

***What do we know and what can we achieve  
regarding prevention work for youths?***

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## **What do we know and what can we achieve regarding prevention work for youths?**

**The Report of the National Research Council / Institute of Medicine (2009): „Preventing Mental, Emotional, and Behavioral Disorders Among Young People: Progress and Possibilities“ ( [www.nap.edu/catalog.php?record\\_id=12480](http://www.nap.edu/catalog.php?record_id=12480) )**

### **Preface**

The Institute of Medicine (IOM) is part of the US National Academies. It is a non-governmental institution that offers professional advice in issues regarding the health care system. Two of its numerous reports deal with the prevention of behavioral disorders: „Reducing Risks for Mental Disorders: Frontiers for Preventive Intervention Research“ (1994) and ”Preventing Mental, Emotional and Behavioral Disorders Among Young People: Progress and Possibilities” (2009). The latter publication in particular calls for a greater emphasis on preventing behavioral disorders and, in doing so, for concentrating primarily on measures that were proven to be effective, in order to limit the psychosocial and financial damages that behavioral disorders impose on the persons concerned and on their environment.

The German Congress on Crime Prevention shares this concern and therefore intends to further the discussion regarding evidence-based prevention in German speaking countries as well. The publication of the second report of the IOM with its thorough overview of conceptual, methodological, economic and practical issues regarding the prevention of behavioral disorders is part of this endeavor.

Since not all participants in this discussion have the opportunity to read the English original of this report, Dr. Jonkman (Verwey-Jonker-Institut in Utrecht, Netherlands) produced an English short version thereof, which is presently translated into German. This translation will be made available on the Congress’ website by the end of 2014. The report brief for policymakers is reprinted here.

Dr. Jonkman presented this report and its potential for prevention in Germany on the 19th Congress in Karlsruhe to contribute to this discussion, which will be continued on the 20th German Congress on Crime Prevention in Frankfurt.

## **The National Academies**

### **Report Brief FOR POLICYMAKERS • MARCH 2009**

#### **Preventing mental, emotional and behavioral disorders among young people**

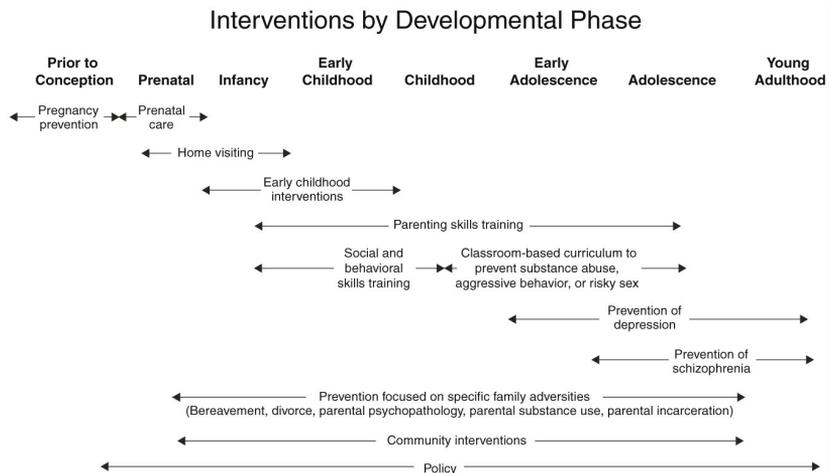
##### **Progress and Possibilities**

Mental, emotional, and behavioral (MEB) disorders—which include depression, conduct disorder, and substance abuse—affect large numbers of young people. Studies indicate that MEB disorders are a major health threat and are as commonplace today among young people as a fractured limb—not inevitable but not at all unusual. Almost one in five young people have one or more MEB disorders at any given time. Among adults, half of all MEB disorders were first diagnosed by age 14 and three-fourths by age 24.

Many disorders have life-long effects that include high psychosocial and economic costs, not only for the young people, but also for their families, schools, and communities. The financial costs in terms of treatment services and lost productivity are estimated at \$247 billion annually. Beyond the financial costs, MEB disorders also interfere with young people's ability to accomplish developmental tasks, such as establishing healthy interpersonal relationships, succeeding in school, and making their way in the workforce.

Clear windows of opportunity are available to prevent MEB disorders and related problems before they occur. Risk factors are well established, preventive interventions are available, and the first symptoms typically precede a disorder by 2 to 4 years. And because mental health and physical health problems are interwoven, improvements in mental health will undoubtedly also improve physical health. Yet the nation's approach to MEB disorders has largely been to wait to act until a disorder is well-established and has already done considerable harm. All too often, opportunities are missed to use evidence-based approaches to prevent the occurrence of disorders, establish building blocks for healthy development in all young people, and limit the environmental exposures that increase risk—approaches likely to be far more cost-effective in addressing MEB disorders in the long run.

Interventions before a disorder manifests itself offer the best opportunity to protect young people. Such interventions can be integrated with routine health care and wellness promotion, as well as in schools, families, and communities. A range of policies and practices that target young people with specific risk factors; promote positive emotional development; and build on family, school, and community resources have proven to be effective at reducing and preventing MEB disorders. Making use of the evidence-based interventions already at hand could potentially save billions of dollars by preventing or mitigating disorders that would otherwise require expensive treatment.



