

EMERGING ADULTS' RIGHT TO WELLBEING

A COLLECTIVE CALL TO TRANSFORM SUPPORT SYSTEMS
FOR MENTAL HEALTH IN THE NORDICS

Next in Mind

Scaling wellbeing for emerging adults in the Nordics



REACH FOR
CHANGE

TIM
BERGLING
FOUNDATION

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Mental health is one of the most urgent challenges facing our societies today. With the current rapid pace of change, one group in particular is most at risk. Emerging adults aged 18–29, those navigating the critical transition from adolescence to adulthood. Today, they face increased inequalities, an uncertain, complex job market, and prolonged time in education, which have led to significantly later entry into employment and independence compared to earlier generations.

In the Nordics, 70% of the 3.8 million who fall within this age group have struggled with mental health issues. Despite high standards of living and strong welfare systems, many emerging adults report major obstacles in receiving real help. Their specific needs are not being met.

Next in Mind is here to change this. A Nordic initiative founded by Reach for Change, The Inner Foundation, and the Tim Bergling Foundation, our collective impact approach strengthens mental wellbeing among emerging adults by accelerating innovative, scalable solutions. We bring together a wide range of Nordic stakeholders — partners from the public and private sectors, academic experts, mental health practitioners, and emerging adults — whose crucial involvement empowers solutions that make real change. In real lives.

The real work is what we're here for, which informs our deep support of social entrepreneurs. Key players in this transformation, they challenge the status quo, co-create solutions with emerging adults, and pioneer new ways to deliver support. Our task is to empower them to flourish. A supportive ecosystem — with funding, infrastructure, cross-sector collaboration, and policy alignment — is crucial to their success. Enabling this is central to our mission.

This report provides the findings of a comprehensive ecosystem mapping effort across Sweden, Denmark, Finland, and Norway. By providing solid insights of the mental health challenges faced by emerging adults, our goal is to **establish** emerging adults as a group all their own due to societal changes. To **illuminate** the systemic barriers they face. To **highlight** effective solutions already in place. To **share** our vision of a stronger support system. And to **present** actionable paths forward.

By mobilizing and uniting actors across society, we create the conditions for this generation to thrive, not merely survive.

We are all needed.

Sofia Breitholtz
CEO
Reach for Change

Annika Sten Pärson
Co-Founder and Executive Chair
The Inner Foundation

Klas Bergling
Founder
Tim Bergling Foundation



Method

This report is the result of extensive research.

To gain a full picture of the mental health ecosystem for emerging adults — from health promotion to clinical treatment — we gathered quantitative and qualitative data from across four Nordic countries. A special thanks to our knowledge partner Bain & Company for their extensive commitment to gathering, analysing and compiling the substance of the report.

- **Survey of over 1,000 emerging adults** in Sweden, Denmark, Finland, and Norway. A unique, representative data collection survey bespoke to this initiative executed by one of our knowledge partners, Perspetivo.
- **51 in-depth interviews** with stakeholders in the public and private sectors, civil society, academia, and investment across all four countries.
- **Qualitative data and desk research** conducted by Bain & Company, which analyzed available studies, systemic trends, and structures.
- **Focus groups** with stakeholders and emerging adults, including Next in Mind's reference groups and the Emerging Adults Advisory Board.

This mixed-methods approach allowed us to identify patterns, surface insights across contexts, and highlight the voices of those most affected. The findings point to both a shared urgency across the region and clear opportunities for scaling impact through social innovation, ecosystem coordination, and investment in health promotion.

Mental health of emerging adults in the Nordics

Let us start with some good news. The majority (66%) of emerging adults in our study **report that they generally feel good or very good** right now. The story shifts when they are asked to look back and reflect.

Mental health struggles are still widespread among emerging adults in the Nordics. Our survey reveals that **70%** have experienced mental health issues, yet **58% avoid seeking help**, primarily due to **stigma**. Even for those who do, **85% report major obstacles and poor quality**, from long waiting times, to not being understood or taken seriously. Non-Nordic-born young adults face additional burdens, including discrimination, unemployment, and social exclusion.

These personal struggles also carry significant societal costs. Mental health challenges cost the Nordic countries an estimated **€60–80 billion annually**, with **€10 billion** tied specifically to emerging adults. This is more than the combined annual parental leave benefits across all four countries in the study. Most of these costs stem from a system that reacts to crises — rather than preventing them.

The case for change

Despite the severity of the challenge, investment in **preventive** mental health care remains critically low — less than 1% of the total societal cost. However, estimates show that every **€1 invested in prevention yields €5** in improved health and productivity outcomes.

Fortunately, promising solutions already exist.

Social entrepreneurs are building trust-based, community-rooted models of care that reduce stigma, reach marginalized groups, and offer low-threshold support tailored to young people's needs. These innovations are both scalable and cost-effective. They do, however, require targeted support to grow and become embedded in mainstream systems.

To turn the tide on emerging adults' mental health, this report provides **six key insights for action** needed across all levels of society:

- 1. Establish emerging adults as their own target group**
Policies, research, and services must adapt to the specific challenges at this transitional stage. This includes investing in support and health promotion for those in particularly vulnerable situations, such as national minorities, individuals in low-income areas, and LGBTQIA+ communities. Establishing this age group as distinct empowers targeted, effective solutions.
- 2. Destigmatize seeking support for mental health**
Conversations around mental health must be normalized in everyday spaces — social media, educational institutions, community centers, and sports clubs. By amplifying society-wide efforts to raise mental health literacy and promote healthy narratives, especially for groups facing compounded risk factors like discrimination and social exclusion, the barrier of stigma loses its grip.
- 3. Ensure responsibility and commitment from key actors in emerging adults' lives**
Educational institutions, workplaces, and local communities must take active responsibility for promoting and implementing effective mental well-being strategies. Integrating basic mental health awareness and proactive support strategies in these everyday environments creates core pillars of a broader support system.





4. Commit to cross-sector collaboration to increase access to proactive support
Stronger collaboration must be activated between public, private, and civil society actors to deliver coordinated, accessible, and preventive mental health support. Clear roles, incentives, and shared goals make cross-sector collaboration effective, transforming fragmented support systems into healing networks.

5. Improve access to low-threshold support during critical transition phases
Community-driven and social-venture solutions must be scaled and made more accessible through centralized information hubs and supportive policies. By recognizing that these trusted, low-barrier platforms often reach emerging adults more effectively, their role within the wider system is strengthened.

6. Improve implementation of proven mental health innovations for emerging adults
Successful models developed by social entrepreneurs and civil society must be structurally supported to scale impact. By using long-term, blended funding solutions and procurement systems that enable integration into existing frameworks, sustainable and systemic change is fortified.

This report is our call to hope in action.

By highlighting how today's support systems are designed — disconnected from the lived realities of emerging adults — we strive to address this gap. By placing the perspectives of emerging adults at the core, we share our vision of a more responsive and effective system. We call on policymakers, funders, entrepreneurs, public institutions, private companies, civil society actors, and emerging adults to join forces and commit to a Nordic-wide movement for mental well-being.

The cost of inaction is too high. The time to act is now. Join the movement.

Current state of emerging adults' mental health

- **Mental health struggles among Nordic emerging adults (18–29 years old) are common, with ~70% reporting that they have battled with theirs.** This group faces unique challenges during this transitional phase of life, such as moving away from home, starting new education, entering the workforce, forming relationships and identities, as well as figuring out what direction to take in life and facing an uncertain future.
- **~70% report negative stigma around seeking mental health support and worry what others will think,** severely limiting their willingness to seek help.
- **~85% have encountered problems when seeking help for mental health,** including long waiting times, affordability, and poor standard of help.
- **Underrepresented groups** — minorities, neurodivergent individuals, those with disabilities, or those with non-Nordic parents — **face additional challenges,** such as racism and discrimination or lack of adequate support.
- **A sense of belonging and community are key support mechanisms for emerging adults' mental wellbeing and contribute to building resilience.** Key sources of support mentioned in the survey were closest family (43%), friends (38%), psychologist/therapist (36%), and partner (28%).

