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Perspectives into topical issues in society and ways to support political decision making.

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# Expanding the understanding of low-threshold services for young people

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There are various thresholds to accessing mental health and substance use treatment services for young people. The thresholds should be lowered not only in terms of access to the services, but also in terms of attending and benefiting from them. The core of the work with young people in the field of mental health and substance use lies in successful and comprehensive encounters, through which various interconnected problems can be addressed. This Policy Brief presents ways in which those encounters could be supported.

# Social work methods to support young people with mental health and substance use problems

This Policy Brief focuses in particular on the types of thresholds that exist in services for young people and how these thresholds could be lowered. In Finland, demand for mental health and substance use treatment services, self-perceived malaise and drug-related deaths have all increased among young people. Healthcare resources are stretched and there are unacceptably long waiting times for many services. In this study, the focus has been shifted from the healthcare sector's mental health and substance use service units to social welfare and low-threshold services, where young people with diverse, challenging life-situations are encountered.

The *Nuorten mielenterveys- ja päihdetyö: Tutkittua tietoa kehittämistyön tueksi (NUMPA)* [Mental health and substance use services for young people: Research to support developmental work] was a research project that aimed to study what can be done in social welfare services to support young people with difficulties with mental health or substance use. The aim was to conduct research and to disseminate information on good practices used by social welfare and low-threshold services and on effective methods to support young people's wellbeing. The study focused on the needs of young people (15–29 years old, following the Finnish law on youth which defines youth under the age of 30) for support and the barriers to receiving timely mental health and substance use treatment services. The developmental needs regarding co-operation and division of labour between various parties was also explored.

The study was carried out by a consortium of researchers from the Finnish Youth Research Society, the A-Clinic Foundation, MIELI Mental Health Finland and the Finnish Red Cross Youth Shelters. The project was implemented between March 2021 and October 2022 with funding from the Government's analysis, assessment and research activities.

Based on the research results, we presented five proposals for action in the final report (Pitkänen et al. 2022). Our first proposal is to take the age-specific needs of young people into account in the services. Secondly, we propose that lowering thresholds to youth services should be understood as something that concerns the entire

service process and that thresholds should be assessed on a service-by-service basis. Thirdly, we stress the importance of encounters and present good practices to support them. The fourth proposal for action concerns ensuring the sustainability of the structures and the development of multidisciplinary cooperation among employees. Finally, we recommend the development of skills in the use and evaluation of methods. A more detailed list of the proposals can be found at the end of this Policy Brief.

## Study material and methodology

The research project utilised existing databases that included the Youth Barometer (Berg & Myllyniemi 2021) and questionnaire data concerning young people's experiences during the Covid-19 pandemic, both collected by the Finnish Youth Research Society, and the treatment and register data (Pitkänen, Kaskela & Levola 2020) of the A-Clinic Foundation. These three were used to provide data on young people as service users. New material was collected based on expert and research seminars that were held at the beginning of the project. Local experiences of youth services were studied in two large cities, one small town and one rural municipality located in northern, central and southern Finland. In these locations, interviews were conducted with young people (n=30) and service staff (n=48) and people carrying out practical work with young people (n=20). Staff members' use of the methods was also surveyed using a Webropol questionnaire. A nationwide perspective on young people's experiences of service needs and the help received was studied by analysing 700 conversations in a chat service called *Sekasin* (Mental chat). The chat service is aimed at young people and young adults aged 12–29 and in total there are 1,900 (in year 2021) social welfare and healthcare professionals and trained volunteers available to chat to young people. The researchers were only given access to those chat conversations where both the young person and the person on duty had given their permission for use in research.

## Youth service thresholds must be assessed continuously

### **Thresholds that exist after a young person has gained access to the service should also be studied**

One of the key starting points of the research was to study the barriers young people face in getting timely and effective support. This led the researchers to take a closer

look at the low-threshold principle and its implementation. Considering services with a low-threshold perspective makes it possible to explore the services from the perspective of the young people. It also brings our research results together as a big picture that aims to see beyond the service providers' differences and sector boundaries.

