

HUMAN RIGHTS OF CHILDREN AND ADOLESCENT PATIENTS USING MENTAL HEALTH SERVICES

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Abstract: Child and adolescent mental health is the capacity to achieve and maintain optimal psychological functioning and wellbeing. It is directly related to the degree of age-appropriate bio-psychosocial development achieved using available resources. There are a number of factors that can affect the mental health of a child or adolescent. Broadly speaking, these can be divided into risk and protective factors. The former refers to factors that increase the probability of mental health difficulties, while the latter refers to factors that mediate the effects of risk exposure. As the term “bio-psychosocial” in the above definition suggest, these risk and protective factors can exist in the biological, psychological and social domains.

Fortunately, the majority of young people in the EU enjoy good mental health. However, on average, one in every 5 children and adolescents suffer from developmental, emotional or behavioral problems and approximately 1/8 have a clinically diagnosed mental disorder.

The lack of attention to the mental health of children and

Adolescents may lead to mental disorders with lifelong consequences, undermines compliance with health regimens, and reduces the capacity of societies to be safe and productive.

Contemporary recognition of child and adolescent mental disorders and advances in the care of children and adolescents with mental disorders provide an incentive to synthesize current knowledge, identify issues for future exploration, and consider appropriate policies.

Problems in the region

There has been a long tradition in Countries of Central and Eastern Europe to solve problems of children and families at risk through the network of residential institutions for children with a variety of different kinds of problems (developmental, mental, physical and social).

Additionally, the balance in the bio-psycho-social paradigm has been distorted, as, historically, a biomedical component dominated the spectrum of therapeutic modalities, while

effective psychosocial interventions and public health approaches in mental health promotion have been neglected.

This has led to serious gaps in the spectrum of interventions in the field of CAMH and to worsening of children's condition with negative implications for children's well-being and poor outcomes for society

Identified needs for improvement of CAMH (human rights of children and adolescents for mental health)

Child and Adolescent Mental Health in Enlarged EU – development of effective policies and practices

There is a need...

...for systematic evaluation of programs and, more notably, of policies aimed at preventing mental disorders and promoting mental health among children and adolescents

...to widen the focus of the CAMH field to include positive mental health (not only mental disorders)

...to increase child and youth involvement through peer-led initiatives

...to introduce training in prevention and promotion for CAMH in relevant higher education degrees and to include issues in the training of diverse and relevant professions such as teachers and public health professionals

...to raise awareness about childhood mental health determinants, especially among diverse stakeholder groups

...to allocate specific funding for CAMH issues, rather than these funds being mixed in with those allocated for adults' mental health.

...for more research, evaluation and dissemination of information around effective programs to prevent destructive behavior.

...to move away from institutionalization in national CAMH policies

...to address problems of socialization among adolescents in a comprehensive way.

Human rights of children and adolescents as patients with MHD

- To be treated with dignity, consideration and respect at all times, even if guarded by parent/carer;

- To be understood their chronological, emotional, and social maturity;
- To expect quality service provided by concerned, trained, professional and competent staff, and get individualized care if needed
- To expect complete confidentiality within the limits of the law, and to expect that no information will be released without their knowledge;
- To get clear (appropriate for their age) information of the goals, techniques, procedures and limitations, as well as the potential dangers of the services to be performed, and all other information related to the ongoing mental health counseling relationship;
- To get full, knowledgeable, and responsible participation in the ongoing treatment plan to the maximum extent feasible (to get the opportunity to ask questions, give feedback as a valued member of the care team, and discuss concerns
- Right to get rehabilitation and treatment that enhances autonomy
- To obtain information about their case record and to have this information explained clearly and directly
- To be consulted by their parents for refusal of any recommended services and to be advised of the consequences of this action
- To get a safe environment free of emotional, physical and sexual abuse
- Children's right to services that promote community integration (Convention on the rights of a child)

Barriers to care

- Lack of resources
- Stigma
- Other

Discussion

Unsolved ethical problems

- Inclusion in clinical research (who can decide?)
- Signing informed consent (who can sign?)
- Misunderstanding the provided information due to mental incapability

- Legal problems due to mental incapability?
- What are the barriers (resources, stigma???)

Conclusion

Child and adolescent psychiatry and child and adolescent mental health services have evolved in remarkable ways in the past few decades. Old myths, old treatments and old policies are no longer to be tolerated. In this new era there is the opportunity to develop and implement evidencebased interventions, modern training programs and effective policies. Advocacy for these initiatives is the responsibility of many. The reward will be to see a healthier and happier population of children and adolescents and more productive and stable societies.

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