Current ecosystem surrounding emerging adults today

- **Lack of dedicated support for emerging adults,** as they fall into a gap between youth and adult services, losing access to support systems as societal safety nets disappear once they turn 18. Existing services are not adapted to their unique needs, leaving them underserved and overlooked.
- **Mental health support for emerging adults remains fragmented and inaccessible, with ecosystem actors operating in silos** (e.g., across health care, education, workplace, and civil society) resulting in limited accessibility and inclusivity as well as a lack of a holistic approach. Current mental health support options often face barriers of trust, stigma, and low adoption.
- **Lack of preventive support,** as most current efforts are reactive, often treating symptoms rather than addressing root causes or promoting wellbeing..
- **Heavy reliance on civil society actors to fill gaps** left by public health care and other formal systems, particularly in providing low-threshold, accessible support for emerging adults. These actors do, however, struggle to secure sustainable funding and coordinate efforts.
- **Lack of implementation of solutions that work, inadequate funding, and disconnected research is limiting progress.** Funding remains difficult to access for social innovation, and research often remains far from real-world applications, limiting its practical impact.

Key insights to drive and enable systems change

- **Recognize and establish emerging adults as their own target group** and develop dedicated support systems, distinct from children and adults.
- **Destigmatize seeking support for mental health and normalize the topic** by actively spreading healthy narratives surrounding mental health.
- **Ensure responsibility and commitment from key actors in emerging adults' lives,** leveraging non-health care actors (e.g. workplaces, schools, communities) to support and implement proactive mental health strategies to support emerging adults in their everyday lives.
- **Commit to cross-sector collaboration to increase access to proactive support** by clarifying roles, coordinating support, and spreading knowledge.
- **Improve access to low threshold support during critical transition phases,** e.g., through an online platform that provides support information.
- **Improve the implementation of proven mental health innovations for emerging adults** by e.g., develop long-term financial structures to civil society as key actors in delivering low-threshold support for emerging adults' mental health and spreading knowledge of successful social innovations.

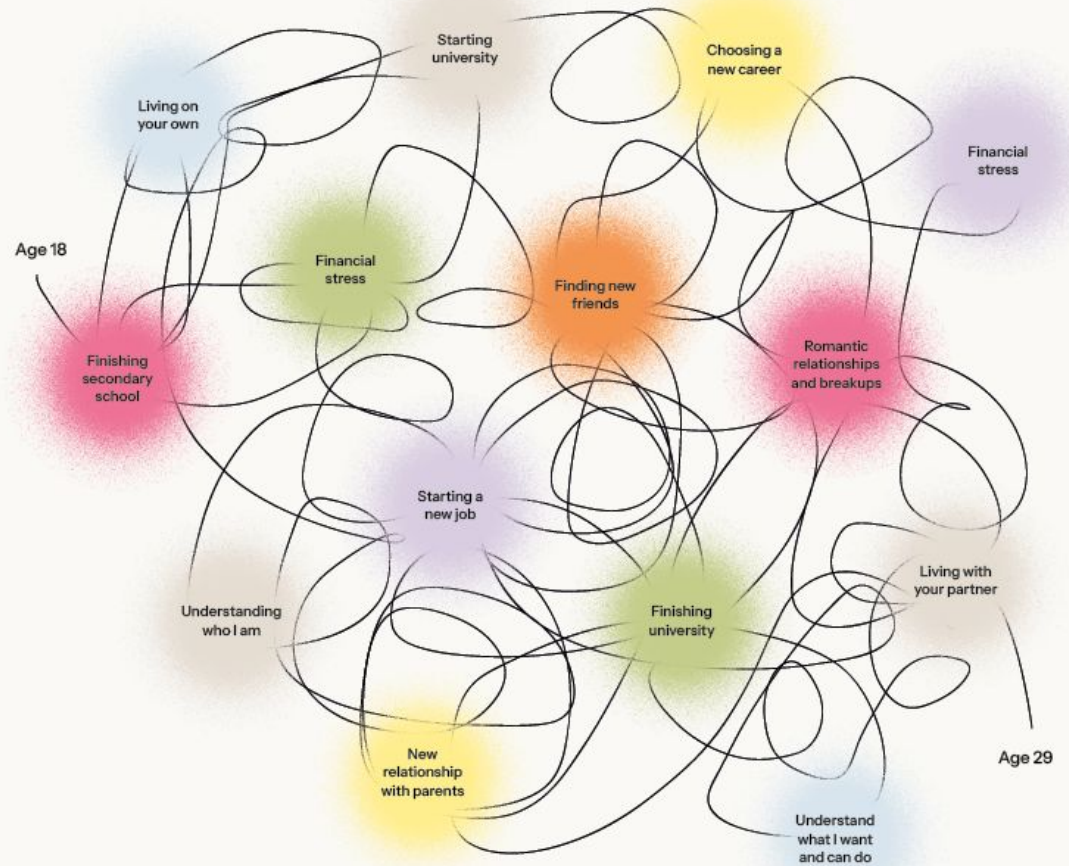
UNDERSTANDING EMERGING ADULTHOOD

Emerging adults: the age *in between*

Emerging adulthood (ages 18–29) is a **busy and transformative period**, marked by major transitions in education, employment, relationships, and identity formation. It is a time of **opportunity but also significant stress**, as young people navigate key life changes with limited structured support. Many face **involuntary loneliness, uncertainty in an increasingly individualistic society, and mounting pressures to establish their future**, all of which can take a toll on mental wellbeing.

Despite these challenges, emerging adults are often overlooked in mental health systems. **Support structures designed for children phase out at 18, while adult services are rarely adapted to their needs.** Long waiting times, stigma, and a lack of tailored intervention make it difficult for many to access help when they need it the most.

Moreover, emerging adults are not a homogeneous group. Their needs and struggles vary widely based on background, socio-economic status, and personal circumstances. Some face **compounded difficulties, such as neurodivergence, migration experiences, or socio-economic hardship**, requiring more nuanced and accessible support.



In the two decades since the concept of emerging adulthood was initially defined in research, several contextual developments have collectively added extra layers of challenges for many in this age group:

- **Increasing inequality.** Rising income inequality and segregation has enforced social inequalities in mental health.
- **A more competitive and uncertain job market.** More and more jobs are part-time, temporary, or gig-based.
- **A workplace characterized by increased complexity.** Some factors include high rate of change, information overload, limited resources, and high productivity demands.
- **The rise of social media.** Screen addiction, intense social comparison, information overload, and reduced face-to-face interaction compound stress factors.
- **An uncertain world.** Climate change, pandemics, war, social tension, and polarization increase pressure.

Our Nordic Emerging Adult Advisory Board Nordic stressed that the competitive environment in both universities and workplaces is a major threat to their mental wellbeing

“

We don't have time to find ourselves because we need to be productive by either working or going to university.

“

Many struggle with the same issues, and I think we need a space to talk about our problems where we don't compete. For me, this is not with my friends but where I volunteer. I feel serving shifts your focus from yourself to working together to contribute to a common cause.

We are emerging adults

Emerging adulthood is defined as the life stage between 18 and 29 years old. In the Nordics, we are 14% of the population – around 3.8 million people.

This time in life comes with many opportunities, and challenges. At the age of 18, we have the legal rights and responsibilities of adults. We have the freedom to make choices about our life and take advantage of the opportunities that come with being adults. But many of us find ourselves struggling to handle the big changes and uncertainties we face during this crucial transition.

Here are some of the factors impacting our wellbeing.

Brain development

Modern neuroscience explains that during emerging adulthood, our brains are not fully mature and continue developing until at least our mid-20s. Although our brains continue developing throughout our lives, this major period of growth has a substantial effect on our life skills and abilities, especially in terms of:

- planning and thinking ahead
- calculating risks and rewards
- prioritizing
- regulating emotions

Our brains develop at different speeds. Some of us have brains that mature more quickly and therefore have better control over our emotions and decision-making.

If our brain is slower to develop, we have a harder time managing our feelings and making decisions. These differences in brain development are an important determinant of our ability to deal with critical life events during emerging adulthood.

Why define a unique life stage for emerging adults?

As compared to earlier generations, we now face certain societal trends that lead to an extended period of transition to full adulthood. These include:

- **More time in school.** Many of us go to university or continue with other forms of education and graduate later. This means that we start working later.
- **Career exploration and experimentation.** We often switch jobs a few times and test out different careers.
- **Diverse relationships.** We explore different types of relationships, from casual dating to living together to long-term partnerships. Many focus on our personal growth before settling into more serious relationships.
- **Financial dependency.** We take longer to start earning a salary that enables us to fully support ourselves. Almost one out of ten are neither in employment, education or training.
- **Geographic mobility.** We are more likely to move to different locations for school or work, which may include moving to another country.

This delayed transition to full adulthood is particularly pronounced in the Nordics. We receive an undergrad degree at a much later age than the OECD average, in turn establish ourselves later on the labor market.

By being officially recognized as our own unique group, we believe our needs can be better met at this crucial time in our lives. Equipping us with the mental wellbeing to thrive – not merely survive – in our rapidly changing modern world.

