pdf)

In the study of data related to Mental Health in Spain 2017, the **Primary Care Clinical Database** (Base de Datos Clínicos de Atención Primaria or BDCAP), collects: *"The most frequently recorded mental health problem in primary care records is anxiety disorder, which affects 6.7% of the population with a health card. It is a problem with a relatively stable frequency between 35 and 84 years of age. Depressive disorder appears in 4.1% of the population and increases with age. The most frequent symptom is sleep disorder, which affects 5.4% of the population (15.8% in women, 5.1% in men), and increases with age. [...] In childhood and adolescence (< 25 years) the most frequent problems are hyperkinetic disorders (1.8%) and specific learning disabilities (1.6%)."*

*[...] 34.3% of women and 17.8% of men aged 40 and over have withdrawn at least one pack of antidepressant, anxiolytic or hypnotic/sedative during the study year, 2017. In quantitative terms, 203.6 DHD (defined daily doses per thousand persons per day) are dispensed, an amount that allows 20.4% of the population aged 40 and over to be treated with a standard daily dose throughout the year. The most commonly used are: antidepressants, 98.8 DHD (40.3 in women and 52.8 in men), anxiolytics (83.5 in women and 43.4 in men) and hypnotics and sedatives (40.2 DHD, 52.2 in women and 26.9 in men). Consumption has a common pattern: it is higher in women, it increases with age, a social gradient is observed, and the higher the dispensation as the size of the municipality decreases, independently of the age of the population."*<sup>20</sup>

Before the arrival of COVID-19 pandemic, there were already various mental health issues affecting its population in Spain, such as anxiety and depression as well as youth mental disorders. The consumption of psychotropic drugs was frequent. The pandemic has exacerbated these challenges substantially, shedding light on the pressing need for a comprehensive understanding of the situation along with practical interventions aimed at supporting individuals in maintaining their overall mental well being.

---

<sup>20</sup> BDCAP: *Salud mental en datos: prevalencia de los problemas de salud y consumo de psicofármacos y fármacos relacionados a partir de los registros clínicos de atención primaria*  
[https://www.sanidad.gob.es/estadEstudios/estadisticas/estadisticas/estMinisterio/SIAP/Salud\\_mental\\_datos.pdf](https://www.sanidad.gob.es/estadEstudios/estadisticas/estadisticas/estMinisterio/SIAP/Salud_mental_datos.pdf)

## Sweden

While The COVID-19 pandemic has underscored the importance of mental health on a global scale, in Sweden mental health was already a significant public health concern. For example, in an article published by Ahnquist and Wamala in 2011 examined the relationship between mental health and economic hardships<sup>21</sup>.

Moreover, given the harsh environment at such northern latitudes mental health disorders such as depression and anxiety were already prevalent in the population, and there were efforts to increase awareness and access to mental health services. Given the seriousness of the situation nationwide the Public Health Agency of Sweden has actively promoted self-reporting of mental and somatic problems<sup>22</sup>. These efforts have seen a steady increase in self-reported mental disorders nationwide since the mid-1980's, this is true for all groups especially with young girls between the ages of 13 and 15 years-old<sup>23</sup>.

The World Health Organization estimated that globally, one in four people will be affected by mental or neurological disorders at some point in their lives<sup>24</sup>. Mental health was already a leading cause of disability and a major contributor to the global burden of disease. Additionally, there were existing inequalities in access to mental health care and resources, with marginalised and disadvantaged populations experiencing greater disparities in mental health outcomes.

---

<sup>21</sup> Ahnquist, J. and Wamala, S.P. (2011). *Economic hardships in adulthood and mental health in Sweden*. The Swedish National Public Health Survey 2009. BMC Public Health, 11(1). doi: <https://doi.org/10.1186/1471-2458-11-788>.

<sup>22</sup> [www.folkhalsomyndigheten.se](https://www.folkhalsomyndigheten.se). (n.d.). *Vad gör vi och andra? – Folkhälsomyndigheten*. [online] Available at: <https://www.folkhalsomyndigheten.se/livsvillkor-levnadsvanor/psykisk-halsa-och-suicidprevention/psykisk-halsa/>.

<sup>23</sup> [www.folkhalsomyndigheten.se](https://www.folkhalsomyndigheten.se). (n.d.). *Statistik psykisk hälsa – Folkhälsomyndigheten*. [online] Available at: <https://www.folkhalsomyndigheten.se/livsvillkor-levnadsvanor/psykisk-halsa-och-suicidprevention/statistik-psykisk-halsa/>.

<sup>24</sup> *Skolbarns hälsovanor i Sverige 2013/14 Grundrapport*. (n.d.). Available at: <https://www.folkhalsomyndigheten.se/contentassets/fbcbd76d2cae4fc0981e35dddf246cf0/skolbarns-halsovanor-sverige-2013-14.pdf>

## **Overview of Mental Health AFTER the impact of COVID-19**

The COVID-19 pandemic poses a significant threat to mental health, particularly among young individuals, necessitating careful consideration for potential repercussions. The reliance on online learning platforms alongside restrictions placed upon leisure activities have disrupted social bonds integral to healthy interpersonal relations within this demographic. This disruption is accentuated by heightened time spent engrossed in digital experiences including social media interactions which has given rise to sentiments characterised by **isolation and loneliness** combined with heightened unease leading frequently towards reported depressive symptoms manifested commonly amongst many young individuals who comprise this cohort. Reports indicate that since COVID-19 took hold globally in early 2020 there has been an alarming escalation concerning anxiety levels experienced within populations worldwide correlating directly to stress-inflicted circumstances that now confront societies at large. The tremendous toll exacted involving loved ones succumbing to COVID-19 combined with a pervasive apprehension towards transmission of this illness has served only to intensify feelings of grief and fear radically. Additionally, necessary lockdown protocols complemented by thorough social isolation measures have unleashed far-reaching **socio-economic consequences** that continue to embed shared anxiety within communities. This phenomenon has been observed as businesses in various sectors struggle for survival, meanwhile, workers face imminent risk associated with income reduction or even worse - unemployment as they grapple with precarious job security against the backdrop of these crisis-induced conditions. Worse still, daily patterns fundamentally integral to one's overall mental health have undergone considerable modification leaving behind a trail marked by profound loneliness thus further exacerbating social isolation occurrences. This alarming state of affairs was underscored by Director General Tedros in May 2020 given his deep concerns surrounding the profound impact COVID-19 had on global mental health outcomes among individuals at large.

Perceptive data on the matter underscores an urgent need for decisive action. Worrysome reports indicate that worldwide cases reflecting anxiety and depression have witnessed a surge thought to approximate 25% since the outset of this unprecedented pandemic period; perhaps even more shockingly suicide now occupies a ranking as the fifth most prevalent cause amongst young people aged 10 through 19 globally whereas it gains standing as fourth-ranked amongst those aged between 15 through 19 years old primarily. This ensemble of distressing figures draws heightened attention towards the urgency associated with tackling head-on the multitude of mental health challenges younger individuals continue confronting in real-time as they navigate their personal crises experienced not just individually but rather collectively throughout this ongoing battle against COVID-19.

## **Italy**

The pandemic has generated a series of shock waves in societies and has exposed a great many failures of social welfare and a serious disregard for the mental health of young people. After the outbreak and especially during the first and the second lockdown, as far as Italy's case is concerned, and especially correlated with school closure, the responses and the number of requests of young people demonstrated that an entire category of people had been taken for granted and disregarded.

Starting with one first significant change, the exploding of the helplines, it immediately became transparent to the fundamental need of young people of being heard and receiving assistance. If we are to consider only the data available from the Telefono Azzurro helpline in the period going from February to December 2020, the number of requests regarding mental health issues had risen with almost 46% compared only with the previous year.

Allarming data had been reported at the time as far as eating disorders where concerned, with more than 30% generally of adolescents developing eating disorders (as indicating by the Epidemiological Observatory of the Health Ministry<sup>25</sup>) while the Center for Eating Behaviour Disorders of San Raffaele Hospital had doubled its cases of intervention for eating disorders, with specific focus on nervous anorexia<sup>26</sup>.

It soon became apparent that adolescents feel more tired (31% more), anxious (15% more), scared (17% more), and disoriented and are in need of support (1 in 5). On a broader analysis, looking into 29 studies the Italian Authority for Children and Adolescents (AGIA) and the Superior Health Institute (ISS) concluded that the pandemic had revealed symptoms of clinical depression in 1 out of 4 adolescents, while 1 in 5 suffered from anxiety disorders<sup>27</sup>. The most frequent symptoms reported were disorders of eating behaviour, suicidal thinking, self-harm, sleeping alterations and social isolation<sup>28</sup>.



*Figura 4. Principali disturbi, sintomi e condizioni di fragilità segnalati dai professionisti*

---

<sup>25</sup> <https://www.sanitainformazione.it/omceo-enti-territori/covid-disturbi-dell'alimentazione-in-aumento-del-30-sempre-piu-bambini-e-adolescenti/>

<sup>26</sup> Covid-19 e Adolescenza. Osservatorio nazionale per l'infanzia e l'adolescenza. Gruppo emergenza covid-19. Maggio 2021

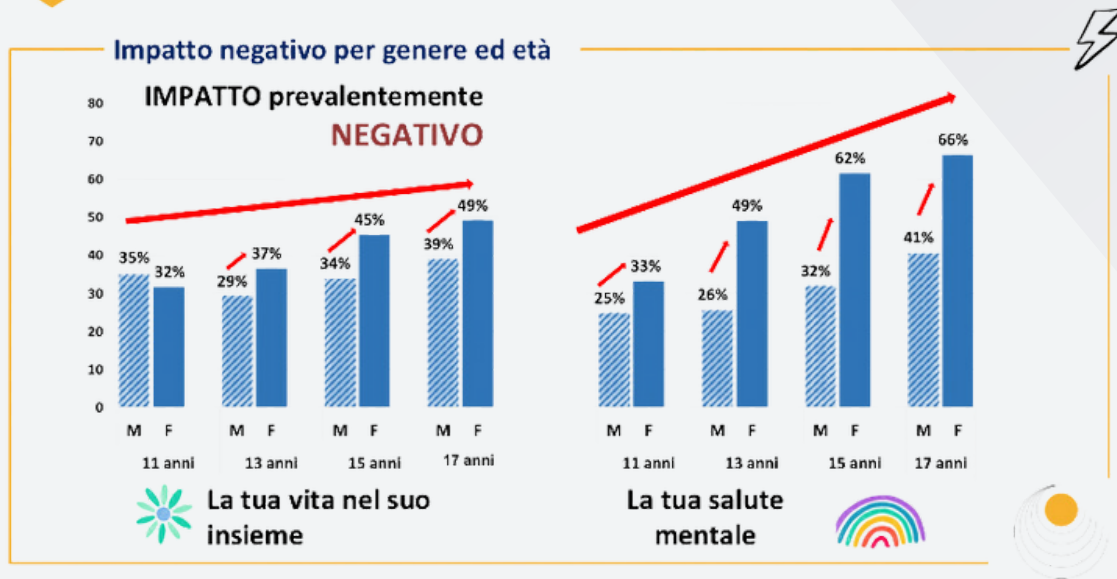
<sup>27</sup> Italian Authority for Children and Adolescents (AGIA) and Istituto Superiore di Sanità (ISS) *Pandemic, neurodevelopment and mental health of children and young people*, May 2022

<sup>28</sup> *Pandemia, neurosviluppo e salute mentale di bambini e ragazzi*. Documento di studio e di proposte. Autorità Garante per l'Infanzia e l'Adolescenza. Maggio 2022



Generally, there was a significant verbalisation of the suffering and the decrease in the number of young people who consider themselves in good health<sup>29</sup>.

