Not all Polish Children Can Receive Psychiatric Care. Does the Situation Look Any Better in Germany?

When she was 18 years old, Cleo Ćwiek was hospitalized due to her problems with bipolar disorder. Despite the difficult situation, the now 29-year-old Polish model and mental health entrepreneur remembers feeling supported by her parents during every visit. They would ask her what she needed and if they could do anything to help.

However, some of her peers were not as fortunate. Not only were there not nearly enough inpatient beds to go around, but some parents were more worried about the stigma of having a child with a mental disorder than being comforting.

"When other kids' parents would come in, they would try to figure out what to tell at school," Ćwiek tells Gazeta Wyborcza. "They were sort of plotting to find a way to hide where their kid is so that they don't have to tell anyone that they are in a mental hospital. I felt like that was so heart-breaking."

Lack of access to care

Only about 72% of Polish 15-year-olds are satisfied with their lives, while more than half of adolescents mentioned feeling unhappy with their body. That's according to a 2020 UNICEF report investigating child well-being in 41 EU and OECD countries, which ranked Poland 31st. Suicide statistics are even more alarming, as police data shows that 1,496 children and teenagers under the age of 18 attempted to take their own life in 2021, a 77% increase in suicidal behavior compared to 2020.

These numbers, which are frequently attributed to the Covid-19 pandemic, should warrant an increase in specialized mental healthcare professionals. But, in the public system, waitlists sometimes span over one or two years, according to Joanna Rymaszewska, Specialist Psychiatrist and former Head of the Department and Clinic of Psychiatry at the Medical University of Wrocław.

"We have a lack of psychotherapists working with kids in Poland and also very few child and adolescent psychiatry experts," Rymaszewska explains. "Many young doctors do not choose this specialization, because it's hard work and not well paid."

According to the Supreme Audit Office, Poland only had 418 pediatric psychiatrists or about 6 per 100,000 children and teenagers in 2019, one of the lowest number of any country in the EU. Data by the World Health Organization (WHO) showed that there were only 2.32 inpatient beds available at psychiatric hospitals per 100,000 children and adolescents in

2017.

Specialized care for ‘mild’ cases

In neighboring Germany, the situation looks slightly better. According to the Association of Registered Relief Funds (VDEK), about 2,300 pediatric psychiatrists and 10,000 psychotherapists were active in the country in 2016, while the WHO estimated the number of inpatient beds in 2017 to be around 7.52 per 100,000.

Like Poland, Germany’s youth is also reporting record numbers of mental health disorders in the aftermath of the pandemic. In 2021, psychological and behavioral disorders were the most common reason for an inpatient hospital stay for children and teenagers, while the depression incidence in teenage girls increased by 27% between 2019 and 2021. That’s according to data by the German Federal Statistics Office and the Central Research Institute of Ambulatory Healthcare (Zi), respectively.

After starting her career as a social education worker, child and adolescent psychotherapist Karin Hübner now owns her own practice in Karlsruhe. Despite high demand, she is usually able to accept new patients: “I can certainly treat someone new as long as they can come in at a time that I’m still available. Then I don’t have any wait time at all.”

“In the city of Karlsruhe, for example, you should have no problem finding a treatment spot, unless it’s for a more severe psychiatric case. Those people might have more difficulties,” says Hübner.

However, a short waitlist to make an appointment with a psychotherapist specialized in children and teenagers doesn’t seem to be the norm in every German city. Dr. Nicolas Rüsch, Professor for Public Mental Health and Consultant Psychiatrist at the Department of Psychiatry II at Ulm University and BKH Günzburg, mentions that many are turned down right when they pick up the phone:

“They call and hear, ‘you have to wait for six months’ or ‘we can’t put you on a waitlist’. That’s also difficult for these psychotherapists. It’s not nice to have to turn people down and have crying parents on the other line.”

Rüsch further underscores Germany’s need for more professionals who are qualified to deal with severe mental health disorders: “There are many psychotherapists that treat people with milder complaints, for example, a simple anxiety disorder, but have difficulties with those who are affected by borderline personality disorder, psychosis, addiction or severe trauma. Those more serious cases are often not given the care they need.”

The earlier, the better

Early prevention may play a role in keeping psychiatric complaints from developing into severe disorders, which can have long-lasting consequences, such as unemployment, addiction or homelessness. Irrsinnig Menschlich ('madly human') is one example of an organization that implements preventative mental health education in schools throughout Germany.

One of the projects – which aims to destigmatize mental health and teach students how to ask for help – involves creating an engaging conversation between students, teachers, mental healthcare professionals and so-called personal experts, or people who have recovered from a mental disorder themselves.

"At the end of every project day, students who are already struggling will approach our team to get more information. And, the good thing is that we already have specialists with us," says Dr. Manuela Richter-Werling, Founder and Managing Director of Irrsinnig Menschlich. She explains that, if there is a need, a child or teenager can receive professional attention right away.

The organization is also trying to partner with other European countries, including Poland. According to Richter-Werling, Warsaw and Kraków's child and adolescent psychiatric hospitals have shown an interest in implementing similar preventative programs in schools throughout the country.

Until that happens, existing mental health foundations and grassroots movements continue to play a large role in destigmatizing mental health in Poland. Ćwiek founded Można Zwariować Foundation for Mental Health after she realized that opening up about her experience with bipolar disorder made her feel empowered. Now, she hopes that it can help draw attention to a broken mental healthcare system, as well as spread this message to all young Polish people who need to hear it:

"If you communicate [mental health] in a way that it's a 'life sentence', it's not very helpful for the person experiencing it. From my own experience, if you get the right treatment, either medication or a specific kind of therapy, you can live a perfectly normal, happy life."