



Mental Health among Adolescents and Young People in Denmark

Prevalence and Development over Time

A report from the Danish Council of Prevention

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Our task:

To map prevalence, distribution (by gender, age, socioeconomic group) and the development of mental health in Danish youth (age 10 to 24 years) over the past 20 years

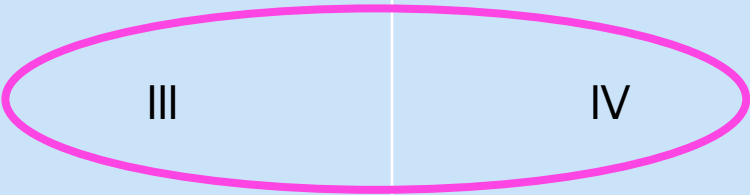


'Mental Health'

mental health and/or mental disease?

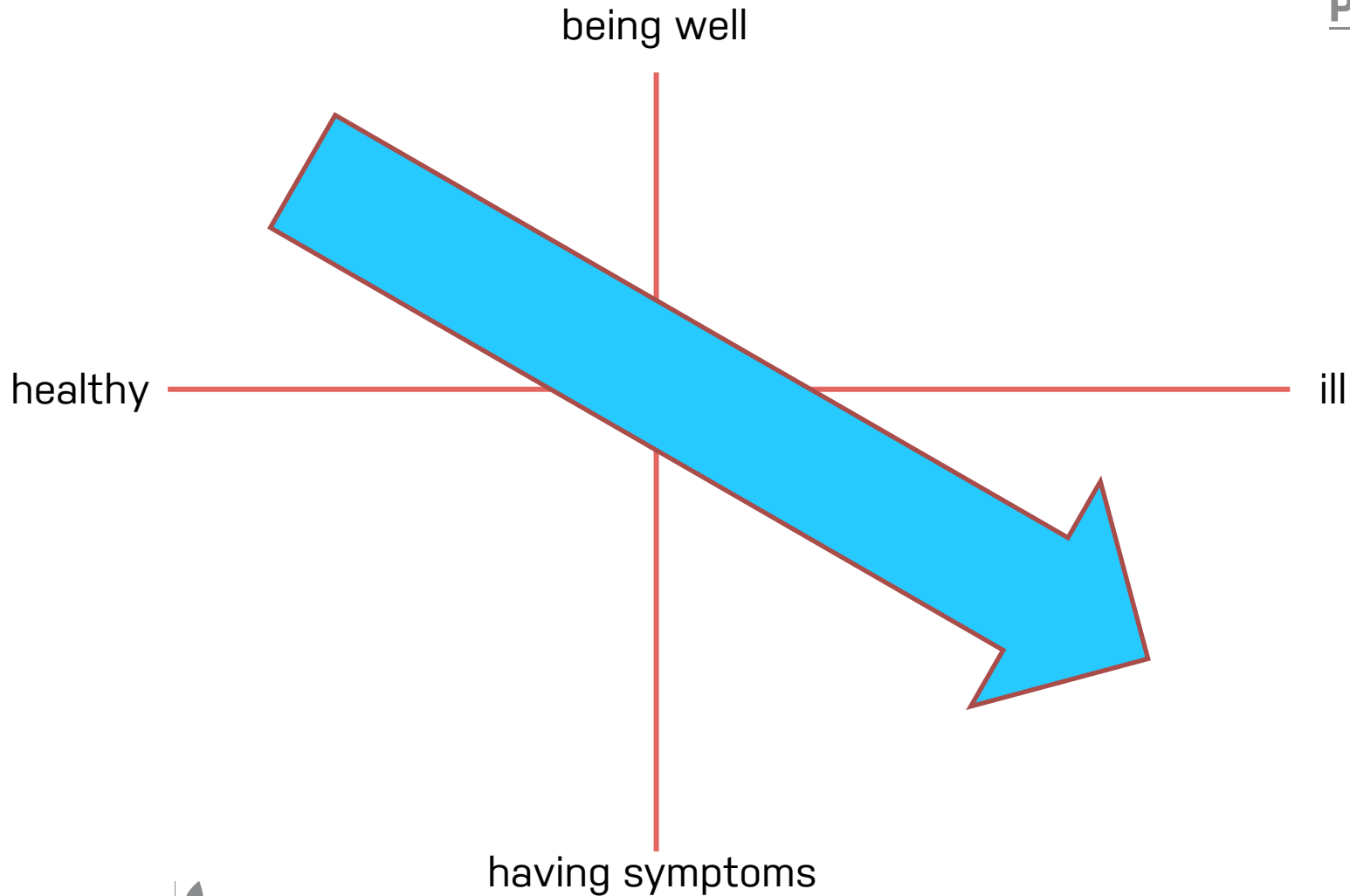
		The disease dimension	
		Mentally healthy	Mentally sick*
The health dimension	Mental health (well-functioning/ well-being) (positive)	I	II
	Mental problems (dys-functional/ symptoms) (negative)	III	IV