CONVEGNO La salute degli adolescenti: i dati della sorveglianza Health Behaviour in School-aged Children HBSC Italia 2022



Those studies focusing particularly on the impact of lockdown, isolation and school closure in order to trace the modifications of lifestyles associated with the development of psychological problems confirmed this trend of decrease of quality of life<sup>30</sup>.

<sup>29</sup> Comunicato Stampa N°08/2023 – ISS

<sup>30</sup> *Development of Psychological Problems Among Adolescents During School Closures Because of the COVID-19 Lockdown Phase in Italy: A Cross-Sectional Survey*, *Frontiers in Pediatrics*, 22 Jan 2021, doi: 10.3389/fped.2020.628072

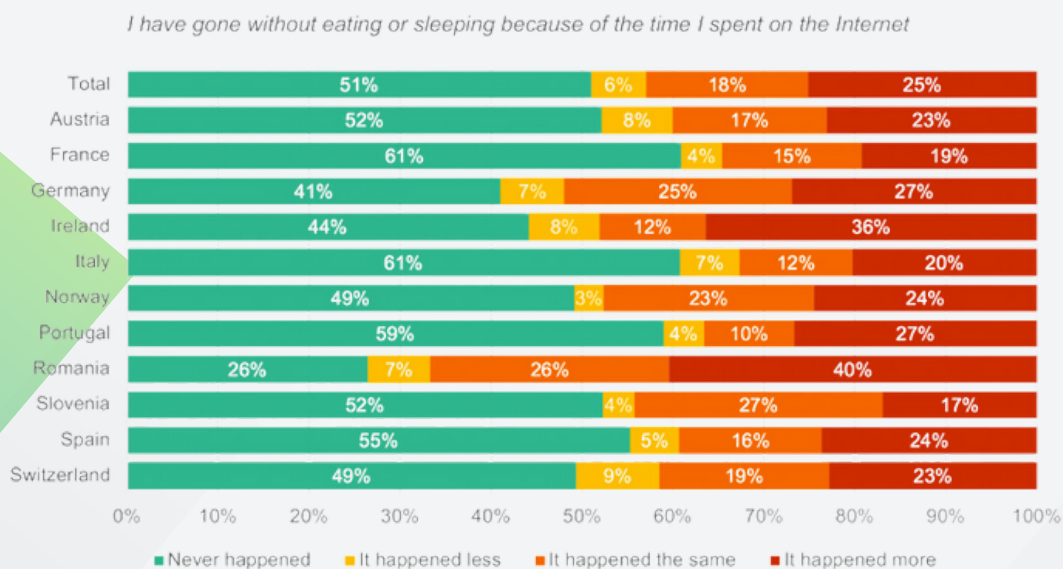
**TABLE 4 |** Psychological impact of school closure because of COVID-19 lock-down in the study population according to gender, area of residence, and age.

	% Females	% Males	p-value	% North	% South	p-value	% age 11–13	% age 14–19	p-value
<b>Do you happen to be afraid of COVID-19?</b>			<0.001			<0.001			<0.001
No	14.6	36.5		21.5	24.8		24.1	22.4	
Yes, I'm afraid my parents will die	15.8	10.8		15.1	12.0		15.2	13.7	
Yes, I'm afraid my grandparents will die	32.0	24.6	<0.001	33.6	22.0	<0.001	36.6	27.6	0.01
Yes, I'm afraid of getting sick and being hospitalized	9.8	10.6		9.9	10.3		9.1	10.3	
Yes, I'm afraid of dying	4.1	2.2		2.3	5.2		4.8	3.1	
Yes, for other reasons	23.8	15.3		17.5	25.7		10.2	22.9	
<b>Since schools are closed, you noticed</b>			<0.001			0.058			<0.001
You sleep as before	22.4	29.6		25.7	24.2		23.0	25.6	
You sleep more	34.5	46.8		40.2	37.2		48.4	37.0	
You sleep less (total)	43.1	23.6		34.1	38.6		28.6	37.5	
You sleep less because you struggle to fall asleep	27.4	15.0		22.3	23.6		16.6	24.1	
You sleep less because you have nightmares	2.1	0.4		1.6	1.2		2.4	1.2	
You sleep less because you wake up early	6.6	4.2		4.6	7.6		4.8	5.9	
You sleep less because you wake up often	7.0	4.0		5.7	6.2		4.8	6.1	
<b>If you sleep less or more, explain why</b>			<0.001			<0.001			<0.001
I sleep less because I'm afraid that one of my relatives is sick	10.1	3.9		8.3	7.3		8.7	7.8	
I sleep less because I'm afraid of COVID-19	2.9	1.8		2.6	2.3		3.1	2.4	
I sleep less because I'm afraid of getting sick	2.3	0.8		1.4	2.3		1.4	1.9	
I sleep less because I'm afraid of dying	0.7	0.6		0.3	1.3		1.1	0.6	
I sleep less because I am less tired	35.5	24.1		30.2	33.8		21.3	34.1	
I sleep more because I don't have to go to school	26.4	41.2		36.9	22.7		43.9	28.5	
I sleep more because I can't do anything	6.6	8.2		6.8	7.7		7.3	7.1	
I sleep more because I can't meet my friends	5.7	7.1		5.1	8.1		4.2	6.7	
I sleep more because I'm bored	9.8	12.4		8.3	14.5		9.1	11.1	
<b>Have you been more agitated since schools are closed?</b>			<0.001			0.203			0.025
No	38.1	57.5		46.1	43.9		45.7	45.2	
Yes, I'm afraid my relatives will get sick	14.0	9.0		13.3	10.3		14.7	11.6	
Yes, I'm afraid of COVID-19	5.1	4.4		4.3	5.8		6.1	4.6	
Yes, I'm afraid of getting sick	1.9	2.4		2.1	1.9		3.2	1.8	
Yes, I'm afraid of dying	0.9	0.3		0.6	0.8		1.1	0.6	
Yes, because I'm afraid of not being able to stay behind the studio	15.4	11.9		13.3	15.4		9.9	15.0	
Yes, because I feel alone and close to friends	24.6	14.6		20.3	21.8		19.2	21.2	
<b>Since when the schools are closed, have you been feeling sad?</b>			<0.001			<0.001			<0.001
No	16.0	31.8		22.1	21.5		29.4	20.2	
Yes, because I feel a sense of loneliness	42.5	32.3		39.1	38.1		34.0	39.8	
Yes, because I'm afraid that my relatives will get sick	5.1	3.4		4.9	3.8		4.1	4.4	
Yes, because I'm afraid of COVID-19	1.8	2.7		1.7	2.8		2.1	2.1	
Yes, because I'm afraid of getting sick	0.8	0.5		0.3	1.3		1.1	0.6	
Yes, because I'm afraid of dying	0.8	-		0.5	0.4		0.3	0.5	

(Continued)

Instead other studies looked into the usage of technology and social media and the digital impact of the lockdown period, while trying to compare changes in terms of behaviour and risk of sleep deprivation and the risks associated with these changes. In a survey conducted by the European Commission in 11 European countries with children aged 10 to 18 years old, addressed: digital technology habits, use of technology for school, parental worries, exposure to online risks such as cyberbullying and harmful content as well as positive elements such as acquisition of digital skills. Some of the most significant results as far as Italian youth is concerned appeared to be in the increase of exposure to the risks of digital usage “over all countries, among the children that have already been victim of cyberbullying, nearly half (44%) reported an increase in the phenomenon during the Covid-19 lockdown. At national level, this share is the highest in Germany (51%), Italy (50%), Spain (50%) and Ireland (48%)”<sup>31</sup> .

Within the same analysis we are told that this risk extended as well in terms of self-harm practices revealing that “children reported more exposure to gory and violent content during lockdown than before, the most in Ireland (25%), Italy (25%) and Romania (26%)” as well as sleep deprivation.



<sup>31</sup> European Commission, Joint Research Centre, Lobe, B., Velicu, A., Staksrud, E., et al., *How children (10-18) experienced online risks during the COVID-19 lockdown : Spring 2020 : key findings from surveying families in 11 European countries*, Publications Office of the European Union, 2021, <https://data.europa.eu/doi/10.2760/562534>

This is a global and, in some ways simplified perspective, of the phenomenon of the effect of the pandemic on children but what it tells us has become an almost acknowledged evidence by now, namely that the Covid-19 pandemic, through its unique combination of uncertainty, anxiety, fear for one's health and isolation has greatly impacted childrens' wellbeing, has compromised their educational development, their perspectives on the future in ways that are profound and endangered their neurological and social development<sup>32</sup>.

This development, as mentioned in the previous section, is deeply embedded with various factors of one's individual identity that go beyond behaviours, such as age, gender, socio-economic background, cultural background, physical abilities and so on. Differently from the pre-pandemic period, after the outbreak we saw a greater attention and complexity in the construction of the surveys, taking into consideration such elements as these and revealing their importance in policy-making and strategy building for the improvement of minors' wellbeing.

We are thus confronted once again with the realisation of the fact that the pandemic has impacted different categories in different ways. Among young people we know that girls have suffered more during the pandemic than boys<sup>33</sup>. And this suffering discriminates on the basis of age and types of disorders<sup>34</sup>, namely increasing in depth and intensity along with age.

---

<sup>32</sup> *Interim indications for the appropriate support of the children/adolescents' mental health during the pandemic COVID-19*. Version of May 31, 2020. ISS Working Group Mental Health and Emergency COVID-19 2020, 38 p. Rapporto ISS COVID-19 n. 43/2020

<sup>33</sup> *Development of Psychological Problems Among Adolescents During School Closures Because of the COVID-19 Lockdown Phase in Italy: A Cross-Sectional Survey*, *Frontiers in Pediatrics*, 22 Jan 2021, doi: 10.3389/fped.2020.628072

<sup>34</sup> Comunicato Stampa N°08/2023 – ISS

Furthermore, what we learn is an intuitive aspect, specifically that the pandemic period has been characterised by a great divide between those with or without access, to services, to technology, to help, and this has generated enormous discrimination leading to the further isolation of those most in need<sup>35</sup>. This discrimination has manifested itself in many forms. One of the most important, especially in the first and second lockdown has been the ability to access technology and thus actively participate in school activities. The digital divide has left its mark almost immediately on the social integration of children, as one study of Save the Children made clear, in the first year of the pandemic almost 1 in 8 children had no access to a digital instrument. From the ages 6 to 17 years old almost half of students had difficulty due to connection, family environment and access to maintain his or her study and participate in online classes. The most impressive figure among the respondents of the survey claimed that in all classes at least one student had entirely ceased to participate in classes all together<sup>36</sup>.

*“The analysis of predictors of psychological distress among survey respondents identified a significant association with female gender, being student or unemployed/ retired/homemaker and living in a multifamily house without a garden. Conversely, only a small proportion of participants reported moderate to severe psychological impact, and, again, young females and unemployed/ retired/homemaker individuals were the most affected. For what concerns sample characteristics, they were found to be representative of national trends. Respondents from high COVID-19 incidence regions were found to have higher socioeconomic status compared with those from other regions.”<sup>37</sup>* . Ultimately we have sufficient data to start an in-depth dialogue on the mental health of children and adolescents in Italy as the data seems to suggest that it affects almost a quarter of all young people and has been considerably impacted by the Covid-19 pandemic.