Age when 75% of the population
are employed in Sweden

1990:
21 YEARS OLD

2020:
29 YEARS OLD

Source: Statistiska Centralbyrån

IDEAL MENTAL HEALTH SUPPORT

Future vision: Ideal support for emerging adults

In an ideal world, all **emerging adults receive the mental health support they need** from a well-functioning ecosystem that surrounds and serves them.

This section creates a vision of such a system and the support it could provide. Pulling from the results of 51 in-depth interviews, survey responses, and workshops with **emerging adults and ecosystem stakeholders**, the aspects of what truly constitutes a supportive mental health system for this group become clear. In addition, the concrete steps required to build and sustain this system are spelled out.

By aligning the lived experience of young people with the ambitions of those shaping support systems, we set out to build a future where all emerging adults receive the support they need to flourish.

This vision leads us there.

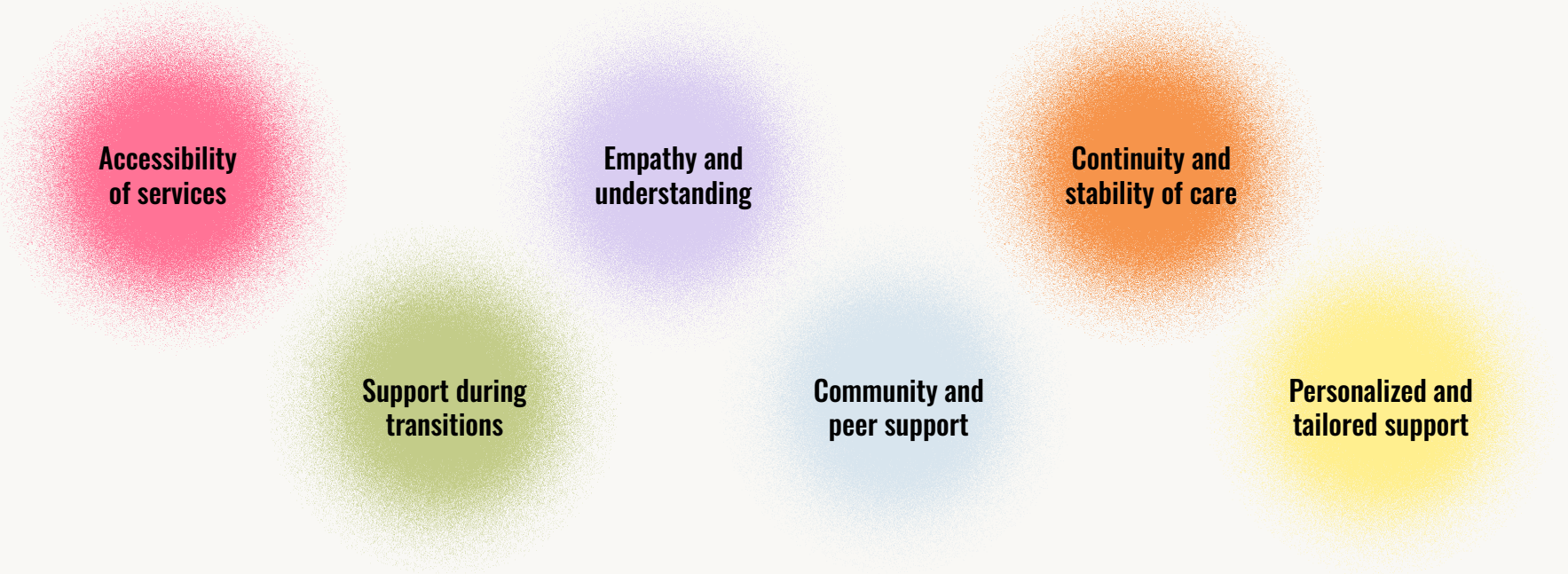


Our vision

**Every emerging adult,
whoever and wherever they are,
has a deserving and inherent right
to the highest attainable standard
of mental health.**

Developed by our Emerging Adults Advisory Board

How emerging adults define good, functioning, inclusive mental health support



**Accessibility
of services**

**Empathy and
understanding**

**Continuity and
stability of care**

**Support during
transitions**

**Community and
peer support**

**Personalized and
tailored support**

The measures emerging adults consider necessary to create good, functioning, inclusive mental health support

Establish mental health as a norm at the center of societal change

1. Accessibility of services

Shorter waiting times

Many respondents highlight the need for quicker access to mental health services by reducing wait times for therapy and psychiatric appointments.

Affordable or free support

More affordable or ideally free mental health services, including therapy and counseling, would be incredibly valued. The high cost of psychological services is a barrier for many young adults.

Physical availability

Respondents express the need for physical health services rather than digital-only options, especially in rural or remote areas where distances to facilities are long.

2. Empathy and understanding

Non-judgmental support

Emerging adults value support that is empathetic and non-judgmental. They want to feel heard and understood, rather than judged or dismissed.

Increased awareness and education

A desire exists for society, including health care providers and the general public, to have a better overall understanding of mental health issues. Reducing the stigma associated with seeking help is seen as essential to creating inclusive support.

“Society is still relying on the traditional idea and have not caught up with what life looks like when you're an emerging adult today.”

3. Continuity and stability of care

Consistent care

Respondents stress the importance of stable and ongoing support. They dislike frequently changing therapists or care providers, which disrupts their care and has a negative impact on trust.

Long-term support

Good support is seen as continuous, rather than short-term intervention. Emerging adults express frustration with systems that offer limited sessions or minimal follow-up.

The measures emerging adults consider necessary to create good, functioning, inclusive mental health support

4. Early intervention and preventive measures

Education and awareness in schools

Respondents suggest integrating mental health education into school curricula to promote early awareness and prevention. This includes learning about managing stress, dealing with emotions, and understanding mental health issues.

Support during transitions

Transitioning from youth services to adult services is seen as a critical period, and respondents believe that support needs to bridge this gap better to prevent feelings of abandonment.

“Emerging adults are invisible. We need to take off the invisibility cloak and show them we are here.”

5. Community and peer support

Social and peer networks

Respondents highlight the importance of social support networks, such as peer support groups and community activities, which foster a sense of belonging and reduce isolation.

Safe spaces for discussion

Creating safe and low-threshold environments where young adults can talk openly about their problems without fear of judgment is emphasized as an essential component of inclusive support.

6. Personalized and tailored support

Individualized approach

Young adults seek support that is tailored to their specific needs, rather than a one-size-fits-all approach. They emphasize the importance of being treated as individuals with unique challenges, rather than part of a standardized system.

View mental health as something crucial to health that should be taken care of at all times

How ecosystem stakeholders define ideal mental health support for emerging adults in the Nordics

A well-functioning mental health support system for emerging adults is one where society as a whole creates the solution. Support feels close, accessible, and tailored to individual needs. It thrives on collaboration, uniting public, private, and community organizations to ensure no one falls through the cracks. Services are inclusive and easy to access, available both in-person and digitally, and focus on prevention and early support that meets people right where they are.

This system empowers emerging adults by including their voices when designing solutions, fostering resilience and belonging through holistic, culturally sensitive care. It adapts to societal changes, uses innovative tools, and ensures equitable access regardless of background or location. With strong connections across workplaces, schools, and communities, this ecosystem creates a supportive, seamless network that empowers emerging adults to thrive.

Future state: A well-functioning Nordic mental health ecosystem



Integrated and collaborative services

Seamless collaboration between public, private, and third-sector organizations ensures accessible, team-based support tailored to emerging adults' needs.

Accessible, low-threshold care

Early, culturally sensitive intervention prevents escalation of issues, with services that are inclusive, easy to navigate, and accessible digitally and physically.

Holistic, supportive, and centered on emerging adults

System includes accessible emerging adult-oriented services like expanded centers or health hubs. Services address promotion, preventive care and specific support needs, providing readily available early support.

"It's important to build community. We have to feel valuable, that we have something to contribute."

Emma Holtén
Social media profile

Societal integration and equity

Mental health care is integrated across workplaces, schools, and communities, addressing systemic issues like socioeconomic disparities and discrimination.

Adequate resources and innovation

Increased funding, streamlined processes, and innovative tools enhance timely access to care and support.

Community engagement and belonging

Civil society involvement is strengthened, fostering belonging, shared responsibility, and supportive ecosystems.

Empowerment for emerging adults

Their essential voices are included in designing solutions, promoting agency, and addressing unique challenges through mentorship, education, and engagement.

Workplace and policy support

Enhanced mental health practices in workplaces and schools ensure supportive environments, while training reduces stigma and promotes inclusion.