* According to ICD diagnoses

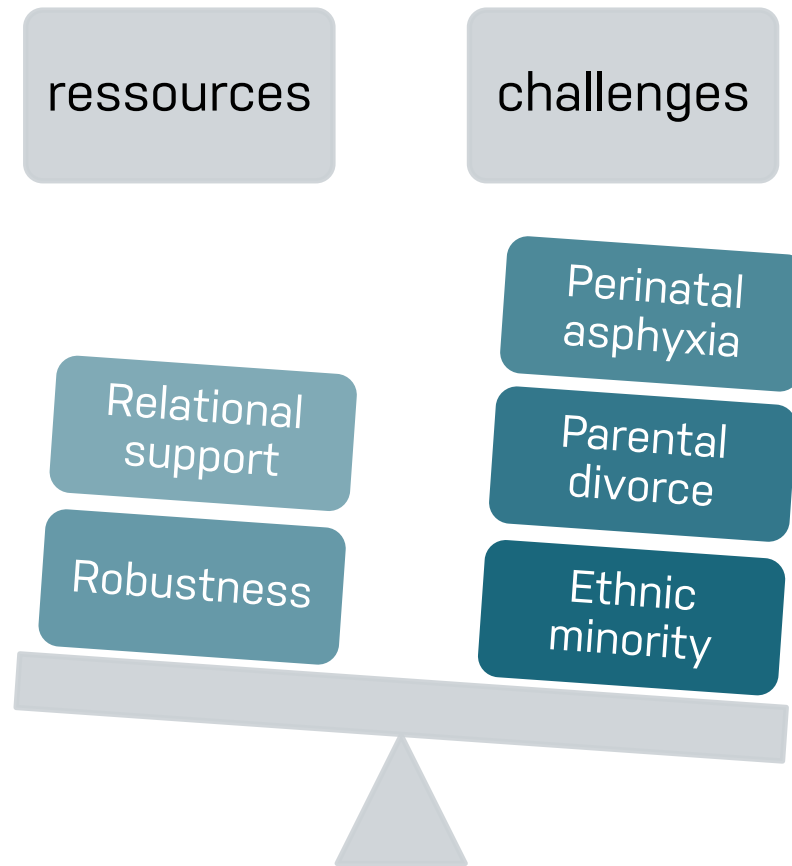


A continuum ...

.....from healthy to ill and from well-being to symptoms...



Balance between resources and challenges.....



The headlines of the report

- **Self-rated health and life satisfaction**
- **Symptoms**
 - Mental symptoms
 - Psychosomatic symptoms
 - Stomach ache
 - Headache
 - Medicine use
 - Stress
 - Sleep problems
 - Loneliness
 - Self-harm
 -
- **Psychological diseases**
 - ADHD
 - Autism spectrum disorder
 - Emotional disorders
 - Behavioural disorders
 - Eating disorders
 - Psychosis
 - Suicidal behaviour



Examples of developments of concern (I):

Stress:

- every 4. young Dane experience stress (at least once a week)
- prevalence increase by age
- prevalence doubled over 20 years
- highest prevalence in the Danish population found among 16-24 year old women

Sleep:

