

# Programmes for minors (BUP Stockholm)



## Type of intervention



Counselling



Individual Work

## Target group/s, level/s of prevention and sub-group/s:



Tertiary Prevention

'Offenders' | Young People | (3-17 years) | Male & Female | Group Setting | Swedish

## Target population

BUP assists children, both boys and girls, who are younger, between 3 and 17, who have acted in a sexual manner against other children. BUP also assists children struggling with psychiatric issues in general.

## Delivery organisation

'Child and adolescent psychiatry', or BUP, operates in Stockholm as a specialist department within the publicly run healthcare within Stockholm County's healthcare area, SLSO, which is part of the Stockholm Region.

BUP's aim is to conduct psychiatric care at a specialist level in order to achieve improved mental health. Psychiatric care refers to investigation, assessment, diagnostics, treatment and care as well as support and counselling for patients with psychiatric illnesses in child and adolescent psychiatry. Psychiatric care at specialist level includes a differentiated range of emergency and planned reception visits, consultations, home care, round-the-clock care and psychiatric compulsory care in accordance with the Compulsory Psychiatric Care Act, LPT. Each patient's individual resources and opportunities to participate in care and treatment must be utilized. The caregiver designs processes that promote continuity, accessibility, respectful treatment, and a health-promoting approach. Patients are admitted based on medical needs assessment and prioritization.

## Mode and context of delivery

BUP offers various forms of treatment such as counselling, psycho-pedagogical interventions, drug treatment, group treatments, family-based interventions and psychological treatment, often with elements of behavioural training. The

efforts can be given both through physical contact at the clinic, through home visits in certain cases or through internet-mediated contact. If deemed necessary, the child / young person receives care around the clock in one of our care wards.

### **Level/Nature of staff expertise required**

At BUP care is specific to the individual. Therefore, staff are from different professional categories, such as doctors, nurses, psychologists, counsellors and occupational therapists, in order to best treat and support the patient and his or her relatives.

### **Intensity/extent of engagement with target group(s)**

The intensity/extent of engagement with young people is dependent on their individual situation. Care can be given in the form of individual sessions, in-person at the clinic, through home visits or even through internet-mediated contact.

Care at BUP is characterized by quality, a holistic view and participation. Working together with children, young people, parents and sometimes also the rest of the family, as well as the patient's network in the form of school, social services and more, is a prerequisite for creating opportunities for change and positive intervention.

### **Description of intervention**

BUP receives children and young people with more serious mental disorders, such as those who are depressed, have a lot of anxiety or injure themselves. Most of the time, the problems have become so great that it is no longer possible to make everyday life work - at home, at school and with friends.

The care process:

Assessment and investigation: First, we make a survey of the problems the child need help with. If there are several problems, we prioritize what is most difficult for the child currently. BUP investigate their needs, make an assessment and make a diagnosis in consultation with the child and their guardians.

Care planning: When the child receives a diagnosis, they receive recommendations for how that diagnosis should be treated based on you as an individual. Together with the child, BUP then make a care plan where all members agree on what is to be done, in what order and by whom. BUP also talk about what the child and their parents can do to feel better and when BUP should follow up on the plan.

Treatment and interventions: BUP implement the plan with the agreed interventions.

Follow-up and evaluation: After the efforts have been completed, BUP and the participant do a follow-up together and evaluate how it has gone, to see that the child has felt the right effects and has started to feel better. If BUP come to the conclusion that the child needs continued care, they will make a new care plan, but if the patient has become better and no longer needs help from BUP, the organisation will end contact.

## **Evaluation**

Unknown

## **References**

Unknown

## **Contact details**

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