Culturally competent

The system integrates trans-cultural competence, enabling care providers to understand and address the diverse backgrounds and needs of individuals.

Community-based measures

Intervention utilizes peer-to-peer support, offering accessible activities, e.g., gaming, that meet this group where they are.

"A system they can see and understand, so they know what space they have to do things. These are reasonable expectations. You know what to do and who to turn to when you need help, and that you get support when you need it."

Sara Fritzell
Researcher at Folkhälsomyndigheten



Future state: A well-functioning Nordic mental health ecosystem



Accessible and equitable

Care is readily available where people live and work, ensuring no geographic or social barriers prevent access. Horizontal equity is achieved, meaning care is provided based on need rather than demographic or socioeconomic background.

Evidence-based and trustworthy

All interventions and systems are evidence-based and consistently evaluated for effectiveness. There is a high level of trust in the system from the population, ensuring individuals are comfortable seeking help.

Adaptable and transparent systems

Flexible frameworks are in place that evolve with societal changes, promoting awareness, collaboration, and efficient service delivery.

Preventive and proactive

There is a strong emphasis on preventive measures and early intervention, reducing the need for more severe or compulsory psychiatric care. Services extend beyond traditional health care to include broader health-promoting and community-based initiatives.

Simplified and connected

The system is easy to navigate, with fewer administrative hurdles and clear pathways to care. There is enhanced collaboration between municipalities and regions, ensuring seamless integration and delivery of mental health services.

Supportive transitions

The transition between child and adult psychiatric care is smooth, preventing patients from falling through the cracks.

Flexibility in service delivery

Flexibility in service delivery, where sectors adapt to the needs of emerging adults instead of imposing rigid structures.

Integration of digital solutions

Digital health tools are utilized effectively, designed to meet the needs of all populations, including those with lower health literacy or language barriers. Services are available both in-person and digitally, catering to diverse preferences and situations.

Cultural healing

Active inclusion of arts, culture, and community-based activities in mental health strategies, fostering resilience and belonging.

"A good ecosystem is a system that captures and can help the person with what they need support with."



Dagfinn Mørkrid Thøgersen
Clinical Director at Nasjonalt Utviklingssenter for Barn og Unge

"There needs to be policy in place that prevents discrimination, promotes environmental wellbeing, equality, and a brighter future. Everybody needs to belong, to experience a sense of belonging. To have agency and be able to feel that they can influence their own life and their society."



Aija Salo
General Secretary at Mielenterveyspooli

An emergent vision: the ideal mental health system

Source: Interviews with 51 Nordic stakeholders in the private and public sectors, academia, civil society, as well as from the Emerging Adults Advisory Board

A whole society commitment

Mental health involves everyone. Every actor in society sees and acknowledges their own role in working proactively to ensure that every emerging adult has access to support. There are strong collaborations in place across sectors, including schools, health care, community organizations, companies, and media. This fosters multi-sectoral partnerships to create a holistic approach to mental health.

Holistic approach to mental health

Emerging adults receive support tailored to their specific needs, rather than a one-size-fits-all approach. They emphasize the importance of being treated as individuals with unique challenges, rather than as part of a standardized system.

A "health in all policies" principle

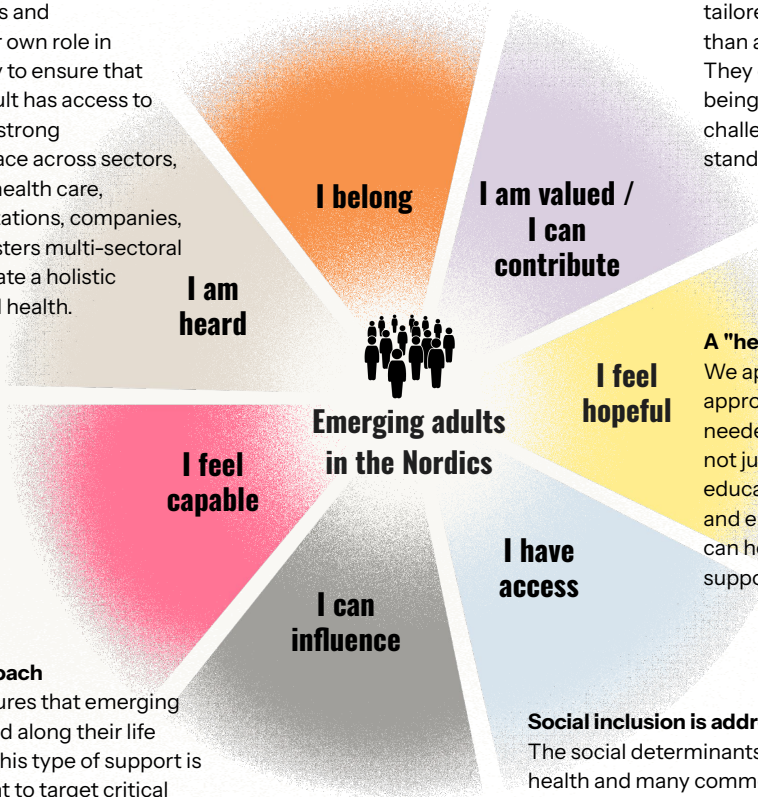
We apply a cross-sectoral policies approach, meaning that action is needed across multiple sectors, not just within health. This includes education, social services, housing, and employment. "Health in all policies" can help to ensure that all policies support mental health.

Social inclusion is addressed on a structural level

The social determinants of health highlight that mental health and many common mental disorders are largely shaped by social, economic, and physical environments in which people live. Social inclusion needs to be addressed at the societal level. This could involve policies to reduce economic inequality and insecurity, promote social inclusion, and combat discrimination and bullying.

A life-course approach

This approach ensures that emerging adults are supported along their life journey. Providing this type of support is especially important to target critical stages, transitions, and settings where different interventions may be particularly relevant. This includes the transition from youth to adult services, a critical period.



MENTAL HEALTH STATUS OF EMERGING ADULTS IN THE NORDICS

Mental health today

The message is clear.

Mental health struggles are widespread.

High levels of distress are reported across age groups and countries, with certain groups — such as women, individuals with disabilities or neuropsychiatric conditions, and those with non-Nordic parental backgrounds — disproportionately affected. Many report feeling overwhelmed by stress, loneliness, or anxiety, often linked to school or work pressure.

Support is often out of reach. Stigma continues to prevent many from seeking help, and those who do often face long waits, unaffordable services, or care that doesn't meet their needs. Yet across the region, one protective factor consistently stands out: a strong sense of belonging, especially in relationships with family and friends.

By offering a more nuanced view of both personal experiences and systemic gaps, this section deepens our understanding of the realities facing emerging adults today. Addressing these challenges requires urgent action, as well as sustained learning, listening, and adaptation.



Key figures: Current mental health status

Majority of Nordic emerging adults have struggled with mental health

~70% have been unwell

Of those, **~41% have never sought help**

Similarities across countries and ages,
with select at-risk groups:

Females

78% have been unwell

**Diagnosed with a disability
or neurodivergent**

77% have been unwell

Non-Nordic parent(s)

73% have been unwell

Many different reasons emerging adults are unwell, emphasizing the transitional and uncertain nature of this time of life

**Work or school stress, loneliness, and
anxiety and depression** are leading reasons

Similarities across countries, ages, and
parental origin, with select stand-outs (e.g.
for women, stress regarding work/school)

Sense of belonging is a key source of support for emerging adults' mental health

Women typically have **more
sources of support** than men, and
non-binary find **more support** with
others in a similar situation

Negative stigma and worrying what others think limits emerging adults from seeking help

Of those who have been unwell,
~58% did not seek help due to
worrying what others think

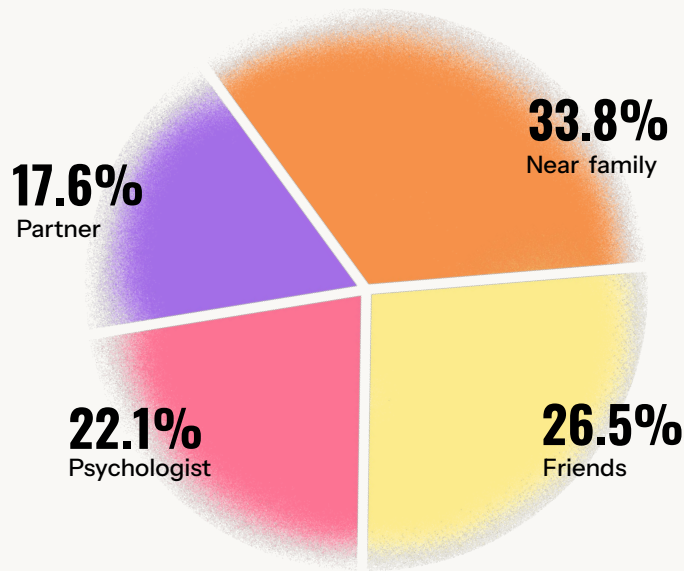
Of those, **~70% report negative
stigma** around seeking mental
health help

~85% of those who dared to seek help for their mental health have encountered problems

**Long waiting times, affordability
barriers, and poor quality of help**
frequently limit emerging adults
from getting the help they need

“Our main task as a society is to create contexts where emerging adults feel like they belong. We don’t feel resilient if we don’t feel like we belong anywhere.”