---

<sup>35</sup> *Pandemia, neurosviluppo e salute mentale di bambini e ragazzi*. Documento di studio e di proposte. Autorità Garante per l’Infanzia e l’Adolescenza. Maggio 2022

<sup>36</sup> Save the Children, *Riscriviamo il Futuro-Dove sono gli adolescenti? La voce degli studenti inascoltati nella crisi*, gennaio 2020

<sup>37</sup> Lorenzoni G, Azzolina D, Maresio E, et al. *Impact of the COVID-19 lockdown on psychological health and nutritional habits in Italy: results from the #PRESTOinsieme study*. *BMJ Open* 2022;12:e048916. doi:10.1136/bmjopen-2021-048916

## Spain

The arrival of COVID 19 caused unease, concern, and uncertainty among the Spanish population. Additionally, the confinement and social distancing measures had significant consequences leading to increased problems related to mental health. These included depression, anxiety, feelings of loneliness. Post traumatic stress disorder (PTSD) somatic symptoms, and panic attacks. A study conducted by the Complutense University and the Cátedra Contra el Estigma de Grupo 5 team<sup>38</sup> found that 40% of people in Spain reported experiencing a mental health problem since the beginning of the pandemic.

Two out of every ten Spanish adolescents between the ages of 10 and 19 suffered from mental health problems in 2019, the highest percentage of the 33 European countries analysed by UNICEF in its The State of the World's Children 2021 report<sup>39</sup>.

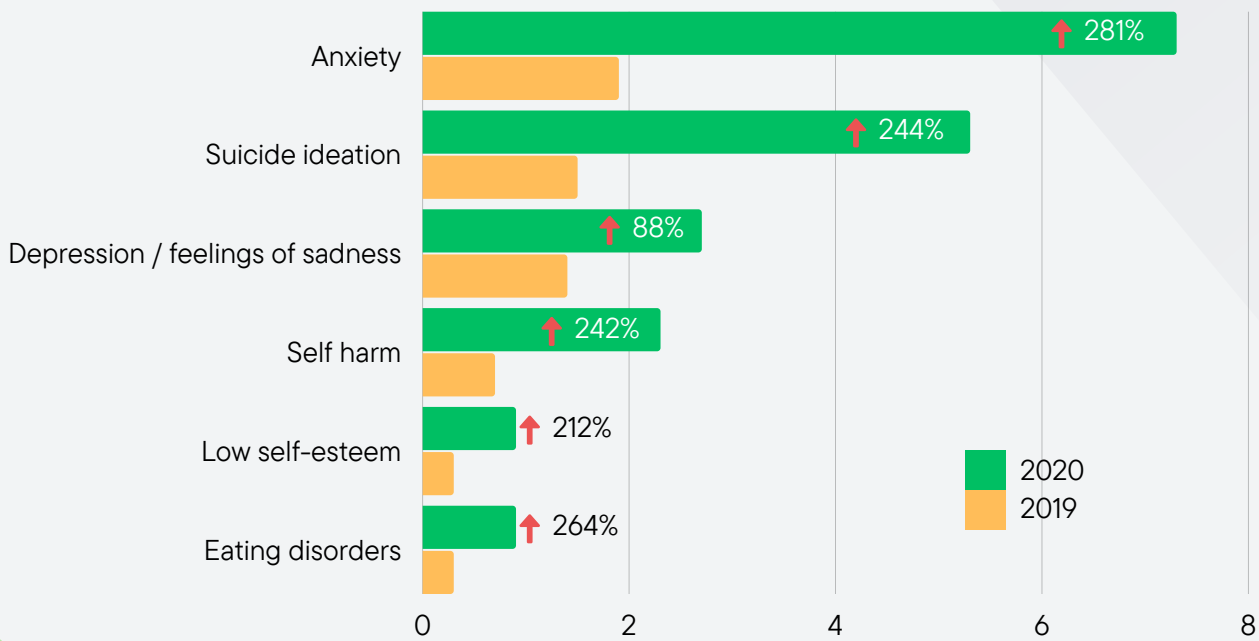


---

<sup>38</sup> Contra el Estigma: ESTUDIO LONGITUDINAL DEL IMPACTO PSICOLÓGICO DERIVADO DE LA COVID-19 EN LA POBLACIÓN ESPAÑOLA: [https://www.contraelestigma.com/wp-content/uploads/2018/10/Tercera-oleada\\_-\\_Estudio-impacto-psicol%C3%B3gico-y-Covid19.pdf](https://www.contraelestigma.com/wp-content/uploads/2018/10/Tercera-oleada_-_Estudio-impacto-psicol%C3%B3gico-y-Covid19.pdf)

<sup>39</sup> UNICEF: *The State of the World's Children 2021* <https://www.unicef.org/media/114636/file/SOWC-2021-full-report-English.pdf>

The Anar Foundation's annual report in 2020<sup>40</sup> further highlighted the impact that the pandemic and confinement had on mental health. It showed an increase in psychological problems such as suicidal ideation (+244.1%) anxiety (+280.6%) low self esteem (+212.3%) depression/sadness (+87.7%) eating disorders (+264.4%) and self harm (+241.6%) among children and adolescents.

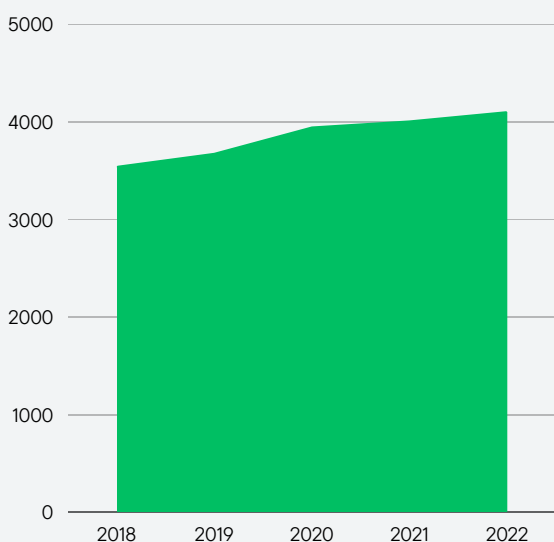


The COVID-19 pandemic triggered a growth in the population's mental health disorders and symptoms. The intensity of the ailment was further expanded by the halt of the professional help, which was pushed towards online services. This made professional help inaccessible to older generations who are unfamiliar with electronic devices or online servers.

<sup>40</sup> ANAR Foundation, *Memoria 2020*  
<https://www.anar.org/wp-content/uploads/2021/12/Memoria-ANAR-2020-Definitiva.pdf>

In 2022 a study conducted by the FAD Reina Sofía Center on Adolescence and Youth with support from the Pfizer Foundation<sup>41</sup> revealed that approximately 24% of young Spaniards reported experiencing mental health problems with varying frequency. This represents a significant increase of over 18 percentage points compared to previous years (8.6% in 2021 and 6.2% in 2019).

Suicide is a great concern for Spanish population, as it is one of the main causes of death, and the leading cause of death for young people. Records designate that in 2019 alone 309 lives were lost to suicide among those aged 15 to 29, surpassing the number of deaths resulting from traffic accidents, which amounted to 307.



Number of deaths by suicide, by year

According to data from the National Institute of Statistics (INE)<sup>42</sup>. The number of suicide deaths in Spain also experienced a concerning increase of 7.4% in 2020 compared to the previous year. Resulting in a total of 3,941 deaths attributed to suicide, or nearly 11 lives lost every day. In 2021 this digit grew into a total of 4.003, and in 2022 4.097, which represented an increase of 2.3% compared to the previous year.

---

<sup>41</sup> FAD Centro Reina Sofía y Fundación Pfizer (2020), *Jóvenes en pleno desarrollo y en plena pandemia - Cómo hacen frente a la emergencia sanitaria*  
[https://www.fundacionpfizer.org/sites/default/files/jovenes\\_en\\_pleno\\_desarrollo\\_y\\_en\\_plena\\_pandemia.pdf](https://www.fundacionpfizer.org/sites/default/files/jovenes_en_pleno_desarrollo_y_en_plena_pandemia.pdf)

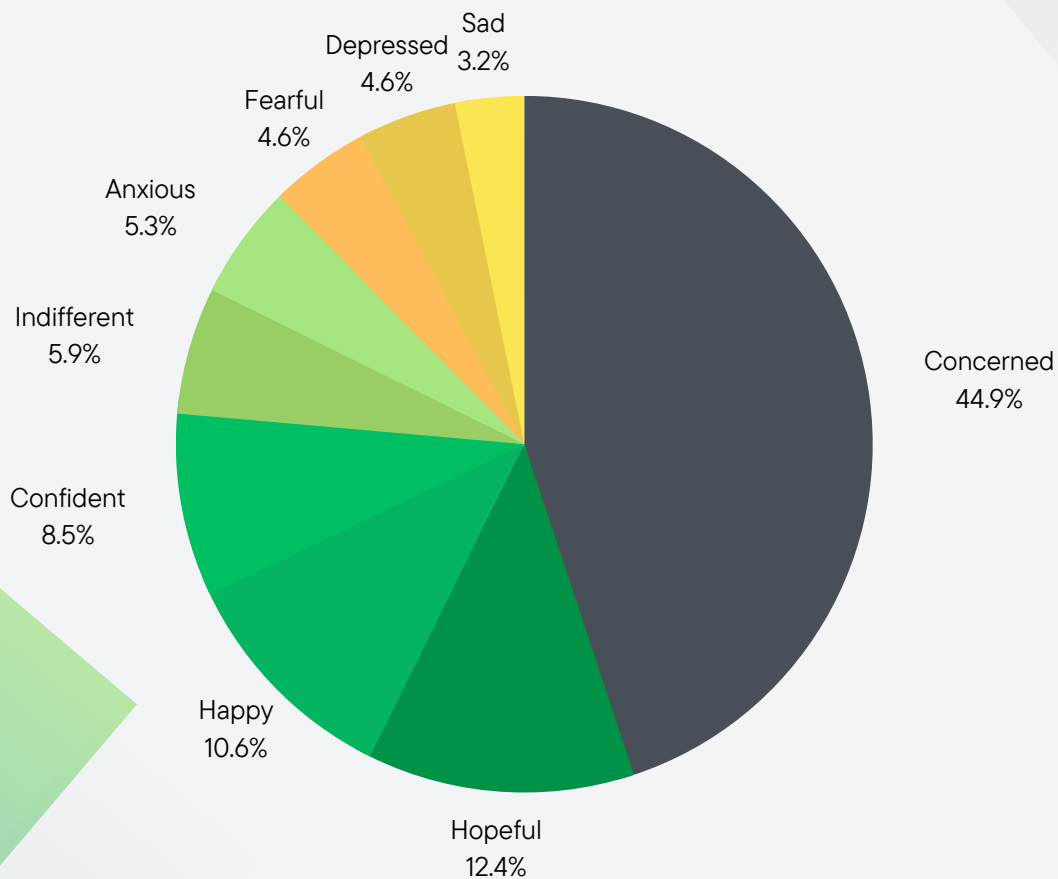
<sup>42</sup> <https://www.ine.es/index.htm>



"74.7% of the population considers that the mental health of Spanish society has worsened. The three reasons most frequently cited as causes of this worsening are: economic difficulties (91.4%), uncertainty about the future (89.0%) and the pressure, demands and stress of everyday life (88.8%)." <sup>43</sup>

In the study 'The mental health situation in Spain 2023'<sup>43</sup> carried out by the Mental Health Confederation in Spain, the surveyed group of people were asked to answer the following question:

*'Thinking about the current situation, and what we are going through as a society, what best describes how you feel?'*

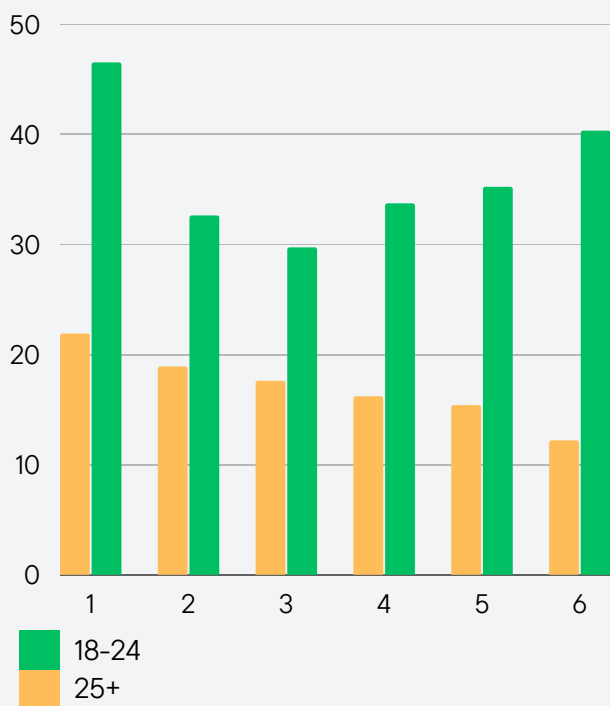


The majority of respondents were concerned (44.9%) about the current situation and felt worried about the uncertainty of the future.