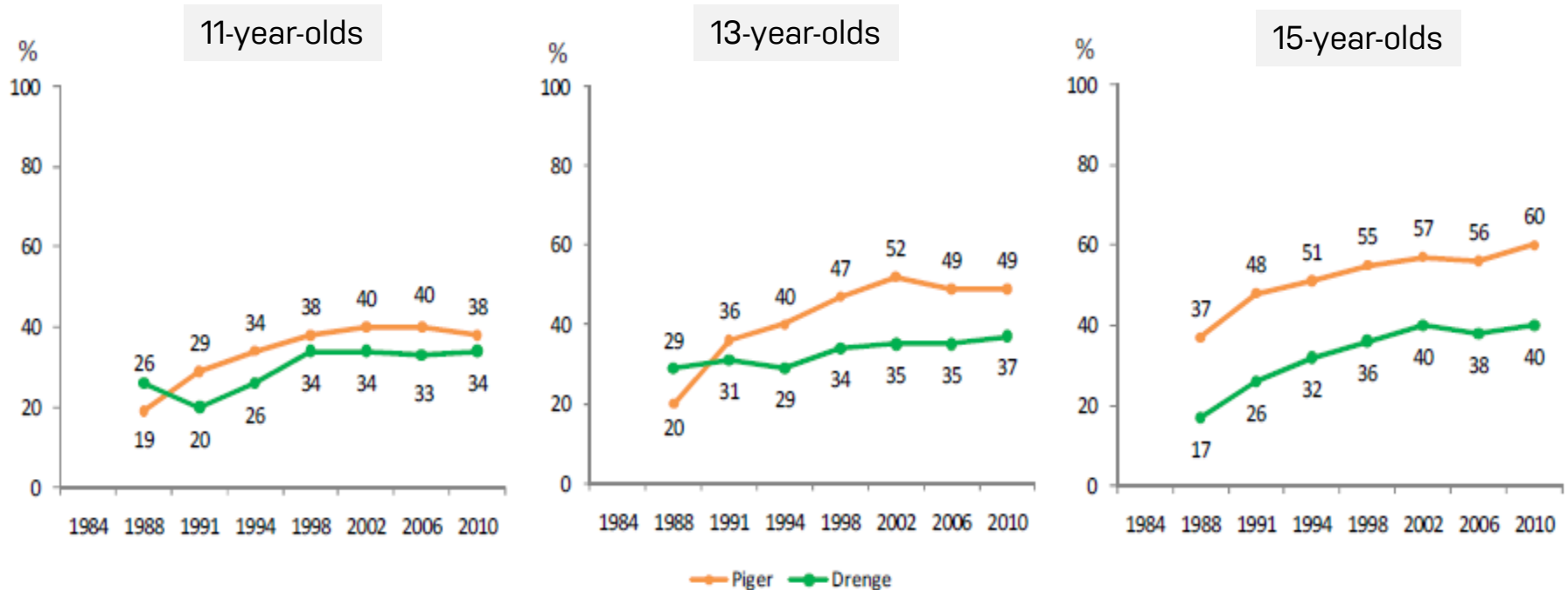
- between $\frac{1}{2}$ and $\frac{2}{3}$ of youth sleeps less time than recommended
- prevalence of sleep-related problems increased 3-4 fold over the past 20 years
 - ✓ among 11-15 year olds from 15%-47%
 - ✓ among 16-24-year olds from 4%-16%



Examples of developments of concern (II):

Medicine-use:

Percentage, who have used medicine against headache the past month, 1988 to 2010



Examples of developments of concern (III):

Depression and anxiety:

- An almost total lack of nationally representative prevalence data



Examples of developments of concern (IV):

ADHD:

- most prevalent youth psychiatric diagnosis: 3,6% of 10-24-year-olds
- indication of large increase in prevalence the past 15 years
 - ✓ improved diagnostic procedures
 - ✓ enlarged child psychiatric capacity for diagnostics
- 10 fold increase in medicine-use related to ADHD over the past 10 years

Autism:

- prevalence increased from few ‰ to approximately 1 %
 - ✓ improved diagnostics
 - ✓ enlarged child psychiatric capacity for diagnostics
- gender-ratio: 1 : 4 - girls : boys



Examples of developments of concern (VI):

Psychosis:

- prevalence 0,1% of 10-24 year olds admitted to or treated for psychosis
- doubling of prevalence over the past 10 years
- 30% more boys than girls

Suicidal behaviour:

- 70% decline in suicides
- gender ratio girls : boys 1 : 3
- doubled prevalence of attempted suicide
- the highest prevalence among 15-19 year old girls (number trebled)



Conclusion:

- 20-50% of 10-14 year olds have symptoms e.g. stress, sleep problems, symptoms or medicine-use
- Few % have more serious psychiatric diseases – most prevalent is ADHD, suicidal attempts and psychoses – and expectedly anxiety and depression
- Almost all mental health problems have increased in prevalence over the past 20 years



Conclusion:

- Highest prevalence among the 16 to 24 year olds, especially women (stress, sleep problems)
- For most symptoms larger prevalence among girls, but boys particularly exposed to psychosis (40% more prevalent among boys compared to girls) and to autism spectrum disorders (1:4)
- Social inequality in most mental health problems – more young people from low socioeconomic background have symptoms and psychiatric diseases



Report – in Danish (with an English summary)

Download report at <http://www.vidensraad.dk/>

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