Charlotte Lundgren
Special Advisor in Politics and Communication,
Norwegian Council of Mental Health

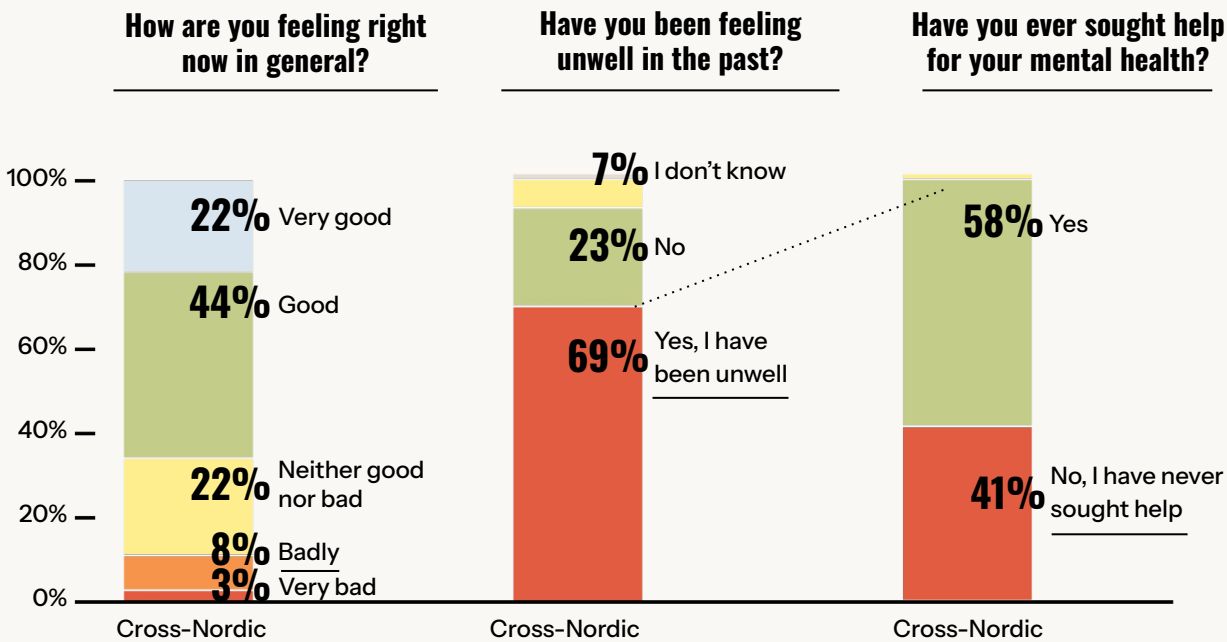


Source:
Next in Mind/Perspetivo survey (Total N=1044)

**SENSE OF
BELONGING IS
A KEY ASPECT
OF SUPPORT**



Mental health struggles are a common experience for the majority of emerging adults in the Nordics today



Commentary

69% have been unwell, with consistently similar splits across countries, birthplaces, ethnicities, etc

Of these, **only 41% have ever sought help for their mental health**

At-risk groups with high rates of being unwell:

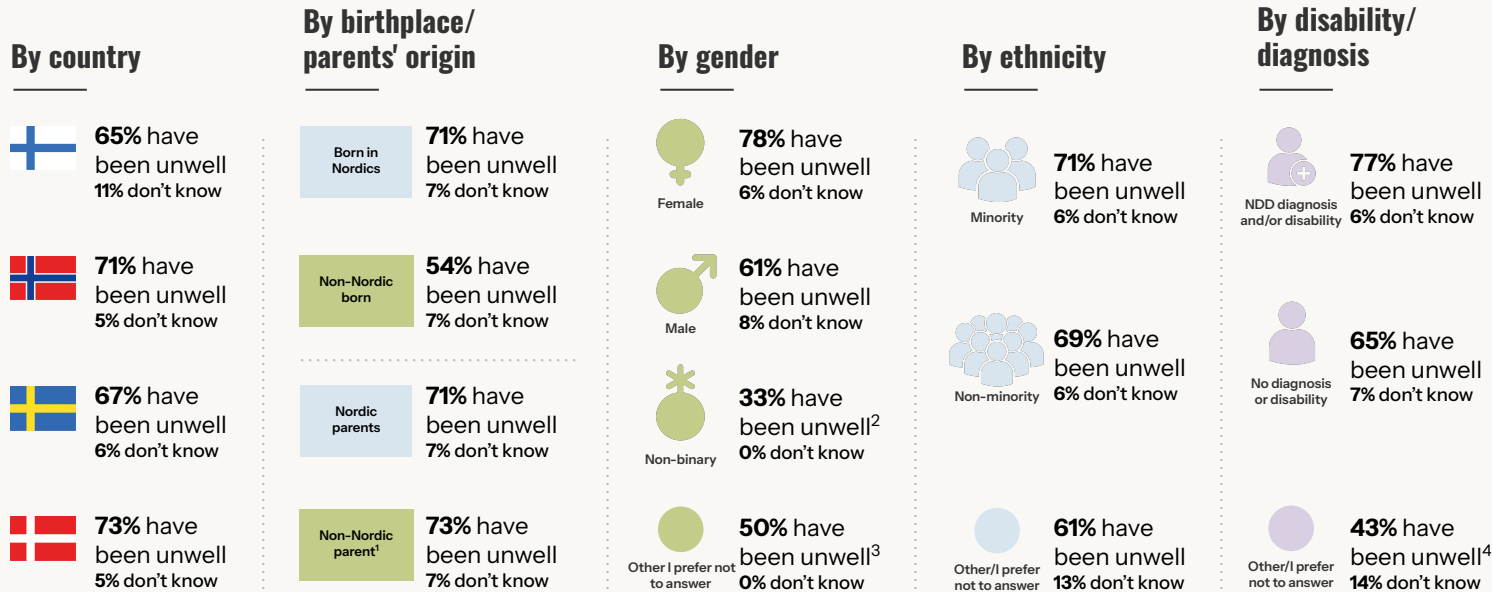
- **78%** of females
- **77%** of people diagnosed with a disability or neurodivergent
- **71%** of minorities
- **73%** with one or both non-Nordic parents

Source:
Next in Mind/Perspetivo survey (Total N=1044)



Key data: Mental health struggles are a common experience for most emerging adults in the Nordics

Have you been feeling unwell in the past?



Commentary

Groups at risk:

