



School Mental Health in Germany

**Prof. Dr. Peter Paulus
Centre for Applied Sciences of Health (CASH)
Leuphana University, Lüneburg, Germany**

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School Mental Health: Whys and Hows

Webinar Series:

**How to protect and promote school mental health in the 21st century?
UNESCO Chair „Global Health & Education“**

Germany – Population, State, Ministries of Education

- 82.00 Mill. Inhabitants
- 16 „Länder“
- 16 Ministries of Education



School health promotion as a field of practice

This field of practice of health promotion is quite big. According our current national school statistics (www.destatis.de) we had in 2020/21 10,8 million pupils and about 940.000 teachers employed full- or part-time or by the hour at 32.000 schools of the general school system



Mehr als Lernen und Lehren: Die Schule als hybrides System bietet Raum für unterschiedliche Nutzergruppen. (Foto: Mandana Sedighi, KIT)

Mental health of children and young people in Germany

Results of the basic KIGSS study 2003-2006 / 2st wave KIGGS 2014-2017

- **KiGGS** - The German Health Survey for Children and Adolescents; Robert Koch Institute, Berlin; BMG
- **Mental health problems:** 2006: Approx. 20% of children and adolescents show signs of mental health problems; 2018: 16,9 % (prior to the pandemic)
- **Gender perspective:** Boys more than girls
- **Health gradient:** Children with lower socio-economic background have nearly twice as much mental health problems
- **Migrant status:** Children with migrant status have more mental health problems

Prevalence of mental health problems by gender and age for the KiGGS baseline survey and KiGGS wave 2 (Baseline survey: N= 7,100 girls, N = 7,377 boys and KiGGS wave 2 N = 6,637 girls, N = 6,568 boys); CI = Confidence Interval. Source: KiGGS baseline survey (2003–2006), KiGGS wave 2 (2014–2017); (Klipker et al. 2018).

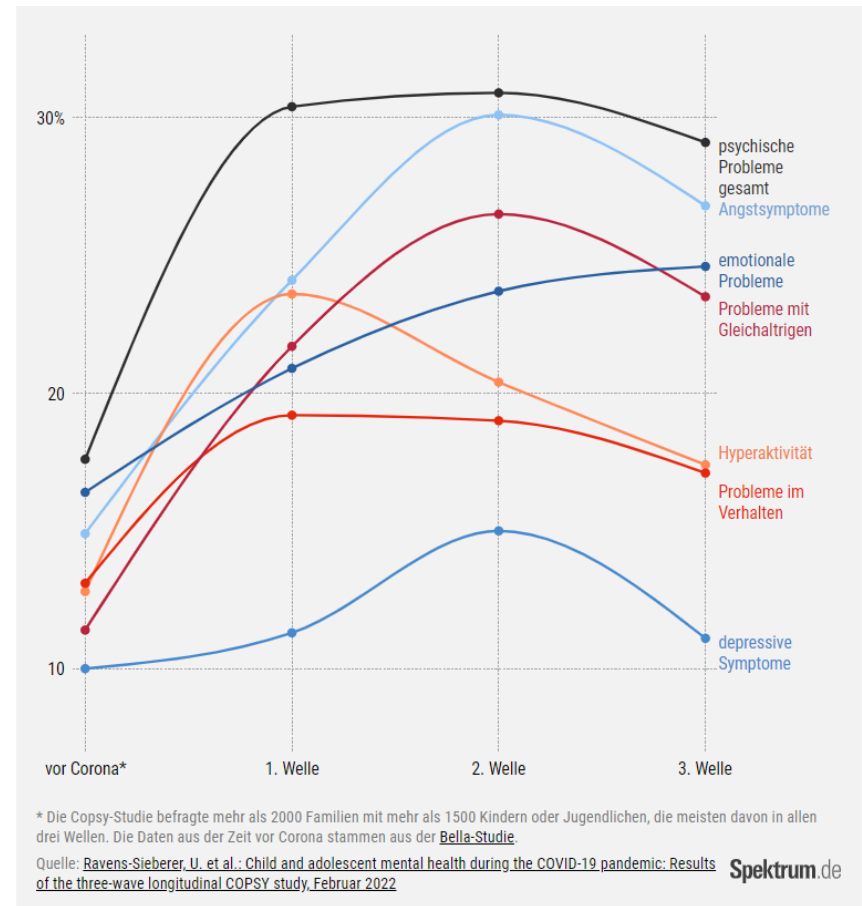
	KiGGS baseline survey		KiGGS wave 2	
	%	(95% CI)	%	(95% CI)
Girls	15.9	(14.9–17.0)	14.5	13.2–15.9)
Age group				
3–5	17.2	(14.7–19.9)	13.9	(11.2–17.1)
6–8	14.7	(12.4–17.4)	13.8	(11.6–16.2)
9–11	18.6	(16.5–21.0)	16.4	(13.3–20.1)
12–14	15.9	(13.8–18.3)	13.9	(11.9–16.3)
15–17	13.4	(11.5–15.6)	14.6	(12.2–17.3)
Boys	23.6	(22.3–24.9)	19.1	(17.7–20.6)
Age group				
3–5	21.4	(18.9–24.2)	20.9	(17.5–24.7)
6–8	25.3	(22.7–28.2)	22.3	(19.4–25.4)
9–11	28.8	(26.2–31.7)	22.2	(19.0–25.7)
12–14	25.8	(23.1–28.9)	19.2	(16.6–22.0)
15–17	17.2	(14.8–20.0)	12.2	(9.9–15.0)
Total (boys and girls)	19.9	(19.0–20.8)	16.9	(15.9–17.9)

