Scientific knowledge on child mental health and the Norwegian national strategy

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RBUP
The National Network for the Study of Infant Mental Health in Norway
The establishment and purpose of RBUP

Four regional centres for child and adolescent mental health (RBUPs) were established by the Ministry of Health and Care Services from 1987 to 1998.

The aim was to contribute to better quality of services related to mental health for children and adolescents. The centres’ primary tasks are research and postgraduate training.
A new department with separate funding was established at RBUP in 2006: The National Network for the Study of Infant Mental Health in Norway

This network has its primary base at RBUP Oslo, but also staff members at the other RBUPs
Furthermore:

✔ One of the main objectives of the network is to develop and validate scientific findings with relevance to mental health practitioners.

✔ The Network aims to liaise between the areas of research and clinical application.
Main objectives of the Network:

✓ Our focus is to provide knowledge about the validity of screening instruments, suitable assessment and treatment methods, for young children and their families.

✓ The Network has an overall coordinating role in the implementation of many programs in municipalities and all infant mental health teams at numerous Child Psychiatric Clinics all across Norway.
Municipalities

Well baby clinics and doctors – Family Centers
Preventive interventions against pre- and postnatal depression and low threshold interventions in the municipalities (nb Minority health)
New born – NBO
Stress reduction – mindfullness
Substained withdrawel
Relations ( DC 0-3R, BHS)

Kindergarten
The 1 – 2 years old ( regulation, tools of the Mind)
Temperament guidance for parents in public health care

Child protection
Quality in cases
Special target groups

- Premature
- Development of children prenatally exposed to drugs and children of families with psychiatric problems
- Fosterchildren
- Adoption
- Autisme
- Newborn with chronic disease
Hospitals

DC 0-3 R
Circle of Security
NBO
Video feed back
Validation and effect studies

Alarm Distress Baby Scale
ASQ
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RCT:
COS
Marte meo
Mamma mia
Infant mental Health; significant knowledge gap

Liten i Norge

KVIK
Norwegian registry of infants referred to treatment in Child Psychiatry

✓ The Network is responsible for establishing a national database, which can serve as a structured basis for monitoring quality in infant mental health services.

✓ A database or registry of quality is an organized overview of clinically relevant information, emphasizing four main questions:
  - Who are the patients?
  - What are we doing?
  - Are we doing what we are supposed to do?
  - What was the end result?
Norwegian database continued:

- **Target group**: All patients ranging from 0-3 years of age and their families who are referred for assessment and/or treatment in outpatient clinics for child and adolescent psychiatry in Norway.

- **Pre-post design**: Standard information collected from both the caregiver and clinician during the early phase of contact and at time of discharge. Use of the five DC 0-3R axes in all cases.
Children under 12 months

✓ In Norway, the emphasis on early intervention has lead to an increase in referrals of infants under 12 months.

✓ Clinical experience has shown that it is often difficult to diagnose the soft signs of emerging mental problems in the youngest infants, due to the categorical splitting up of the Axis I diagnoses.
Children under 12 months cont.

Even if diagnosing of children under 12 months is challenging, many clinicians find it useful to think within the DC 0-3 diagnostic frame, also for the youngest infants.

Should DC 0-3 R include a wider and more dimensional diagnostic description covering the most common emotionally based problems in the first year?
Relationship Classification

✓ Referrals are often due to worries concerning the caregiver’s mental problems, and possible subsequent negative consequences for the child.

✓ Even if it is hard to diagnose the youngest with an Axis I diagnosis, many are classified as having a Disordered Relationship on Axis II.

✓ In the Norwegian study of 138 children aged 0-3 years, a total of 121 children were classified as having a Disordered Relationship or Features of Disordered Relationship on Axis II.