78% of females have been unwell

77% of people diagnosed with a disability or neurodivergent have been unwell

71% of minorities have been unwell

73% with one or both non-Nordic parents have been unwell

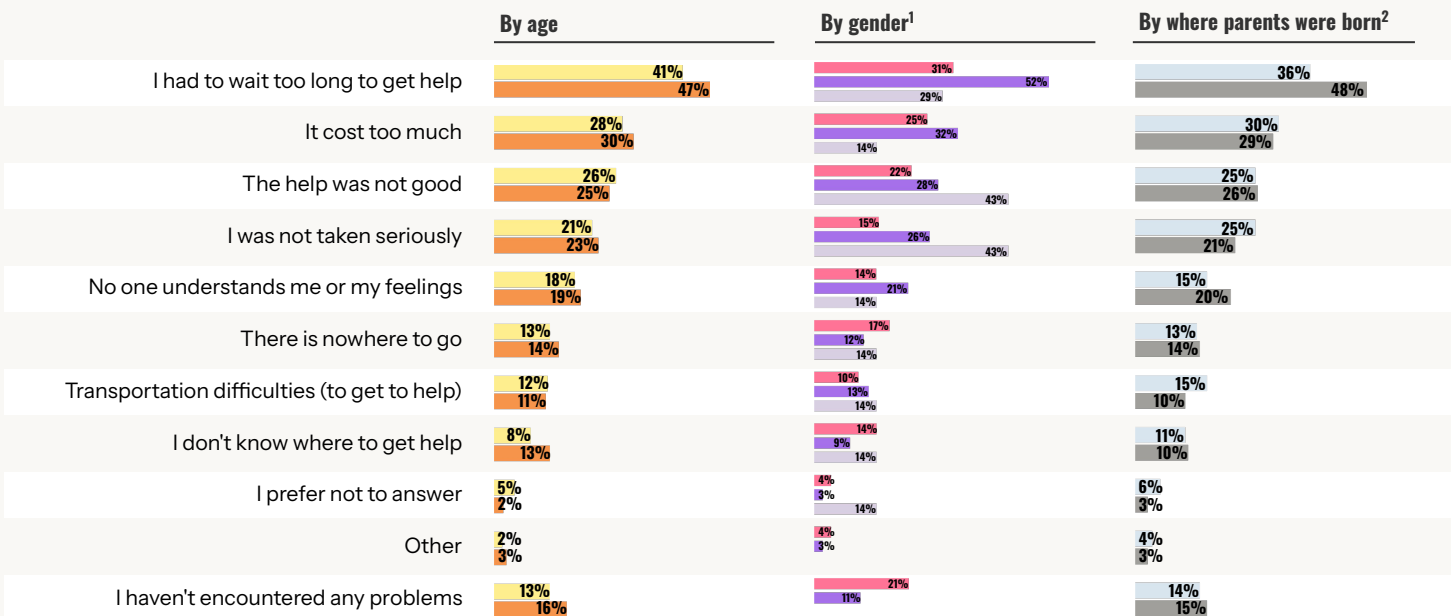
Note: 1/ Respondents with one or both parents born outside of the Nordics; 2/ Low N, N=12; 3) Low N, N=6; 4) Low N, N=7

Source: Next in Mind/Perspetivo survey (Total N= 1044)



Key data: ~85% have encountered problems when seeking help for their mental health

Have you ever run into problems trying to get help?



Commentary

Waiting times, affordability, and poor quality of help are frequently limiting emerging adults from getting the help they need

Non-binary highlight lack of quality support

Ages 18-24
Ages 25-29

Men
Women
Non-binary¹

Outside of Nordics
In Nordics

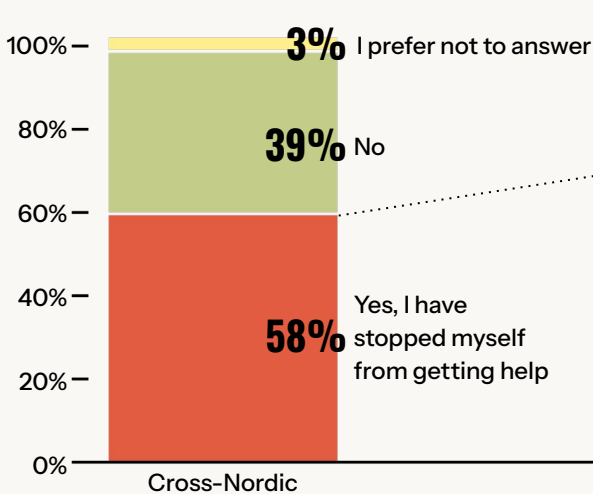
Note: 1/ Respondents with one or both parents born outside of the Nordics; 2/ Low N, N=12; 3) Low N, N=6; 4) Low N, N=7

Source: Next in Mind/Perspetivo survey (Total N=1044)

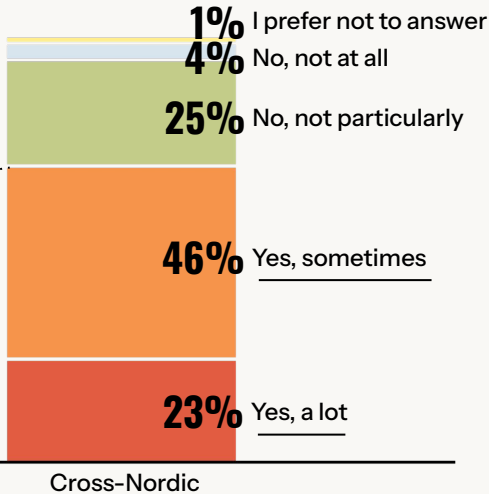


Key data: Stigma and worrying about what others think are severely limiting emerging adults from seeking help

Of those who have been unwell:
Have you ever stopped yourself from asking for help for your mental health out of worry about what people would think?



Do you feel there is stigma/a negative view around getting mental health help where you live?



Commentary

Of those who have been unwell, **58% have not gotten help due to worrying about what other people would think**

Of those who have stopped from getting help, **~69% feel a negative view or stigma** around getting help for mental health

Especially **minorities** or those with **non-Nordic parent(s)** find a lot of **negative views or stigma** around getting help for mental health

Similarities across countries, ages, genders

Key data: Key drivers for being unwell

What were the main reasons you were unwell in the past? (max. 3 selections)

	Norway 	Sweden 	Finland 	Denmark 
Stress related to studies or work	39%	46%	45%	48%
I felt alone	49%	34%	42%	38%
Anxiety or depression	33%	40%	37%	38%
Relationship difficulties	48%	32%	42%	29%
Uncertainty about future or career	29%	28%	32%	28%
Financial concerns	22%	12%	25%	17%
Diagnosed mental health conditions	13%	11%	16%	19%
Poor social setting	14%	9%	19%	14%
Anxiety about ideals of beauty or appearance	17%	10%	11%	14%
Phys. health problems affecting mental health	11%	9%	14%	12%
Influences of social media	11%	5%	7%	12%
Other (less than 3% per reason)	50%	31%	35%	41%

Key data: A diverse target group

Differences between Nordic-born and non-Nordic-born

Non-Nordic-born emerging adults experience higher levels of stress related to unemployment and discrimination, and are more likely to experience loneliness due to difficulties with establishing social belonging. In contrast, Nordic-born individuals are more likely to experience anxiety and depression, often linked to personal and relational events such as trauma, violence, or the loss of a loved one. Cultural differences also affect coping strategies: non-Nordic-born individuals often seek support from friends and social media, while Nordic-born individuals are more likely to turn to professional help, such as psychologists.

Differences between Nordic countries

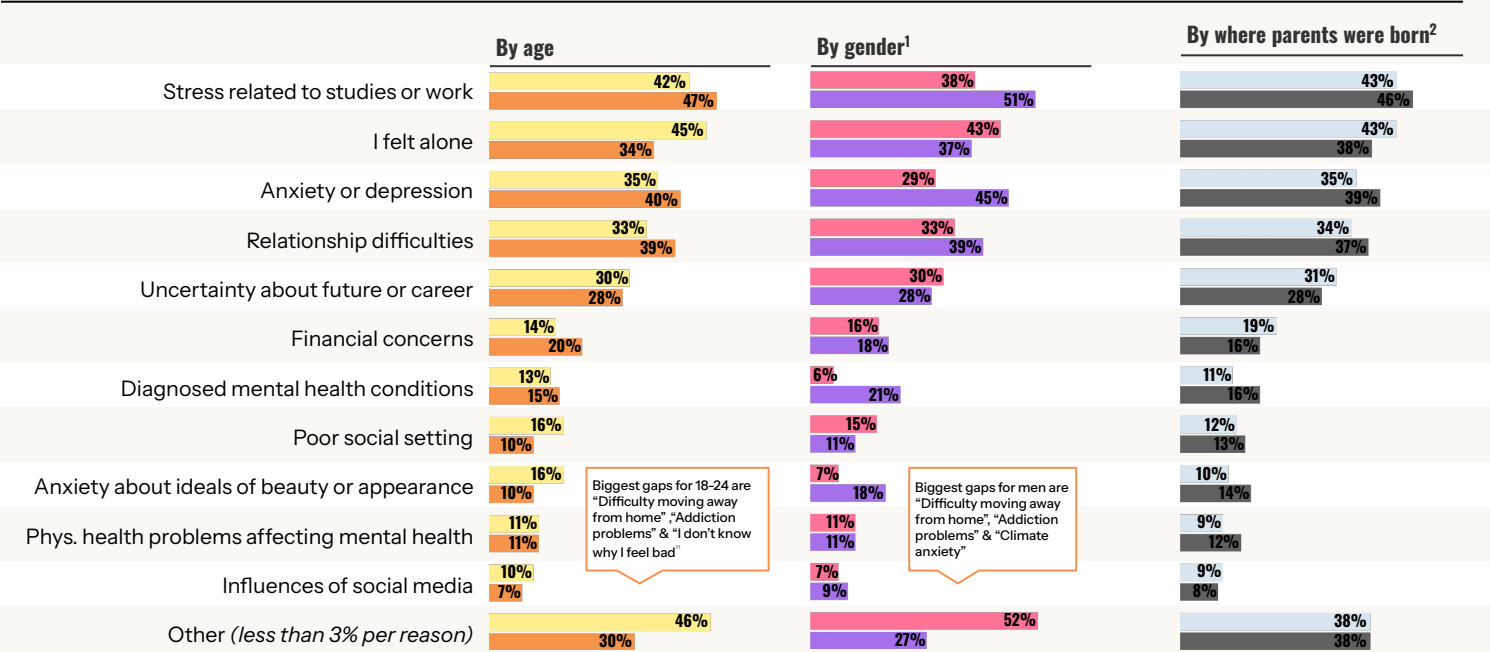
In Sweden, stress related to work and education is the main challenge, while in Denmark, uncertainty about the future and career choices, as well as the impact of social media, are key factors affecting mental health. In Norway, relational stress, such as conflicts with family and friends, is a significant cause of poor wellbeing. In Finland, grief and traumatic experiences are particularly prominent, alongside a strong need for support within the educational system.