---

<sup>43</sup> Confederación SALUD MENTAL España, *La situación de la Salud Mental en España 2023*. <https://www.consaludmental.org/publicaciones/Estudio-situacion-salud-mental-2023.pdf>

The survey also encompassed a series of statements. Divided into 2 different age groups, the respondents were prompted to choose the ones they were in agreement with:



1. *I'm not satisfied with my physical appearance*
2. *I feel lonely*
3. *I do not feel integrated in my work, school or academic environment*
4. *I am very concerned about what other people think of me*
5. *I worry about not fitting into society*
6. *I constantly compare myself to others*

After analysing the impact of COVID-19 on the mental health of the Spanish population we reach the conclusion that it has been profound and far-reaching. The pandemic brought about a multitude of challenges that disrupted routines, social interactions, and economic stability. The enforced isolation restrictions on activities and uncertainties surrounding the virus have created an environment where anxiety, depression and feelings of loneliness are on the rise.

The shift to remote work and online learning further blurred the boundaries between personal and professional spaces, leading to increased stress. The loss of loved ones due to the virus, coupled with the fear of contagion, added to the collective emotional burden.

As Spain moves forward after the pandemic it's evident that we need a strategy to tackle the lasting mental health effects. It's essential to raise awareness, provide resources and reduce the stigma around seeking support. These steps will strengthen our society enabling us to face mental well being challenges with greater resilience.

## Sweden

The COVID-19 pandemic and the infection prevention measures have had significant effects on the living conditions and lifestyles of young people and young adults in Sweden. A report has been developed to examine how the pandemic and infection prevention measures have affected the health, lifestyles, experiences, and perceptions of young people in 2021.

The report is based on responses from a national public health survey and a literature review. In addition, two interview studies were conducted to obtain a more in-depth understanding of the experiences and perceptions of young people.

Overall, the results from the national public health survey indicate that health and lifestyles among young people (aged 16–29) have changed little in 2021 compared to before the COVID-19 pandemic. However, certain groups of young people have been affected more by the pandemic. In two interview studies were conducted with young people who neither worked nor studied and young people in northern Botkyrka (municipality in Stockholm County) to obtain a more in-depth understanding of their experiences and perceptions. The results show that for young people who were already living in socially, economically, or healthily vulnerable situations, the pandemic has interacted with their previous living situations and, in some cases, exacerbated existing challenges.<sup>44</sup>

The international literature review from the first year of the pandemic shows that some changes have occurred in the lifestyles and health of young people, but it is difficult to determine the extent of these changes.

---

<sup>44</sup> Lundström, M. (2022). *Synchronization of the Corona Crisis. Time & Society*, p.0961463X2110576. doi: <https://doi.org/10.1177/0961463x211057622>.

It is crucial to continue monitoring the developments, particularly with a focus on groups living in socially, economically, or healthily vulnerable situations. The report recommends strengthening and prioritising health promotion and prevention work to maintain good public health and reduce health disparities. This work needs to focus on structural factors at all levels of society and in all sectors to create good living conditions, reasonable livelihood opportunities, good education, and secure housing for all. <sup>45</sup>

---

<sup>45</sup> Lundström, M. (2022). *Synchronization of the Corona Crisis. Time & Society*, p.0961463X2110576. doi: <https://doi.org/10.1177/0961463x211057622>.

# Needs Analysis

Even before the COVID-19 pandemic, only a small percentage of people who needed it had access to quality, affordable and effective mental health care. For example, 71% of people with psychosis worldwide do not receive mental health services. While in high-income countries 70% of people with psychosis receive treatment, in low-income countries only 12% of people with psychosis receive mental health care.<sup>46</sup>

When it comes to depression, the gaps in service coverage are wide in all countries: even in high-income countries, only a third of people with depression receive formal mental health care and it is estimated that treatment minimally adequate against depression ranges from 23% in high-income countries to 3% in low- and lower-middle-income countries.<sup>46</sup>

## Professional Help

The increase in the prevalence of mental health problems has coincided with severe disruptions to mental health services, leaving huge gaps in care for those who need it most. For much of the pandemic, services for mental, neurological and substance use conditions were the most disrupted among all essential health services reported by WHO<sup>47</sup> Member States. Many countries also reported major disruptions in life-saving services for mental health, including for suicide prevention.

---

<sup>46</sup> <https://www.who.int/news/item/17-06-2022-who-highlights-urgent-need-to-transform-mental-health-and-mental-health-care>

<sup>47</sup> WHO (World Health Organisation) <https://www.who.int/>

### **Dipartimento di salute mentale - Department for mental health**

Represents all the structures and services that have the responsibility of taking in charge any requests related to care, assistance and the protection of the mental health of people. It has the following services: Centers for Mental Health, Daily Care Centers, Residential Structures and Hospital Structures. This offer is integrated with the collaboration of university clinics and private health institutions.

### **Centres for Mental Health**

It is the main institution of reference for citizens experiencing psychological difficulties. It coordinates at a local level all the interventions of prevention, care and rehabilitation of citizens that present psychiatric pathologies.

It provides the following services:

- Psychiatric and psychotherapy, social interventions, hospitalisation and recovery of people towards Daily Care centres
- Visits, diagnostic and psychiatric interviews in order to develop an individualised assistance plan and therapy
- Coordination with general practitioners in order to provide information, assistance and training with a 24/h hotline for doctors for counselling and intervention
- Specialistic consultancy for "borderline" services, such as dependencies
- Filters requests for hospitalisation and visits from private entities
- Collaboration with local public and private entities for the improvement of their services

It is requested that the centre provides availability, for at home services, at least 12 hours a day for 6 days a week.

---

<sup>48</sup> <https://www.salute.gov.it/portale/saluteMentale/dettaglioContenutiSaluteMentale.jsp?lingua=italiano&id=168&area=salute%20mentale&menu=vuoto>

### **Centro Diurno - Daily Care Centre**

The Daily Care Centre is a semi-residential structure with rehabilitative and therapeutic functions, located on a local level. It is commonly open for 8 hours a day for 6 days a week. It has an internal team, completed by professionals from social cooperatives and volunteering associations and has adequate spaces to receive patients. It can also provide resources for therapeutic paths and experiment self care in daily life and in interpersonal and group relations with the goal of finding work. It can be managed by both public and private entities upon approval of criteria.

### **Residential Structures**

An extra-hospital structure in which to implement the rehabilitative and therapeutic individualised path for those people sent by the Centre for Mental Health. They are differentiated based on the intensity of the care (24h, 12h, and hourly periods) and have no more than 20 beds. They are located in urban and easy accessible places. It can be managed by both public and private entities upon approval of criteria.

### **Psychiatric, Diagnostic and Care Services**

It is a hospital service where voluntary psychiatric treatments are implemented in the form of self-recovery. They are a section within other hospital structures. They are an integral part of the Department of Mental Health, even when the hospital in which they reside is not managed by the same institution. Generally the bed number is proportional to one per 10.000 inhabitants. Usually it has no more than 16 available places.

### **Psychiatric Day Hospital**

It is an area of semi residential assistance for diagnostic and therapeutic services in the short and medium term. It can reside inside a hospital, with a functional link to the Psychiatric, diagnostic and Care Services division. It can also reside inside external structures, linked with the Mental Health Centres. It is commonly open for 8 hours a day for 6 days a week.

It has the responsibility to:

- allow varied and complex diagnostic interventions
- start pharmaceutical treatment
- reduce the numbers of hospitalisation and/or reduce their duration

The patient can access based on programs coordinated with the professional of the Daily Care Centre. The independent regions define the number of resources and beds available.

## Spain

Mental health has been a concern in Spain for a while, as there are noticeable shortcomings in the system. These deficiencies encompass different aspects, including funding and limited accessibility.

According to a survey conducted in September, nearly the same percentage of respondents sought professional help during the pandemic (11.4%) for their mood or emotional well-being as in the twelve months preceding the health crisis (11.1%).

One of the main problems in the healthcare system in Spain is the number of professionals. Even before the pandemic, Spain struggled with a shortage of psychiatrists, ranking among the countries with the lowest number of psychiatrists per 100,000 inhabitants (11.84), as indicated by Eurostat<sup>49</sup> data from 2019.

The *Libro Blanco de la Psiquiatría en España, 2023* (White Paper on Psychiatry in Spain)<sup>50</sup>, is a document that aims to "provide real data on the current situation of psychiatry in Spain" to enable decision-making and "improve mental health".

According to this report of more than 150 pages, a total of 4,393 psychiatrists currently work in the public mental health care network, which means a ratio of 9.27 psychiatrists per 100,000 inhabitants (11.5 if psychiatrists in training are included).

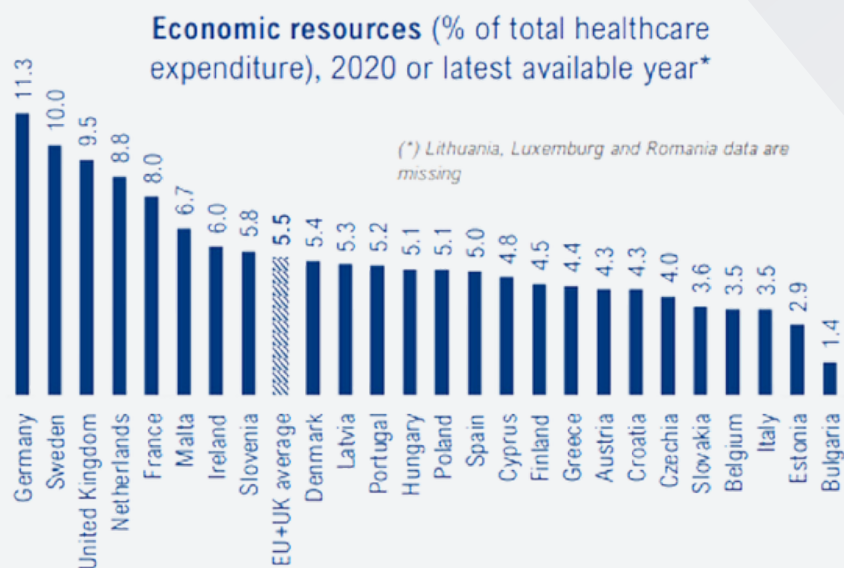
---

<sup>49</sup> <https://ec.europa.eu/eurostat>

<sup>50</sup> Sociedad Española de Psiquiatría y Salud Mental (2023), *Libro Blanco de la Psiquiatría en España* [https://sepsm.org/wp-content/uploads/2023/06/Libro-Blanco-de-la-Psiquiatria-en-Espana\\_SEPSM-ok.pdf](https://sepsm.org/wp-content/uploads/2023/06/Libro-Blanco-de-la-Psiquiatria-en-Espana_SEPSM-ok.pdf)



In addition to the lack of human resources, Spain is also among the countries with the lowest percentage of budget allocated to mental health. As reflected in the chart below, Spain would only allocate 5% of its health budget to mental health in 2020, a far cry from countries such as Germany and Sweden, which invest 11.3% and 10% respectively. This information was gathered in the 'Headway 2023 - Mental Health Index' <sup>51</sup>.