At its simplest, the low-threshold concept involves making it easier to access services. The concept is used in very different ways and about different services. A low threshold usually means that the threshold for accessing the service is lowered in the service system structure by removing requirements for appointments or referrals. Based on our research, we propose that a low threshold should be considered more broadly so that it includes the thresholds encountered both before and after accessing the services. Barriers that exist within the services should be analysed in relation to 1) seeking services, 2) accessing services, 3) attending services, 4) benefiting from services, 5) changing services and 6) returning to services. It is not enough to cross the threshold to the service just once, as it is necessary to enter these doors several times. In addition, services have to be changed in many cases in order for the young people to receive help with the challenges they face. In the following, we present the project's research results through the six barriers mentioned above.

### **The thresholds to seeking and accessing services consist of both service structures and fears**

Accessing services is preceded by *seeking services*, which for young people involves a range of barriers. Young people often lack information about where and how to seek help. They also need to be persuaded and encouraged to seek help. In the *Sekasin* chat service, young people expressed concerns that their problems were not big enough, were not the right kind, or that services were not available in the end. The young people also expressed fears about the kind of consequences seeking help would have for themselves and their families. Even though help is sought increasingly frequently, many young people still feel ashamed about their mental health and substance use problems and find it difficult to talk about them. If a service is located in a central and visible place, this can be a barrier that prevents a young person from seeking the service as they may be afraid that someone might see them. Young people often find it difficult to make contact, so it is important to offer multiple channels for seeking the services (phone, chat, online appointment and walk-in service).

The first requirement when it comes to *accessing services* is the availability of services. Informants working in the research locations rated the availability of mental health and substance use services for young people as 'satisfactory'. According to them, mental health services have become congested in recent years and there are even queues for activities designed as low-threshold services. Employees identified a shortage of low-threshold units, of places for less-structured encounters and of day

centres in particular. Similarly, substance use treatment services and residential care for people with substance use problems were considered under-resourced. The young people researched also felt that it was difficult to access services. Among other things, young people reported having to queue and rely on self-help and that their problems were downplayed. The poor availability of healthcare services formulates the question of our research project as follows: which methods, good practices and types of cooperation in social welfare can be used to help and support young people who cannot be referred for healthcare services?

### **Attending services requires a successful encounter and maintaining a connection with the young person**

From the perspective of *attending services*, it is important to maintain a connection with the young person, which means phoning them, sending messages and being flexible when appointments are cancelled. Maintaining a connection with the young person also requires a successful encounter, where the young person feels they have been heard and understood, and they feel they are able to solve a problem that is relevant to them. A successful encounter helps to motivate and engage young people in attending the service. Encounters emerge as a central theme in the interviews with both young people and employees in our research material. People working with young people highlighted the working methods they use to support good encounters. Most of these methods are various interaction techniques that help both the young person and the employees to understand the current situation. In addition, tried and tested methods provide young people with new perspectives on their own situation, motivate them to process the situation and empower them. Some of the young people mentioned that various long-term exercises or homework assignments gave them a sense of progress and continuity, which made them return for the next session.

Young people and employees also agreed that employees need more knowledge about how to work with young people who use substances. Young people felt they are often treated with prejudice, based on stereotypes, and that if they have the courage to talk about their substance use the attitude to them changes and becomes suspicious and even rude. A major problem built into the service system is the refusal to provide young people who are diagnosed with a substance use problem with help for their mental health problems. So, alongside feeling shame, the young people experience various forms of humiliation in the services. Social welfare employees who recognise that mental health and substance use problems are interlinked hoped for 'general methods' that they could use irrespective of the problems experienced by the young person.

## **Benefiting from services is centred around comprehensive support of the young person and flexible use of methods**

*Benefiting from services* traces back in many ways to the encounter, the work forms used and the working methods. A young person who needs help with their mental health and/or substance use problems does not necessarily make distinctions between getting help, support or treatment. A young person who is committed to attending the services is trying to solve their problems and feel better by using the available services. In many cases, this also works. When young people were asked what helped them, they rarely mentioned professions or service sectors, but the human encounter with a safe and supportive adult.