Mental health consequences for children and young people due to the pandemic

Nearly every third child and adolescent had mental health problems during the 2nd and 3rd wave. Anxiety was the most frequent problem mentioned the most. Also problems with peers were rising quite strong.

Although mental health problems are going down in the 3rd wave still many young people suffer from mental health problems.

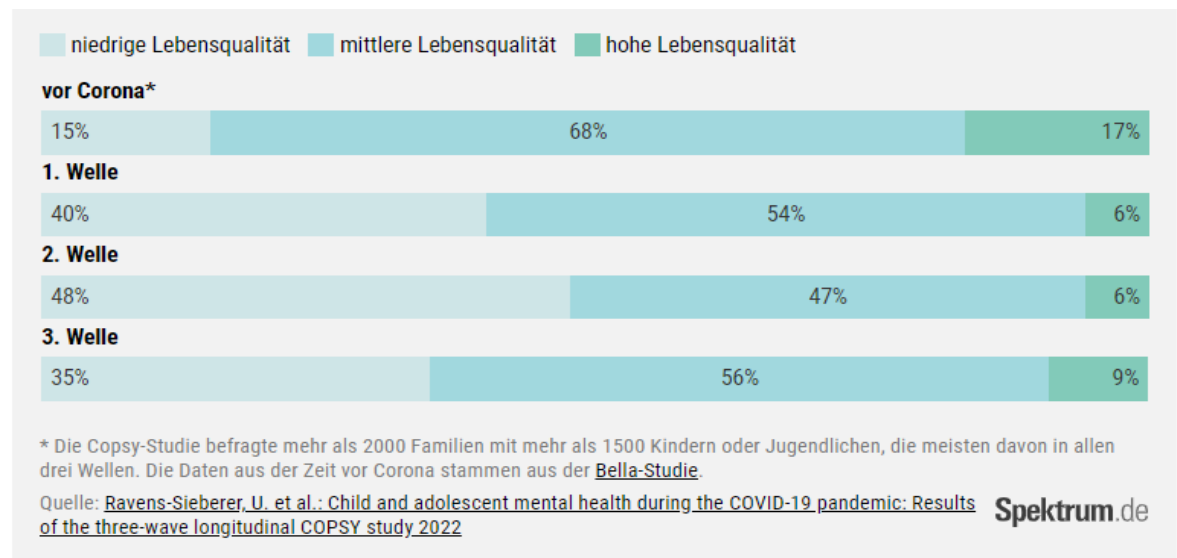
Especially young people from disadvantaged social and educational background suffer the most.