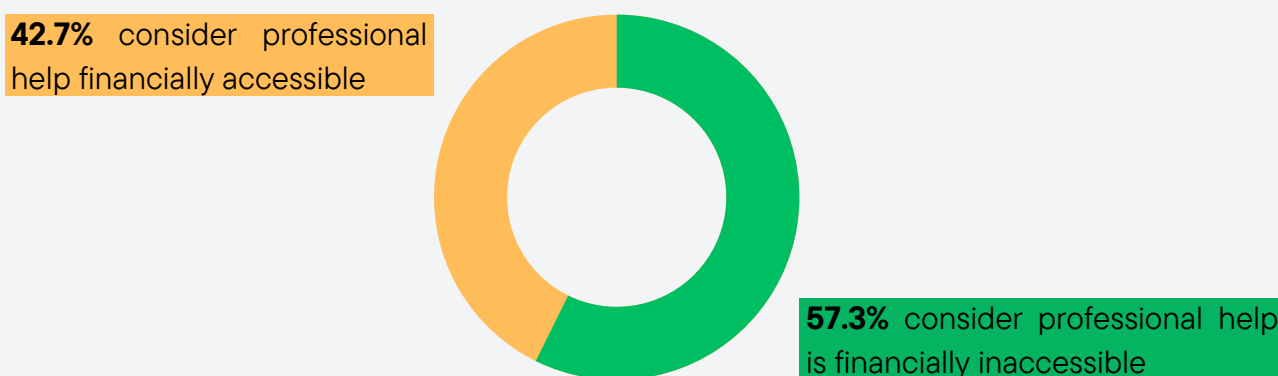
The availability of psychological care is further strained by lengthy waiting lists, ranging from 27 days in Andalucía to 71 days in Murcia, according to data from ten autonomous communities analysed in a Civio study. Consequently, individuals with conditions such as anxiety or depression are pushed towards the private healthcare system, creating a significant barrier to accessing treatment. Accessing a professional in this field is more expensive in Spain compared to countries like Sweden, the United Kingdom, Germany, or Finland (Source: Civio / EDJNet) <sup>52</sup>. The COVID-19 pandemic has further exacerbated this issue, causing disruptions in healthcare services worldwide.

<sup>51</sup> Headway - Mental Health Index 2.0: A new roadmap in Mental Health [https://eventi.ambrosetti.eu/headway/wp-content/uploads/sites/225/2022/09/220927\\_Headway\\_Mental-Health-Index-2.0\\_Report-1.pdf](https://eventi.ambrosetti.eu/headway/wp-content/uploads/sites/225/2022/09/220927_Headway_Mental-Health-Index-2.0_Report-1.pdf)

<sup>52</sup> CIVIO, *Pagar o esperar: cómo Europa -y España- tratan la ansiedad y la depresión* <https://civio.es/medicamentalia/2021/03/09/acceso-a-la-salud-mental-en-europa-espana/>

On the perception of the resources allocated to mental health, 48.9% of the general population consider with a value of 1 on a scale of 1 to 5 that not enough resources are allocated. Similarly, the majority of the general population considers that the number of professionals is insufficient (54.9%) and that waiting times are long (56.6%).

The majority (57.3%) consider that going to a mental health professional is financially inaccessible, being this opinion higher among women (63.0%) and people from lower and lower middle class (62.6%).<sup>53</sup>



Spain is among the countries with the highest consumption of psychotropic drugs. However, the recommendations of clinical guidelines for the treatment of depression and anxiety (by far the most common in the population) indicate psychotherapy as the first treatment option. In Spain, as in the rest of the world, there is a significant treatment gap. It is estimated that around 40% of people who need specialised treatment are not receiving it.

These findings highlight the requirement for funding in mental health services and improving the availability of psychological assistance in Spain. Taking action to address the lack of professionals, reducing wait times and advocating for evidence based treatments are measures to bridge the gap in treatment and ensure the welfare of individuals seeking health support.

---

<sup>53</sup> Confederación SALUD MENTAL España, *La situación de la Salud Mental en España 2023*. <https://www.consaludmental.org/publicaciones/Estudio-situacion-salud-mental-2023.pdf>

## Sweden

The support you can get is determined by different laws, for example the Special Support and Service Act (LSS) and the Social Services Act (SoL). Examples of support in case of mental illness can be accommodation support, personal representative, contact person, and companion. The application process for mental health support is offered by the municipality in which you are a resident and the application must be done through this municipality.<sup>54</sup>

The National Association for Social and Mental Health (RSMH) is an organisation for people with personal experience of mental and social ill health, their relatives and others who want to support the association's work. People who live with mental illness and loneliness can find support through this organisation which will facilitate socialising with others in the same situation. RSMH also works with opinion formation to counteract prejudices and for care and service to be a universal right.<sup>55</sup>

---

<sup>54</sup> www.funktionshindersguiden.se. (n.d.). *SoL och LSS vid funktionsnedsättning*. [online] Available at: <https://www.funktionshindersguiden.se/lagar-och-myndigheter/sol-och-lss-vid-funktionsnedsattning/>.

<sup>55</sup> rsmh. (n.d.). *Snacka psykisk ohälsa*. [online] Available at: <https://rsmh.se/snacka-psykisk-ohalsa/> [Accessed 28 Apr. 2023].

# Initiatives, programmes or projects that support the youth's mental health

**Italy** 

## **UNICEF**

To respond to the growing psychosocial unease, Unicef in Italy has launched a series of activities with scientific partners, professional associations and sector associations: from the Memorandum of Understanding with the Agostino Gemelli University Hospital Foundation on the #Withyou project, to the Petition 'Health for the mind of children and adolescents', to request greater investments for the prevention, promotion and protection of the mental health of adolescents and their families, which has reached around 8.000 members. From the activities we carry out in schools through the "Scuola Amica" program, to the document 'Things to do, Agenda for childhood 2022-2027', which intends to present to the Government and Parliament the priority actions that should be implemented during this legislature in favor of childhood and adolescence, in which the safeguarding and protection of the mental health and psychosocial well-being of children and adolescents is a fundamental point. Furthermore, among the various initiatives supported in favor of migrant and refugee girls and boys in Italy, particular attention is paid to supporting the assistance and social inclusion of the many Ukrainian children who have arrived in our country with their families, or often alone, and for which the full realization of their rights must be guaranteed".<sup>56</sup>

## **Save the Children - Riscriviamo il Futuro**

Podcast "Adolescence and mental health" - designed to collect testimonials from adolescents regarding their experiences and their narratives about the impact of the pandemic.<sup>57</sup>

---

<sup>56</sup> <https://www.agenzianova.com/en/news/unicef-%E2%80%8B%E2%80%8Bnecessary-to-protect-the-mental-health-of-children/>

<sup>57</sup> <https://www.savethechildren.it/blog-notizie/salute-mentale-cosa-ne-pensano-i-giovani-di-you-future>

## **Fondazione Cariplo**

Attenta-mente - a call for proposals for projects aimed at intercepting, involving, supporting and counselling children and adolescents with psychological, emotional, relational difficulties with particular focus on those minors and families that cannot afford private services and neither attend to the long waiting list of the public sector.<sup>58</sup>

## **Fondazione Compagnia di San Paolo**

A call for proposal for projects focused on the prevention and promotion of wellbeing and mental health for young people, with specific regard to inequalities in terms of access to services and opportunities, with the objectives of identifying and overcoming situation of isolation, exclusion, solitude and vulnerability among the young population.<sup>59</sup>

<https://childhelplineinternational.org/youth-mental-health-the-experience-of-the-italian-helpline/>

## **Telefono Azzurro**

Telefono Azzurro commits to welcoming, fighting and monitoring children and adolescents' mental health issues on a daily basis. The wellbeing of the youngest in the society is constantly endangered on multiple levels, last but not least the online world: the pandemic made abundantly clear the urgency to prioritize and address the topic. Data collected in the past two years underline an exponential growth of mental health related matters due to stress factors such as the duration of limitations, fear, frustration, boredom and the lack of social contacts. Covid-19 also exacerbated the situation of minors struggling with previous mental health problems, as studies show how emergency room accesses in Italy caused by self-harm and attempted suicide significantly increased even representing in some cases a higher demand than the actual accomodation capacity.

---

<sup>58</sup> Fondazione CARIPLO (giugno 2023), *Attenta-mente*  
[https://www.fondazionecariplo.it/static/upload/ban/0001/bando\\_attenta-mente\\_2023.pdf](https://www.fondazionecariplo.it/static/upload/ban/0001/bando_attenta-mente_2023.pdf)

<sup>59</sup> <https://www.compagniadisanpaolo.it/it/contributi/salute-effetto-comune-salute-mentale-comunita-giovani-generazioni/>

**THE SUICIDAL BEHAVIOUR HOTLINE 024: has received more than 34.000 calls since its start-up on the 10th of May, 2022.**

The 024 helpline is dedicated to providing support to individuals experiencing suicidal thoughts, ideations, or at risk of suicidal behavior, as well as their families and loved ones. Their trained professionals offer emotional support through active listening, aiming to provide a safe space for individuals to express their feelings and concerns.

**PLAN DE ACCIÓN DE SALUD MENTAL 2022-2024**<sup>60</sup>

The objective of this action plan is to enhance mental health and address the repercussions of the COVID-19 pandemic and other contributing factors on mental well-being. By offering a valuable resource, their goal is to improve the emotional well-being of the population, deliver comprehensive care to individuals with mental health challenges, extend support to their families, and foster a model of holistic and community-based care that promotes recovery and social integration.

**PROMES-U**<sup>61</sup>

This research focuses on investigating the factors that contribute to compromised mental health and implementing preventive measures accordingly. The study aims to achieve the following objectives:

- Develop a personalised assessment of mental health risks in students, considering both short-term and long-term risk and protective factors.
- Implement and evaluate interventions aimed at promoting mental health, including the distribution of personalised mental health reports and an online program for preventing mental disorders.

---

<sup>60</sup> Ministerio de Sanidad, *Plan de Acción de Salud Mental 2022-2024*  
[https://www.sanidad.gob.es/organizacion/sns/planCalidadSNS/docs/saludmental/PLAN\\_ACCION\\_SALUD\\_MENTAL\\_2022-2024.pdf](https://www.sanidad.gob.es/organizacion/sns/planCalidadSNS/docs/saludmental/PLAN_ACCION_SALUD_MENTAL_2022-2024.pdf)

<sup>61</sup> <https://www.promesinfo.org/participa>

## **Plataforma Nacional para el Estudio y la Prevención del Suicidio**<sup>62</sup>

The objective of the National Platform for the Study and Prevention of Suicide is to enhance the epidemiological monitoring of suicide in Spain by utilizing accurate and scientific data. Their aim is to bridge the gap between mental health centres, the community, and the general population, providing accessible and reliable information. Through this platform, their goal is to raise social awareness by sharing scientific data. It is crucial to highlight the extent of the issue to develop effective tools for suicide prevention.

## **Sweden**

The **Public Health Agency** of Sweden spearheads the national effort to promote mental health and prevent mental illness and suicide. This is done through a systematic analysis of new developments within the field of mental health paired with the dissemination of information that promotes societal and individual involvement in the promotion of mental health. To do this the Public Health Agency compiles and conveys new knowledge on the subject through a lens of promotion and prevention.