The methods chosen to support the encounter and work must be used flexibly by adapting them to the young person's situation. Complex problems require the simultaneous use of a variety of methods and forms of work and employees are sometimes required to react quickly to new situations. It is important that the young person has the chance to be heard continually and the opportunity to influence the methods and forms of work used. Interviews with employees revealed that the adoption of methods in social welfare is, in part, random and the use is, in places, inconsistent. Along with stressing flexibility in the use of methods, we suggest national coordination of social welfare methods in the selection of, training on and maintenance of working methods and evaluation of their effectiveness.

Benefiting from services often requires taking comprehensive responsibility for the young person's situation. Young people's mental health, substance use and neuropsychiatric problems are strongly interlinked, and there are often also a variety of practical issues related to life situations to address. To help young people in a comprehensive way, cooperation with various professionals and service providers is needed. However, a need for clearer coordination of the networking efforts aimed at comprehensiveness and cooperation was identified. Backlogs in mental health services have led to even social welfare employees experiencing problems getting hold of healthcare professionals. When healthcare services are not available, employees would like methods that they can use to deal with problems on the social welfare side.

Despite the challenges, multi-professional cooperation and networking are seen as important ways of working. The employees interviewed were working as part of an extensive network. Their cooperation was facilitated by common premises, but also by meetings held via video link. Successful cooperation meant that there was a low threshold for getting into contact, communication of information about the client and mutual knowledge of each other's work. The diversity of young people's situations also often required the combination of different ways of working. At best, it was possible to take comprehensive responsibility of the young person's situation by combining,

for example, municipal social work with social rehabilitation provided by an NGO. Young people often need multiple forms of simultaneous support: in addition to regular meetings with a social worker or healthcare professional, young people felt they benefited from individuals who provided them with support, outreach work, low-threshold living rooms and digital discussion facilities. When full responsibility is taken of the challenges a young person experiences this is a safe situation in which they can focus on building a more balanced life.

### **The importance of multi-disciplinary cooperation is highlighted when transferring from one service to another**

Cooperation between different parties is also required when *changing services*. The employees interviewed explained that services operating under different organisations do not communicate sufficiently with each other. This leads to unclear service pathways, client referrals back and forth and even young people dropping out of services. Once a young person enters the scope of healthcare, problems might occur when working with them simultaneously through social services. Cooperation is made difficult by the fact that young people's data is kept in various different databases and data protection issues, although it is possible to agree on the flow of information in a very flexible way with the young person's permission. Coming of age often means that a young person has to transfer from one service to another. Special attention is needed to ensure that these critical transfers take place.

From the perspective of young people, problems experienced in changing services were sometimes catastrophic: missing services could put a young person who had already received help back to where they started, it could result in them dropping out of education, or lead to self-destructive behaviour and take years off their youth. Accompanying a young person from one service to another and providing them with support before the beginning of a new client relationship are responsibilities that service providers must be able to share successfully.

Cooperation between different parties is often necessary and even essential when it comes to providing successful support for a young person; it would be important to recognise that the services offered by various providers are often mutually supportive and complementary, rather than being alternative or competitive.

In the end, client relationships are also terminated and sometimes they need to be re-established. *Returning to services* is not self-evident either, and identification of barriers must start with the barriers to seeking the right services. Barriers to returning to services are, in particular, various failures in the encounters.

## **Social welfare has good capacity to help young people with their mental health and substance use problems and it would be important to further develop this**

In situations where young people need help with their mental health and/or substance use problems and it is not possible to refer them to healthcare services, social welfare is able to do a lot. Most important is a successful human encounter, which is supported by a range of working methods and forms. Although the word 'treatment' is not used in social welfare to describe the help provided, young people often feel that they have received many forms of relief for their situation from the social services provided by municipalities and NGOs. Young people gain better control of their own lives and are able to see a brighter future.