A nationwide, population-based survey was conducted in 05-06/2020 (Wave 1), 12/2020-01/2021 (Wave 2) and 09-10/2021 (Wave 3). In total, n = 2,097 children and adolescents aged 7 to 17 years and their parents were investigated using measures to assess HRQoL (KIDSCREEN-10), mental health problems (SDQ), anxiety (SCARED), depressive symptoms (PHQ-2) and psychosomatic complaints (HBSC-SCL).

Loss in Health related Quality of Life (HRQoL) in children and young people before and during the Pandemic

In the first and second wave the quality of life was reduced. Within the third wave the trend turned around, but did not reach the level before the pandemic.



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Mental Health at School

- **Subject:** Mental health education (part of the curriculum, not a subject; „final goal“; basic human right: UN-Charta of Human Rights; Charta of World Health Organization)
- **Ressource:** Prerequisite of schooling in general („conditional goal“); katalyst, driver

Challenges and Barriers

- There (are long lasting)traditions in school mental health promotion: medical science dominated, fixed to ill-mental health, focus on behaviour modification programmes , is tabooed
- (Mental) Health as a subject is of low importance in school
- Teachers mindset: Health is not their business (secondary schools): They feel an extra burden to handle mental health problems; often feel not well trained to act accordingly
- Well-being at school – is often understood as “feel-well-school” and disregarded

Traditions of School Disease Prevention and Health Promotion

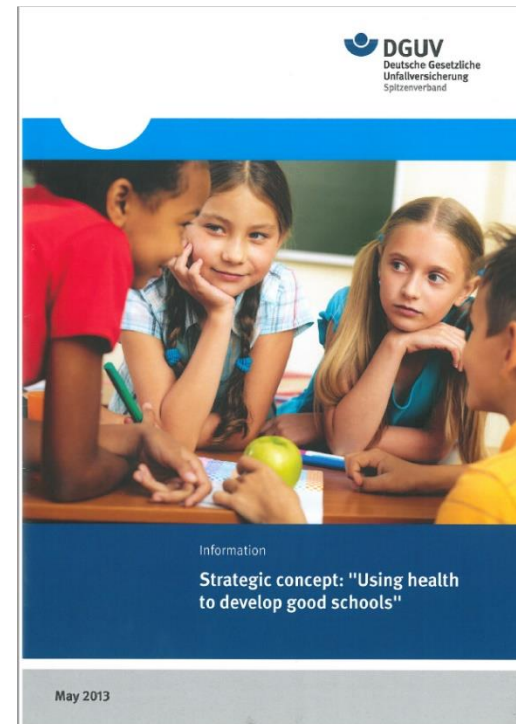
1. Behaviour modification trainings in schools in the classroom with pupils (since mid-eighties 20th century)
2. Setting based approaches, whole school approach, Health Promoting Schools with pupils, teachers, non-teaching staff, parents (since mid-nineties 20th century)
3. Good healthy school (since early 2000 years)

Linking Health and Education: „The Good Healthy School“ as a new Concept

- The good healthy school
 - ...is a school clearly committed to work on the quality dimensions of a good school
 - ...applies special health interventions in order to fulfill the demands of school quality
 - ... has as its overarching aim, the sustainable and efficient increase of its teaching and education quality.

Changing the Perspective: From School Health Promotion to Education Promotion through Health

- What has health to offer education in schools?
- Health as an input and throughput factor for teaching, learning and educational school development
- Health as a driver of education
- „To make good schools through health“
- **The good healthy school**



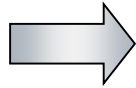


Education promotion through mental health in and with schools



MindMatters – A Resource for Primary- and Secondary schools

**„There is no health
without mental health“**



**„Mental health is a
driver of education“**

**Thank you very much for your attention
paulus@leuphana.de**