These efforts take a number of different forms from coordination, and communication to strategy development. Through these diverse sets of actions, the Health Authority's aim is to destigmatize mental illness and sponsor societal involvement in the promotion of mental health. Moreover, by coordinating with a wide variety of actors such as regions and municipalities the agency is able to raise awareness of mental health from the bottom up, by distributing knowledge through schools, social services, and health care.<sup>63</sup>

---

<sup>62</sup> <https://www.plataformanacionalsuicidio.es/>

<sup>63</sup> www.folkhalsomyndigheten.se. (n.d.). *Nationella folkhälsomål och målområden*. [online] Available at: <https://www.folkhalsomyndigheten.se/om-folkhalsa-och-folkhalsoarbete/tema-folkhalsa/vad-styr-folkhalsopolitiken/nationella-mal-och-malomraden/> [Accessed 28 Apr. 2023].

Mental Health in children and young people is a central tenant of these efforts by the Public Health Agency. Therefore, the agency has carried out several initiatives to promote the mental and somatic wellbeing of young people nationwide. This is particularly true as young people (aged between 16-29) report greater levels of mental stress, with particularly high levels in girls and young women. However, it is important to note that self-reporting in this aspect has decreased in recent years, with only 22 percent of young people responding to the survey in 2022. Consequently, it is unclear if the data is representative of this age group as a whole.<sup>64</sup>

To prevent these disparities in mental health the Swedish Riksdag (Parliament) has adopted the **Public Health Policy** with the aim of creating a nationwide public health policy, putting emphasis on equal health. This initiative has eight central target areas, all of which focus on creating equal opportunities for all citizens starting from childhood. For young people, the emphasis is on equal educational opportunities and the promotion of a healthy lifestyle. These targets entail: a good learning environment; an equal education system for all; early identification and intervention in order to avoid school failure; limited availability of harmful products; increased access to healthy products and activities; and an active push by welfare organisations to promote healthy lifestyles. Work to enact this initiative began in 2021 with the aim to create equal health in the nation within a generation.<sup>65</sup>

---

<sup>64</sup> www.folkhalsomyndigheten.se. (n.d.). *Statistik psykisk hälsa – Folkhälsomyndigheten*. [online] Available at: <https://www.folkhalsomyndigheten.se/livsvillkor-levnadsvanor/psykisk-halsa-och-suicidprevention/statistik-psykisk-halsa/>.

<sup>65</sup> www.folkhalsomyndigheten.se. (n.d.). *Nationella folkhälsomål och målområden*. [online] Available at: <https://www.folkhalsomyndigheten.se/om-folkhalsa-och-folkhalsoarbete/tema-folkhalsa/vad-styr-folkhalsopolitiken/nationella-mal-och-malomraden/> [Accessed 28 Apr. 2023].



# Entities, organisations and associations that support the youth's mental health

## *Italy*

### **Ministero della Salute**

The Law 180 “Reform of Psychiatric Care” was the first act worldwide to abolish mental asylums, reshaping psychiatry and building a new system for recovery. Now, as then, the rights of the patients remain key aspects in the delivery of services within the Italian mental health care system, which aims at providing hospitality instead of hospitalisation.

### **Autorità Garante per l'Infanzia e l'Adolescenza - The Authority for Childhood and Adolescence**

Promotes scientific research at a national level regarding minors and their development. In particular, the Authority has the responsibility of promoting and implementing the right to health and wellbeing for minors and their equal access to care and to signal to the Government and to other institutions those initiatives and policies necessary for the protection of these rights.

### **Il Dipartimento per le politiche della famiglia e il Centro Nazionale di documentazione e analisi per l'infanzia e l'adolescenza - The Department for family politics and the National Center for documentation and analysis for childhood and adolescence**

Under the request of the Ministry, coordinates the national efforts in the area of all childhood and adolescence policies. The Center is dedicated to the promotion, information and communication of those policies favourable to the healthy development of childhood and adolescence through research, analysis, monitoring and archiving of all initiatives and research on the topic of the minor's environment.

## Spain

### **Confederación SALUD MENTAL España** <sup>66</sup>

The Confederation manages a wide range of social intervention programmes at a national level that it offers to its member organisations so that, from a local level, they can provide direct care for people with mental disorders and their families.

Programmes that aim to promote comprehensive support or job placement, initiatives that cover specific needs such as those of people with mental illness who are in prisons or that promote the exercise of these people's rights.

In addition, another series of programmes are carried out with the aim of facilitating the enjoyment of leisure and free time for this group, offering support to their families and relatives or promoting their autonomy by offering them access to housing.

### **CIBERSAM** <sup>67</sup>

CIBERSAM is made up of 23 clinical, preclinical and translational research groups belonging to 8 different autonomous communities in Spain. These groups, selected competitively among those with the highest scientific productivity in the country, are mainly dedicated to the study of mental disorders such as depression, schizophrenia, bipolar disorder, as well as anxiety disorders and mental disorders in children and adolescents or therapeutic innovation.

Its mission is to provide answers and solutions that allow a better understanding of mental disorders, improving the promotion of mental health, prevention and current treatments and thus improving the quality of life of citizens.

In addition to these main entities and institutions, each region in Spain has various associations of parents, young people and families, which strive daily to improve the well-being of the population through different programmes to help young people with mental illnesses.

---

<sup>66</sup> <https://consaludmental.org/servicios/>

<sup>67</sup> <https://www.cibersam.es/quienes-somos>

## Sweden

The principal actor in Sweden that aims to promote mental health and the prevention of mental illness is the **Public Health Authority**. In 2019 this entity was tasked with developing a structure to support nationwide public health, this culminated in the previously mentioned Public Health Policy. However, the promotion of mental help is cross-sectional and ranges across all levels of government. This is to say that while the Public Health Authority is tasked with the nationwide approach to this phenomenon, entities at all levels work together in such a way as to create a streamlined method to generate data and to prevent mental health issues. These entities include actors on regional level as well as the municipal level. At these levels we see the use of institutions such as schools, social services, and public health centres to promote mental health awareness.<sup>68</sup>

To achieve these goals the **Public Health Authority**, together with regional and municipal bodies, disperse information and promote the destigmatizing of mental illness.<sup>69</sup> To reach young people and young adults these bodies offer a variety of services that include self-reporting, individual and group therapy, among other such programs.

These programs have long played an important role in the Swedish government's aim of offering good health to all their citizens equally, regardless of economic status or place of origin. As stated in the Health Behaviour in School-Aged Children (HBSC) study, conducted by the Public Health Authority of Sweden in collaboration with the World Health Organization (WHO), the Swedish government has emphasised targeting children and adolescence in public health initiatives as the formative years in life are vitally important for the creation of healthy habits. To this end, the Public Health Authority of Sweden has been tasked with monitoring the health of young people to issue new initiatives to tackle evolving challenges that may arise.<sup>70</sup>

---

<sup>68</sup> www.folkhalsomyndigheten.se. (n.d.). *Nationella folkhälsomål och målområden*. [online] Available at: <https://www.folkhalsomyndigheten.se/om-folkhalsa-och-folkhalsoarbete/tema-folkhalsa/vad-styr-folkhalsopolitiken/nationella-mal-och-malomraden/> [Accessed 28 Apr. 2023].

<sup>69</sup> www.folkhalsomyndigheten.se. (n.d.). *Vad gör vi och andra? – Folkhälsomyndigheten*. [online] Available at: <https://www.folkhalsomyndigheten.se/livsvillkor-levnadsvanor/psykisk-halsa-och-suicidprevention/psykisk-halsa/>

<sup>70</sup> *Skolbarns hälsovanor i Sverige 2013/14 Grundrapport*. (n.d.). Available at: <https://www.folkhalsomyndigheten.se/contentassets/fbcbd76d2cae4fc0981e35dddf246cf0/skolbarns-halsovanor-sverige-2013-14.pdf> [Accessed 28 Apr. 2023].

# **Survey Questionnaire findings**



**46.7%** of the respondents think they suffer (have suffered) from a mental illness.  
However, only the **29.9%** have been diagnosed.

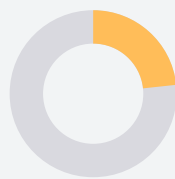


**18.2%** of respondents have been medicated because of a mental illness.



**67.5%** of respondents affirm they know someone who suffers (has suffered) from a mental illness.

## **Professional help**



Only the **23.3%** of respondents affirm they have access to quality professional help for mental health.


**41.5%** of respondents have never sought professional help





**16.9%** have sought professional help and don't feel satisfied with the service.

**19.4%** of respondents have sought professional help in regards to their mental health and feel satisfied.

**When posed with the question 'Do you think the government in your country provides professional help that is of quality and accessible for all?':**


 Among Spanish respondents, a clear majority (**86.1%**) expressed negative sentiments. They claimed limited accessibility, poor service quality and extensive waiting lists for public professional help. The scarcity of professionals within the public healthcare system often leads to significant gaps between appointments. All of the deficiencies in the public system drive people to resort to the private professionals, which are often too expensive.


 Italian respondents similarly demonstrated a prevailing negative perception of the Italian mental health system (**80.7%**). Some respondents noted the situation of accessible yet poor-quality assistance, while others emphasized the high costs and inaccessibility of quality professional help.

 Conversely, Swedish respondents displayed predominantly positive sentiments towards their mental health system. A significant majority (**73.3%**) affirmed that the Swedish healthcare system is capable of providing the necessary assistance and support, accessible to all. Only a minority (**26.7%**) held an opposing view.

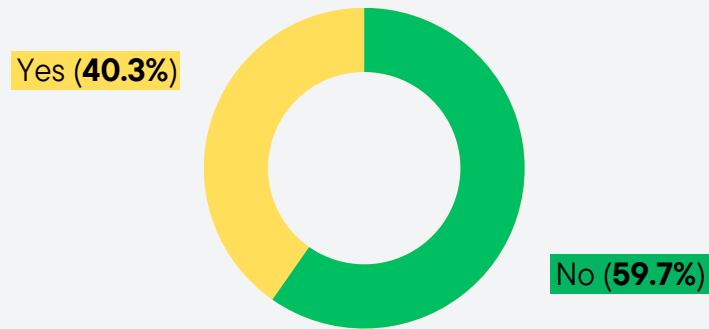
***The respondents personal experience with the mental health support offered by their countries health system:***

 Only **33.3%** of Spanish respondents have reported positive experiences with the professional assistance they sought, often resorting to the private healthcare system for higher-quality treatment. The remaining **66.7%** highlighted the inadequacy of resources within the public health system, leading to an overall negative perception of their experience with it.

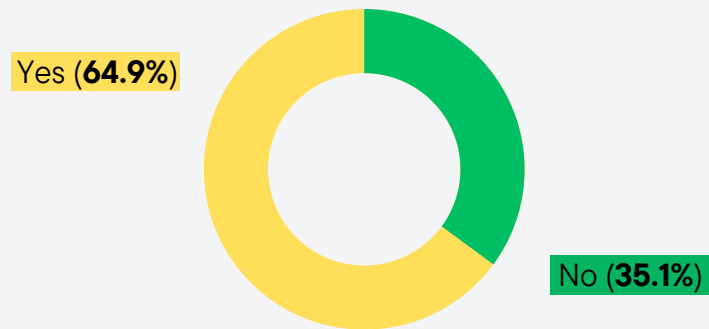
 Among Italian respondents, all of them noted that public services lack effectiveness due to limited resources. The general experience with private mental health professionals is favorable, though some expressed concerns about how expensive they are.