The results of our research concern the Finnish service system and partly also cultural issues, especially in relation to the use of services. The more general research findings on the principles of helping young people and the problem areas are also in line with those of international studies. In Canada, for example, a social network study demonstrated young people's simultaneous need for mental health and substance use treatment services and how services have failed to respond to this need (McGibbon et al. 2018). The research and development work were continued in Canada, where young people were engaged as agents (Henderson et al. 2018) and low-threshold service hubs were identified as key areas for development (Henderson et al. 2019). On the basis of a literature review by Hawken et al. (2020), hearing young people's voices at different stages of the service structure is key to making services more youth friendly. Hearing young people and comparing their experiences with the perspectives of employees have been the starting point for this research, and the basis for our results and recommendations.

## **Consistency and flexibility**

Good management and knowledge of young people's needs and the services available are essential for an unbroken and smoothly functioning service package. Cooperation between professionals is much smoother when they are familiar with each other's work and operating logic. At best, cooperation is supported by agreed common working structures, such as working groups and meeting practices, and common working methods. It is also essential to identify the different opportunities of various actors to spend time on client relationships. For example, NGOs often use time-consuming forms of work that help to build a trusting relationship with young people.

In the future, digital tools and skills will play an increasingly important role in reaching young people and providing services. Digital competence in social work targeted at



young people means that social work professionals understand online phenomena and their impact on young people's everyday life and wellbeing, they use digital ways of working and methods that are easy and safe for young people to use and they develop them in social services and support young people in the changes brought about by digitalisation.

In addition to the presented results and recommendations on the thresholds to services for young people, in the frame of this project we have compiled a larger set of recommendations and proposed actions that were targeted at the development of the service system, promotion of education and skills, evaluation of effectiveness, digitalisation and cooperation with the NGO sector. Table 1 presents all proposed actions as a list. More detailed contents of the propositions are presented in Finnish in the final report of this research project (Pitkänen et al. 2022).

Table 1. Proposed actions and recommendations (source Pitkänen et al. 2022).

<p>The specific needs of young people form the basis of the services for youth</p> <ul style="list-style-type: none"> <li>Support for transition stages</li> <li>Ensure sufficient intensity, adherence to and flexibility of support</li> </ul>
<p>A low threshold must be created continuously and in a multi-faceted way</p> <ul style="list-style-type: none"> <li>Thresholds must be assessed on a service-by-service basis</li> <li>Thresholds must be studied from the perspective of the individual young person</li> <li>Thresholds need to be lowered also after the young person has accessed the service or joined an activity.</li> <li>Thresholds must be lowered through cooperation with the third sector and with digital services</li> </ul>
<p>Methods to support encounters, flexibility and comprehensive approaches</p> <ul style="list-style-type: none"> <li>The encounter is the core factor</li> <li>A diverse set of methods supports the flexibility of the encounter</li> <li>Good management includes gathering a comprehensive set of methods to support the needs of the work and the young person</li> <li>Methods need to be developed in cooperation and across administrative boundaries</li> </ul>
<p>The structures support young people and the multidisciplinary cooperation between employees</p> <ul style="list-style-type: none"> <li>Common structures ensure the continuity of services and support for using methods</li> <li>Attention must be paid to service guidance and coordination</li> <li>Provision of simultaneous support to young people in mental health and substance use treatment services must be improved</li> <li>Service pathways from low-threshold digital services to other digital and face-to-face services must be developed further</li> </ul>
<p>Development of skills supports consistent use of work methods and assessment of impact</p> <ul style="list-style-type: none"> <li>Social welfare worker's competence in mental health and substance use issues must be systematically strengthened</li> <li>Digital skills to support encounters must be strengthened</li> <li>The introduction and import of social welfare methods must be supported nationally</li> <li>Criticism and systematic approach when evaluating effectiveness</li> </ul>
<p>Topics for further research</p> <ul style="list-style-type: none"> <li>Continuous and long-lasting research on social welfare methods</li> <li>Combined research and development of activities across administrative sectors</li> <li>To support minorities, competence and a proactive approach are needed</li> </ul>

Finally, the research team would like to express its heartfelt gratitude to all the courageous young people who spoke about their life situation in interviews and shared their first-hand experiences of the services. Similarly, we would like to thank the young people and volunteers in the *Sekasin* chat service who gave us permission for the research use of their conversations. The team would also like to thank the staff who have contributed their expertise through interviews and expert meetings to produce research data.

## Further reading

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