Source: *Committee on Prevention of Mental Disorders and Substance Abuse Among Children, Youth, and Young Adults, 2009*

### Proven Approaches

A recent study by the National Research Council and the Institute of Medicine reviewed the research on the prevention of mental disorders and substance abuse among young people and recommended multiple strategies for enhancing the psychological and emotional well-being of young people. Research including meta-analyses and numerous randomized trials demonstrate the value of:

- *Strengthening families* by targeting problems such as substance use or aggressive behavior; teaching effective parenting skills; improving communication; and helping families deal with disruptions (such as divorce) or adversities (such as parental mental illness or poverty).
- *Strengthening individuals* by building resilience and skills and improving cognitive processes and behaviors.
- *Preventing specific disorders*, such as anxiety or depression, by screening individuals at risk and offering cognitive training or other preventive interventions.
- *Promoting mental health in schools* by offering support to children encountering serious stresses; modifying the school environment to promote prosocial behavior; developing students' skills at decision making, self-awareness, and conducting relationships; and targeting violence, aggressive behavior, and substance use.
- *Promoting mental health through health care and community programs* by promoting and supporting prosocial behavior, teaching coping skills, and targeting modifiable life-style factors that can affect behavior and emotional health, such as sleep, diet, activity and physical fitness, sunshine and light, and television viewing.

The key to most of these approaches is to identify risks—biological, psychological, and social factors—that may increase a child’s risk of MEB disorders. Some of these risks reside in specific characteristics of the individual or family environment (such as parental mental illness or substance abuse or serious family disruptions), but they also include social stresses such as poverty, violence, lack of safe schools, and lack of access to health care. Most risk factors tend to come in clusters and are associated with more than one disorder. Currently, treatment interventions tend to isolate single problems, but there is growing evidence that well-designed prevention interventions reduce a range of problems and disorders and that these efforts are sustained over the long term. These programs often help children, families, and schools build strengths that support well-being. A focus on prevention and wellness can have multiple benefits that extend beyond a single disorder.

### **Policy Implications**

Officials at the local, state, and federal levels all play a role in mental health promotion and the prevention of MEB disorders. Many providers and agencies are responsible for the care, protection, or support of young people: the child welfare, education, and juvenile justice systems, as well as medical and mental health care providers and community organizations. Yet resources within these agencies are scattered, not coordinated, and often do not effectively support prevention programs or policies. The result is a patchwork that does not perform as an integrated system and fails to serve the needs of many young people and their families.

National leadership is necessary to make systematic prevention efforts a high priority in the health care system as well as an integral aspect of the network of local, state, and federal programs and systems that serve young people and families. Leaders at the national, state, and local levels need to pursue specific strategies, such as:

- *A White House initiative to develop an inter-departmental strategy* that identifies specific prevention goals, directs multiple federal agency resources toward these goals, and provides guidance to state and local partners.
- *Development of state and local systems* involving partnerships among families, schools, courts, health care providers, and local programs to create coordinated approaches that support healthy development.
- *Investment in prevention and promotion*, including setting aside resources for evidence-based prevention in mental health service programs and investment in proven prevention approaches by school systems.
- *Workforce training*, including development of prevention training standards and training programs across disciplines including health, education, and social work.
- *Long-term tracking* of the prevalence and frequency of MEB disorders.

- *Implementation and evaluation of screening* with community involvement, parental support, valid tools, and interventions to address identified needs.
- *Continued research* on both the efficacy of new prevention models and real-world effectiveness of proven prevention and wellness promotion interventions;
- *Adaptation of research-based programs* to cultural, linguistic, and socioeconomic subgroups;
- *Public education*, with mass media and the internet offering the opportunity to greatly expand the reach of specific messages about risk factors and available resources, to reduce stigma, and to deliver some kinds of interventions.

Implementing a systems focus will require innovative efforts to provide societal institutions that affect young people—families, schools, health care systems, and community programs—with the tools to promote healthy development and prevent MEB disorders. Policies are also needed to help ensure families’ financial security, provide safe neighborhoods and schools, improve access to health care and other services, and provide enriched early childhood environments.

Tools to equip young people who are at risk with the skills and habits they need to live healthy, happy, and productive lives are available. What is lacking are the will, social policies, and collaborative strategies to adequately support the healthy development of the nation’s young people.

#### **FOR MORE INFORMATION ...**

Copies of the report, *Preventing Mental, Emotional, and Behavioral Disorders Among Young People: Progress and Possibilities*, are available for sale from the National Academies Press at (888) 624-8373 or (202) 334-3313 (in the Washington, DC metropolitan area) or via the NAP home page at [www.nap.edu](http://www.nap.edu). Full text of the report and a free pdf copy of the Summary are also available at [www.nap.edu](http://www.nap.edu). The study was funded by the Substance Abuse and Mental Health Services Administration, National Institute of Mental Health, National Institute on Drug Abuse, and the National Institute on Alcohol Abuse and Alcoholism.

This policy brief is one in a series of three briefs with highlights from the report.

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