 The majority of Swedish participants have minimal experience in seeking professional help for their well-being. Among those who did, most found it highly beneficial. However, two respondents voiced dissatisfaction with the extended waiting period for treatment access, which not only renders it inaccessible but also fails to provide timely support, especially for severe conditions.

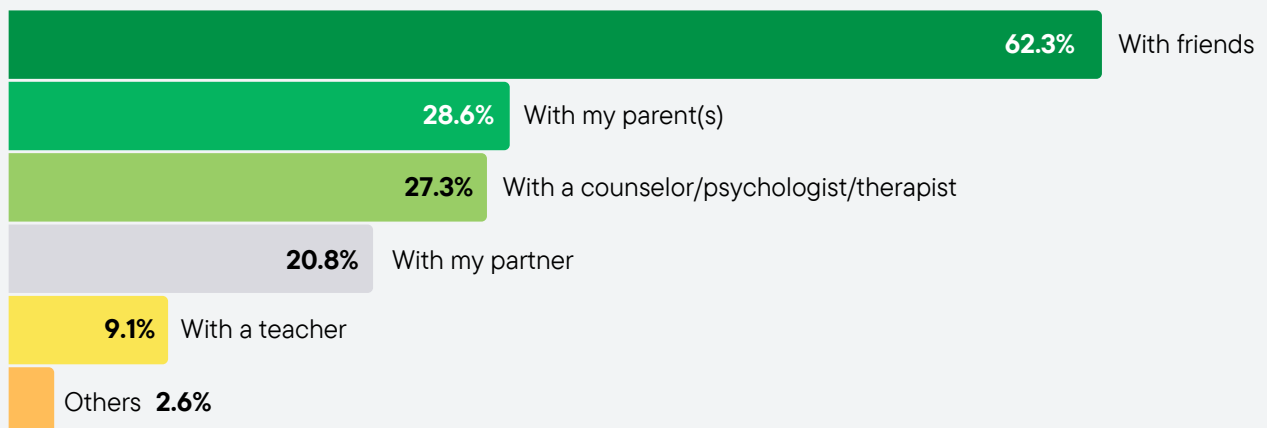
**'Has your school/university/company ever organised seminars, formations or other programmes about mental health?'**



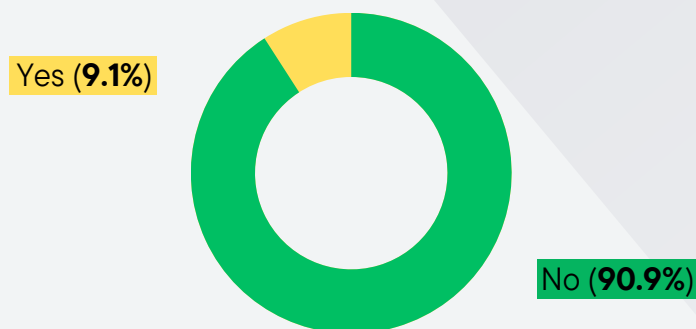
**'Do you usually have safe and open conversations about your mental health?'**



**'If yes, with whom?'**




### **'Have you ever participated in a project about mental health?'**





A small proportion of respondents (**9.1%**) have previously participated in mental health projects, including those that use non-formal methodologies like art therapy or theatre workshops, while the **90.9%** have not taken part in any mental health projects before.

## **The Impact of COVID-19 on mental health**

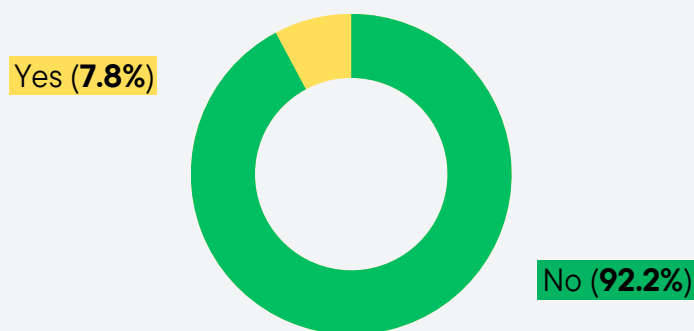
### **'How has COVID-19 impacted your mental health?':**

 The experiences of Spanish respondents varied greatly when it came to the impact of the pandemic on their well being. While some claimed that it had no effect on them, others mentioned that it intensified feelings of anxiety, depression or even led to the development of eating disorders.

 Italian respondents expressed predominantly negative sentiments (**69.3%**), asserting that the pandemic worsened existing mental health issues or even caused new ones to arise. 6 participants remained neutral stating that the pandemic didn't affect their health, or discussing both negative and positive aspects of the isolation and confinement measures, Some even found solace in the isolation as it gave them a chance for self reflection, a break from work or school and an opportunity to heal,

 On the other hand, Swedish respondents reported that they didn't really feel an impact from Sweden's relatively mild confinement and isolation measures. Furthermore, the Swedish government implemented support systems for workers, preventing significant economic challenges. Some mentioned that the pandemic provided them with a chance to address anxiety without societal pressures. However, 8 individuals found the uncertainty surrounding the pandemic particularly challenging, and claimed that it weighed heavily on them, their families and friends.

**'Do you know of any projects/entities that have offered support to young people AFTER the pandemic?'**



Among the few participants that responded positively to the question, the following entities were mentioned:

**Awake-Gasteiz** is an association in Vitoria, Spain that promotes the emotional education of young boys and girls between the ages of 16 and 22 through the application of experiential workshops, helping them to self-know their innate abilities and virtues and thus facilitating them to channel their objectives and efforts. to develop creatively and fully.

Its purpose is to accompany sensitive, restless and curious young people to discover who they really are, what their place in the world is and what direction they want to give their lives.

<https://www.awakegasteiz.org/>

The **JEDAIS Association** is a youth association in La Rioja, Spain that uses a method based on Emotional Intelligence, Coaching and Neurolinguistic Programming (NLP) worked through non-formal education and sociocultural animation.

The main objective of the JEDAIS Association is for young people to have a training space (training) where they can promote self-knowledge for learning and development of transversal skills essential for the life of an adult, such as interpersonal communication, decision-making, leadership, commitment, teamwork, creativity, conflict resolution, responsibility, empathy, or knowing how to work under pressure, among others.

<https://www.jedais.org/>

**MIND** is a mental health organisation in the UK that provides advice and support to empower anyone experiencing a mental health problem. They campaign to improve services, raise awareness and promote understanding. They empower people to understand their mental health and the choices available to them.

<https://www.mind.org.uk/>



# ARTISTIC METHODOLOGY

The project, **MINDful Theatre**, is a KA2 funded by Erasmus+ that defends the use of artistic methodologies, such as scenic and plastic arts, for the well being of young people.

## ***Artistic methodologies for mental health***

Art has consistently demonstrated its effectiveness in engaging young people and offering them a safe and creative space for sharing and expressing their concerns. The field of arts has gathered increasing evidence that links it to health outcomes. Numerous reports and medical literature reviews underscore the mental health advantages of artistic engagement for individuals and communal well-being. For instance, the following article concludes:

*'Study participants reported arts activities as an important resource for managing negatively perceived emotions, such as stress, anxiety, depression, and sadness. The management of these emotions can occur in different ways, because arts activities help either to transform these emotions, to vent or express them or to distract from them.'*<sup>71</sup>

For young people, being involved in such activities promotes positive growth, including improved social skills and positive changes in behaviour. Engaging in artistic activities also boosts self-esteem, a sense of accomplishment, empowerment, and social adaptability. These qualities collectively contribute to their development and resilience. Beyond individual impact, the influence of arts radiates to the community level. The engagement fosters connections that effectively counteract feelings of loneliness and isolation. While it doesn't replace treatment art can complement therapy and self care practices by offering an satisfying avenue for enhancing mental health.

---

<sup>71</sup> Gómez-Restrepo, C., Casasbuenas, N.G., Ortiz-Hernández, N. et al. Role of the arts in the life and mental health of young people that participate in artistic organizations in Colombia: a qualitative study. BMC Psychiatry 22, 757 (2022). <https://doi.org/10.1186/s12888-022-04396-y>

ON&OFF was established in April of the year 2000 with the primary goal of fostering cultural and artistic initiatives while creating inclusive and intercultural spaces for the participation and understanding of all its members, as well as the broader society and youth in La Rioja, Spain. Their pedagogy revolves around utilising performing arts, particularly theatre, to delve into topics that resonate with young people. They engage them in learning, experimentation, and group performances, actively participating in local, national, and international events, meetings, exchanges, and competitions. Collaborating with entities and local administrations interested in areas like inclusion, combating rural depopulation, and mental health, they conduct research, develop training courses, workshops, and multicultural, intergenerational activities involving individuals with diverse abilities.

The methodology offers young people innovative learning approaches that not only enhance their theatre skills but also foster personal growth, initiative, and an entrepreneurial spirit. Moreover, their non-formal and theatrical methodologies ensure that all activities are accessible and suitable for individuals of varying backgrounds, encouraging the participation of those with limited opportunities, as well as those facing challenges related to mobility, expression, and communication.

ON&OFF has experience in creating safe environments where young people can freely express their thoughts, emotions, contradictions, and actions. They implement protocols that empower them to make effective decisions and intervene with their peers.



Their focus extends to promoting healthy lifestyle habits, building self-esteem, fostering a positive self-concept and self-image, enhancing critical thinking, and developing frustration management skills.

Emotionally, they train participants to identify their own emotions and those of others, acquire regulation strategies, analyse their social behaviours within their immediate circles (parents, friends, colleagues, neighbours, etc.), and engage with local society to empower them as agents of change and increase awareness surrounding mental health.

The stage activities dedicated to mental health improvement, which participants attend on a weekly basis, encompass several components:

**Psychophysical warm-ups:** these exercises encourage participants to release inhibitions, laughter, and any concerns or pressures they may be experiencing. They serve as a platform to identify daily life events that have had an impact and require expression. Through theatre training, individuals learn to locate emotions within their bodies, name and recognize them, embrace them, listen to them, and ultimately express them in a kind and authentic manner.



**Improvisation and role-playing:** these activities enable participants to develop courage by increasing self-confidence in different settings with new people each time. They facilitate the exploration of personal limits, dilemmas, and shared experiences.

Through various characters and expressive channels, participants can examine emotions, reactions, and enhance understanding and self-acceptance.

**Theatrical training:** provide a safe space for participants to explore, discover, and value ideas freely, reconnecting with their inner child and tapping into their innate creativity without fear of judgement. This space encourages them to release blockages and unleash their creative flow, fostering self-knowledge, connections with others, and a deeper understanding of the environment.

In the training, one of the significant obstacles we face is shame, which many individuals seek to overcome. While we cannot simply eliminate this emotion from our emotional repertoire, we can gain valuable insights from it. By understanding how shame manifests, recognizing its symptoms and forms, and accepting its presence, we can gather valuable self-awareness and self-understanding.

Another essential aspect of their work involves the creation of scenic pieces. To bring a performance to life, participants engage in a comprehensive process. They delve into documentation, reading, listening, learning concepts, engaging in debates, and exploring their own personal experiences, situations, and connections. Through this exploration, they draw upon their own resources, utilising their body, voice, and emotions to authentically portray scenes and bring them to the stage.



Among some of its associative aims, Calypso includes the promotion of wellbeing and participation. The interdependence between these two dimensions is the method with which Calypso approaches the work with young people: through paths which enable self-expression and the identification of one's needs and talents, we guarantee forms of collaboration that lead to performances, shows, podcasts, artistic projects and festivals.