Broad variety across drivers of being unwell, emphasizing the transitional & uncertain nature of emerging adulthood

What were the main reasons you were unwell in the past? (max. 3 selections)



Commentary

Emerging adults experience similar reasons for feeling unwell

Similarities across ages, genders, and parental origin

Stress related to work or school, loneliness and relationships, and uncertainty about future or finances are key reasons

- Ages 18-24
- Ages 25-29
- Men
- Women
- Outside of Nordics
- In Nordics

Note: 1/ Other/non-binary with insufficient N to include; 2/ Respondents with one or both parents born outside of the Nordics

Source: Next in Mind/Perspetivo survey (Total N=1044)

THE CURRENT MENTAL HEALTH SYSTEM

The current ecosystem around the mental wellbeing of emerging adults in the Nordics

Building upon an understanding of the current mental health status of emerging adults in the Nordics, **this section shifts focus to the broader ecosystem influencing their wellbeing.**

To gain a comprehensive view of the current landscape, we conducted in-depth interviews with over 50 stakeholders representing diverse parts of the ecosystem involved in emerging adults' mental health across the four Nordic countries. We then transferred those learnings into a visual model mapping out this **intricate, complex, and multifaceted ecosystem.** The one impacting emerging adults' mental health.

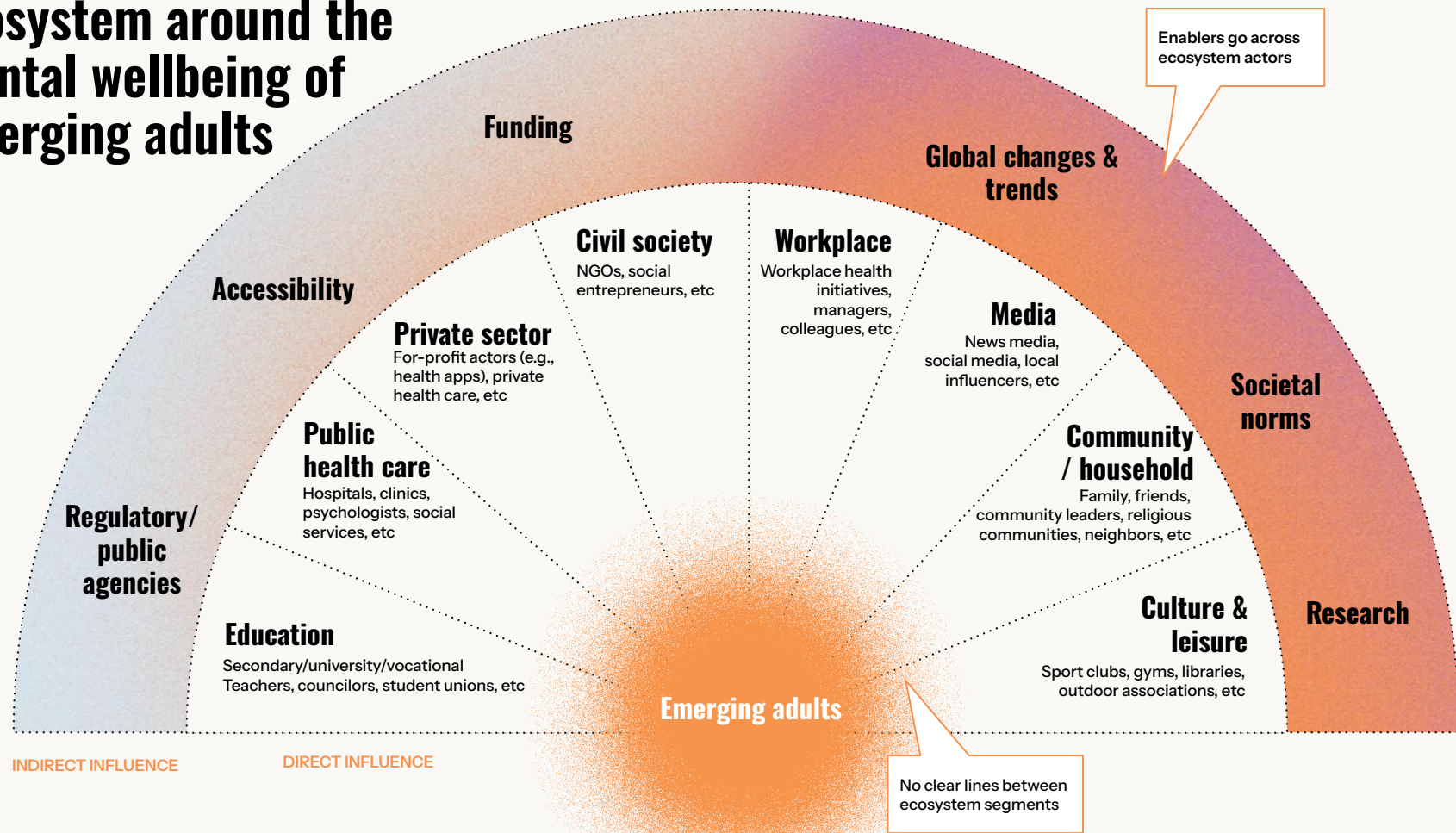
This model places **emerging adults at the center**, and maps out the variety of actors and factors impacting their lives throughout their journey. It also highlights potential avenues for improving emerging adult mental health and overall wellbeing.

Our ecosystem map contains **two interconnected levels:** the **Direct Ecosystem**, encompassing the immediate and tangible factors that directly influence mental health, such as health care, education, and the workplace. The **Indirect Ecosystem** represents broader, systemic influences including policy, funding, societal norms, and accessibility.

Stakeholder interviews highlighted significant gaps and fragmentation within this ecosystem. Challenges identified include disjointed support services, a predominantly reactive approach to mental health care, a lack of tailored interventions, and difficulty integrating mental wellbeing into the workplace. The broader system faces limitations of policy attention, institutional coherence, funding allocation, and addressing societal inequalities and accessibility.

By offering a visual model and a nuanced view of both direct and indirect influences, **this section aims to deepen our understanding of the systemic realities shaping the mental wellbeing of emerging adults today**, paving the way for more targeted and collaborative intervention.

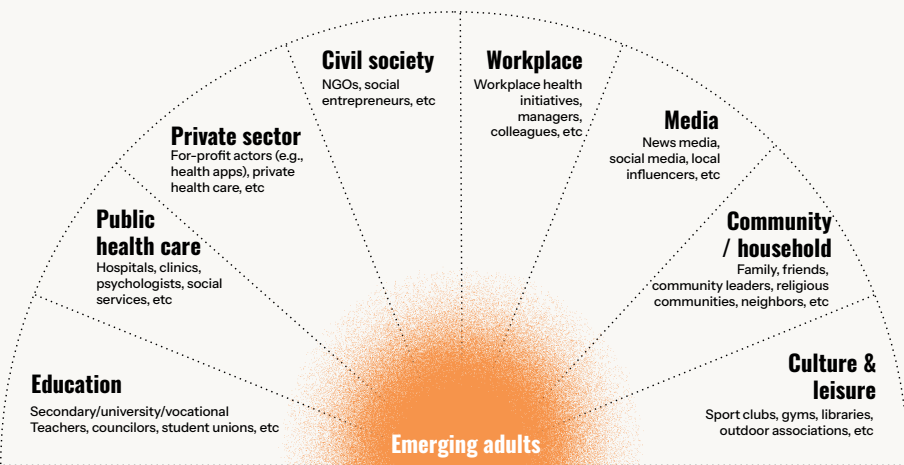
Ecosystem around the mental wellbeing of emerging adults



DIRECT INFLUENCE

Deep dive: Direct ecosystem

The direct ecosystem around emerging adults



“It is important that we build a support system based on biological, psychological, and social realities, recognizing the diversity and developmental stage of the emerging adult population.”