The background of Calypso's trainers, which belong to the world of social theatre, of movement dance therapy and of teaching, provides an educational approach to each project that places more emphasis on the process rather than on the end result. In this regard, many theatre workshops, in particular those with mixed groups, often become an atelier, where much space is given to the creation and collective research phase. In these occasions the final product is more than often a festive performative event, providing the possibility of mixed participation to each and everyone. Within this protected environment of the theatrical dimension the possibility of exploring parts of oneself and to experiment the encounter with the other is generated<sup>72</sup>, translating the group as a space for the construction of meaning and bond. Each individual path is conceived through the collective group narrative that inhabits it, in a shared experience of personal and collective identity growth and reciprocity.<sup>73</sup> Thus Calypso promotes the creation of relationships and individual and community wellbeing, enforcing communication and self expressing, mediation and the management of conflicts, agency and initiative.

Born with a training around social theatre, in recent years Calypso extended its narratives, engaging with community development, participation, social inclusion, promotion of reading.

---

<sup>72</sup> Alessandra Rossi Ghiglione, Alberto Pagliarino, *Fare teatro sociale*, Dino Audino editore, 2007, pagg. 37 segg

<sup>73</sup> Alessandro Pontremoli "Il teatro educativo e sociale" in Pontremoli et al. *Teorie e tecniche del teatro educativo e sociale*, UTET, 2007

We have implemented projects of active citizenship and social inclusion promotion through immersive performances, collective readings, theatre, writing and art therapy laboratories. As far as the youngest are concerned Calypso involved them in workshops with different cultural languages (theatre, rap, podcast, urban regeneration) with the common threadline of an opening of the group to a larger social dimension, making sure that the process and the results are in dialogue with the context and the community of reference, in a transformative outlook.<sup>74</sup>

Among the latest Calypso projects for young people, we mention:

2023 - **Progetto LaivIn** - <https://progettolaivin.it/> - Calypso participates to a national project with a three years theatre workshop that involves secondary and high schools of one city in the province of Pavia with the objective to create theatre performances and a citizen theatre festival.

2022/23 **Actua Verde** - <https://www.focoeuropa.com/portfolio/actua-verde/> - an Erasmus+ project of awareness and communication on issues related to climate change and environmental sustainability with the shared creation of a festival in Spain.

2022 **Leggere per la fiducia** - <https://linktr.ee/leggereperlafiducia> - a project of collective reading of young adults books in collaboration with highschoools with the aim of creating a podcast and promoting reading.

Before Covid 19 pandemic, the most recent projects with youngster were:

**FesTeenval** (2017 - 2019) planning together and implementing a local festival with music, performances, exhibitions, workshops, debates, with the support of Pavia municipality and local ngos.

**GPS** (2018-2019) a project to offer juggling, theatre and photography workshops to marginalised youngsters, involving them in the planning of the FesTeenval days.

---

<sup>74</sup> Alberto Pagliarino, "Il teatro educativo e sociale fra etica ed estetica" in Alessandro Pontremoli et al, *Teorie e tecniche del teatro educativo e sociale*, UTET

Calypso adheres to the belief that it is fundamental to support the psychosocial development in its various age stages, promoting activities designed for listening and observation, to recognising and managing emotions, to cooperation and the development of personal resources of young people and children. We aim at providing positive models and reinforcing resilience and wellbeing. Supporting a sense of autonomy can become particularly significant in times of fear and uncertainty. To this respect it is useful to promote experiences and activities in which children and adolescents can assume an active role for themselves, their families and their communities. With these premises many Calypso projects aimed at young people prioritise the group dimension within which to define the awareness of the self.



*Il teatro è il luogo delle relazioni. Un ottimo strumento diagnostico per capire le dinamiche di gruppo e il tipo di comunicazione e di problemi che ognuno ha con gli altri. Essendo un luogo in cui si costruiscono e si scoprono le relazioni è anche terapeutico e socializzante per sua natura. Nello spazio protetto del teatro si rinnovano i riti quotidiani e nascono idee e progetti per il cambiamento non solo dell'individuo, ma della stessa società.<sup>75</sup> (Theatre is a place of relationships. A great analytical instrument for the dynamics of the group and the type of communication and the issues that one has with others. Being a place where relationships are built and discovered it is also therapeutic and socialising by its very nature. In the protected space of theatre we renew daily rites and ideas and projects are born about the change not only of the individual, but also about society itself.)*



Giving voice to the hypothesis of expanding the research and personal identification phase, related in particular to the need for recognition and acceptance of those parts of yourself that are in suffering, Calypso's trainers imagine using different artistic languages, experimented in recent projects related to mixed groups and inclusion.

---

<sup>75</sup> Claudio Bernardi "La bimba e il drago. Dramma e riti di liberazione nella società postmoderna", in Emozioni. Riti teatrali nelle situazioni di margine, atti del convegno, Cremona 1995.

Specifically, we could imagine to create:

- Art therapy workshops: to be able to explore together a more subconscious dimension without the mediation of the spoken word, prioritising the expression of emotions and the identification of those areas of difficulty through the exploration of materials and artistic techniques - painting, sculpting and other tridimensional techniques.
- Reading sessions: starting from the reading of young adults and classical books, organising periodical meetings on themes emerged from those books. The reading could be combined with a cinema club, experiments of creative writing, poetry workshops, silent books. This way we could facilitate the exchange of fragility through the mediation of stories and the capacity to activate a symbolic discourse and thought.
- Workshops of body expression and dance movement therapy: starting from the research of primitive expression, experimenting with inclusive movement spaces that encourage the exploration of one's own body image, the enforcement of the feeling of one's own psychosomatic element, the opening of connections, the recognition and containment of pulsations<sup>76</sup>.

Always in the social theatre and community dimension that promotes participation, sustaining the spaces and possibilities of change, it can be imagined for these projects an ultimate opening within the context of reference, so that the explorations and the experiences of young people groups can in some way open a dialogue with the community of reference.



---

<sup>76</sup> Miriam Redaelli “*Evanescenze creative e possibilità trasformative. Elementi di danzaterapia e questioni epistemologiche*” in Pontremoli et al, *Teoria e tecnica del teatro educativo e sociale*, Utet 2007



At Caprifolens the theory proposed by Aaron Antonovsky (1987) of *Sense of Coherence* (SOC) is adopted in a variety of different activities undertaken by the organisation. Antonovsky theorised that to understand the human psyche one must focus on understanding the core tenets of health rather than the cause of illness. This theory has come to be known as Salutogenesis. For Antonovsky there are three central concepts that lay at the heart of this idea, these are: *comprehensibility*; *manageability*; *meaningfulness*. Together these three ideas explain how a person may react to a variety of different internal and external stimuli<sup>77</sup>. At Caprifolens the theory of SOC is adopted in such a way as to help people with and without disabilities work together to overcome a variety of different challenges including, obstacle courses, musical and physical training, and horse vaulting. Moreover, an additional principle is added to Antonovsky's original three, this is *predictability*. This new dimension allows for the creation of a safe space for all the participants at Caprifolens, helping to eliminate possible anxieties that clients may face.

Caprifolens also incorporates horses as an important tool to assist participants with and without disabilities to improve their comprehension of body language, learn new responsibilities, and expand their comfort zone. Horses are a unique tool that, if applied correctly, can create a new sense of personal responsibility and help in expanding one's understanding of the importance of body language, particularly for those who are non-verbal.



---

<sup>77</sup> Bergström, M., Hansson, K., Lundblad, A.-M. and Cederblad, M. (2006). P O B o x 117 2 2 1 0 0 L u n d + 4 6 4 6 -2 2 2 0 0 0 0 *Sense of coherence: definition and explanation*. [online] Available at: <https://lucris.lub.lu.se/ws/portalfiles/portal/2796842/625628.pdf>.

Previous studies have shown that as horses communicate 100% through body language, compared with only 70% in humans, learning to work with horses can enhance people's receptiveness to others body language, as well as, enhance one's ability to express oneself physically. What's more, horses can also come to represent a safe space for people who may otherwise struggle to be around others. Studies have suggested that as the movement of a horse mirrors that of a cradle it can create a sense of comfort in people. Finally, at the end of each training the horse serves as a gathering spot for all the participants as a way to thank the horse and to strengthen the sense of community within the organisation.

Caprifolen is a safe space for young people to come together and express their inner selves. A place where they can share their thoughts and concerns about life, friends, school and their sexuality. The club uses theatre, and drama as tools for inclusions and has been conducting musicals with the children for 10 years. The most important thing is that anyone can join the play and that all feel a sense of importance. Activities involve dancing, theatre, circus, music, and vaulting with horses. By employing the correct knowledge and good material we can offer our young members a safe and open environment, and empower them to do what feels right. Our youth section is in charge of these activities. They are between the ages of 13 and 20 and have regular meetings where they address topics such as friendship, camaraderie, training, competition, the environment, horses etc. Caprifolen is also working on several activities facilitating social inclusion between Swedish teenagers with or without disabilities and immigrants. Caprifolen is also collaborating with the local municipality trying to create a meeting place where the focus lies on social inclusion and trying to build-up individuals and increase their feeling of belonging. The work Caprifolen has undertaken has developed into new tools for schools and other organisations. Together with Caprifolen Vaulting Club we have created new classes for people with disabilities and are the first to start PARA competitions in vaulting in Sweden. Together with the vaulting club Caprifolen also have created art such as musicals for events and festivals.

Caprifolen's diverse range of activities, together with principle of Sense of Cohesion (SOC) with the addition of predictability creates an inclusive and open community that offers a safe space for all to express themselves freely. By motivating participants to try new activities and push themselves both mentally and physically (to a comfortable degree) the club allows for people with and without disabilities to discover new interests and experiences. Moreover, the inclusion of horses is a core element that distinguishes Caprifolen from other similar organisations giving it a unique dimension by which its clients can grow and experience new things.



# Conclusion

After conducting an extensive research about mental health across the 3 partnered countries, it becomes evident that it is a significant issue that was present even prior the outbreak of the pandemic crisis.

COVID-19, coupled with factors such as isolation, the swift to remote work, fear of contagion and a pervasive feeling of uncertainty and concern among the population further exacerbated the already complex mental health landscape. The pandemic acted as a catalyst for numerous mental health challenges, and the halt that the public health system experienced made that a large amount of the population could not receive the treatment they needed.

Italy and Spain, in particular, display multiple gaps and deficiencies within their public mental health systems. Prolonged waiting lists, poor quality of services and considerable intervals between appointments, push patients to resort to private treatments. While these private options yield effective results, the substantial costs make them inaccessible for a significant portion of the population.

Overall, there is a demand for increased choices and options for mental health assistance and support.

The Survey Questionnaire highlights a clear demand among youngsters for opportunities, initiatives, and organizations that can provide support for their mental well-being.

Artistic methodologies have recently emerged as an effective non-formal tool for mental health. Although they cannot substitute formal treatment, they serve as valuable and effective complements to it.

We greatly appreciate your access to the *I.O.1: A study on mental health in youth*. This study is only the first Intellectual Output of the project **MINDful Theatre**, if you want to explore the complete range of the project's products, make sure to follow us on social media:



[@mindfultheatreka2](https://www.instagram.com/mindfultheatreka2)



[@MINDful Theatre](https://www.facebook.com/MINDfulTheatre)



[@MINDfultheatreKA2](https://www.youtube.com/@MINDfultheatreKA2)

Or browse our website:



<https://sites.google.com/onoffteatro.com/mindfultheatre>

The logo for MINDful theatre features a stylized green leaf icon above the word 'MINDful' in a bold, green, sans-serif font. The word 'theatre' is written in a lighter, grey, sans-serif font to the right of 'MINDful'.

# MINDful theatre

MFT\_2022-1-ES02-KA220-YOU-000085923

*This project has been funded with support from the European Commission.*

*This publication reflects the views only of the author, and the Commission cannot be held responsible for any use which may be made of the information contained therein.*