Anna Lundh
Psychiatrist

What we learned: Key gaps

Fragmented support & transparency

Key ecosystem actors operate in silos (e.g., health care, education, workplaces), limiting a complete understanding of mental wellbeing. Virtual communities are replacing traditional support systems (e.g., families/communities).

Reactive health care & passive institutions

Health care mainly treats symptoms, while other key actors (e.g., schools, workplaces) lack proactive mental health strategies. Solutions face low adoption due to trust, awareness, and stigma barriers.

One-size-fits-all approach

Support does not meet the diverse needs of emerging adults. We need more personalized, low-threshold solutions in accessible spaces (e.g., schools, workplaces, social media).

Workplace and community integration

Entering and thriving in the workplace is seen as a challenge for emerging adults. Supportive work environments and encouraging participation in cultural and social activities fosters belonging and mental wellbeing.

Unrecognized target group

Emerging adults are not seen as a distinct group, resulting in gaps in tailored support systems and limited access to services.

Normalize talking about mental health

Early conversations in everyday contexts (work, school, families) reduces stigma. Emerging adults from non-Nordic backgrounds can face further obstacles due to racism and discrimination.

Role of education

Schools are critical in shaping mental health awareness but require better integration of mental health professionals and resources.

Improving emerging adults' sense of belonging is a key preventive measure

Transition gaps fail emerging adults

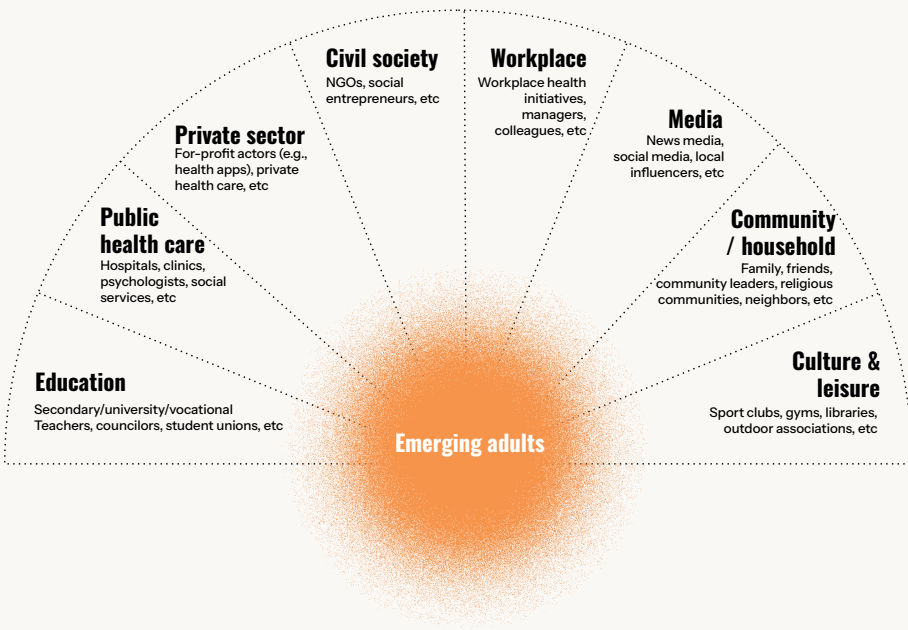
Emerging adults often face difficulties transitioning from child to adult psychiatry, leading to gaps in care. Adult psychiatry environments often feel unsuitable or intimidating to emerging adults, often leading to disengagement.

Biological maturity overlooked

The assumption of full maturity at 18 ignores the developmental trajectory, which continues into the late 20s. Support needs to be aligned with developmental psychology of emerging adulthood, recognizing their evolving maturity and societal roles.

Deep dive: Direct ecosystem

The direct ecosystem around emerging adults



Conclusions

Trust in public health systems is declining among young adults, who often place more trust in influencers and informal networks.

Emerging adults are highly influenced by their workplace, university, and the media.

There is a lack of holistic approaches to mental health, such as understanding the interplay between financial health and mental wellbeing.

There is a **lack of collaboration between researchers and funders** to ensure effective, data-driven interventions.

Potential steps to **foster stronger collaboration** between these actors include conducting feasibility studies tied to funding initiatives, and promoting ongoing awareness around available mental health services.

Social inclusion

Design systems and invest in solutions where young adults feel valued and are able to contribute meaningfully to their communities.

Direct ecosystem

Further conclusions

Lack of structured competence

The health apparatus lacks structured knowledge and competence in addressing emerging adults' mental health through innovative or non-traditional methods.

Build autonomy and resilience in emerging adults

Place more focus on empowering individuals to face and navigate risks rather than avoiding them, creating robust mechanisms to foster resilience.

Educate and train on cultural sensitivity

Mandate cultural sensitivity and anti-racism training for teachers, employers, and health care professionals.

Insufficient focus on emerging adults with intellectual disabilities or weak academic backgrounds.

Lack of targeted programs/interventions for this specific developmental stage.

One way of addressing this is to create emerging adult clinics.

Foreign-born individuals underrepresented in mental health services

Emerging adults often face gaps in care, with foreign-born individuals and their families being underrepresented in mental health services, despite significant needs. Foreign-born individuals often lack trust in the system, causing them to delay in seeking help.

Digital mental health tools are underutilized among foreign-born populations

This is possibly due to lower health literacy and systemic barriers. Digital solutions have not yet addressed the specific needs of diverse populations. We need to leverage digital tools thoughtfully, developing inclusive digital solutions that cater to varying health literacy levels, incorporating multilingual support.

Health services are not adequately located in areas where at-risk populations live

There is a need to establish local mental health facilities in underserved areas. This simplifies processes to access care, ensuring lower thresholds for early interventions.

Deep dive: Education



What we learned: Key insights from interviews

General sector input

- High academic pressure and stress is impacting mental health among students across the Nordics
- Foreign students especially face challenges with e.g., integration, leading to feelings of isolation and difficulty accessing support
- Increased digital school environment and individual courses feed feelings of isolation
- Decrease in vocational education/training

What do emerging adults feel works well today?

- Peer communities and support at educational institutions provide a sense of community and improve overall student mental wellbeing
- Early stress-reduction programs can help students manage mental health challenges early on, before they experience high levels of stress
- Select programs (e.g., Navigator Program in Finland) help students build life skills and provide them with a sense of belonging

Key gaps encountered in interviews

- Non-Nordic and marginalized students often have difficulty integrating into student communities and struggle to access mental health services
- Early mental health interventions are inconsistent, especially for students from low socioeconomic or non-Nordic backgrounds
- Mental health awareness and educating students on how to best manage their wellbeing falls short
- Those diagnosed as neurodivergent lack support to thrive in their studies and at university environments

Examples of differences between countries

- The Navigator Program at Hanken University in Finland teaches self-leadership and life skills, helping students manage academic pressure
- Select schools in Denmark (e.g., Aalborg) have integrated early intervention programs for e.g., stress reduction
- Gaps in mental health support for university students in Norway have led to an increased reliance on private support options

Quotes

“Students who feel a strong sense of community and belonging with their peers tend to have better mental health overall and perform well academically. A sense of belonging is so important.”

Christina Dahlblom

Professor of Practice at
Hanken University

“Many young people, especially from disadvantaged backgrounds, are struggling to keep up academically and with societal changes, and are not receiving the support they need.”

Sami Pirkola

Researcher at Tampere University

Deep dive: Public health care



What we learned: Key insights from interviews

General sector input

- General public health care available in Nordic countries, which offers help to retroactively treat symptoms
- Emerging adults experience long waiting times, leading to an increase reliance on private services or digital solutions. Many cannot afford this – integration with public health care systems is still limited
- health care access is fragmented, with varying levels between regions, particularly in rural areas

What do emerging adults feel works well today?

- Public health care generally provides some low-cost or free mental health services, making some form of care accessible to a broader population
- There are some free or low-cost mental health alternatives (e.g., Norway's Quick Mental Health Help, which offers initial mental health support, although often limited in duration)
- Slowly growing collaboration between public health care and digital services, offering emerging adults more options for accessing care

Key gaps encountered in interviews

- General lack of preventive efforts and holistic perspective of an individual's overall mental health
- Poor integration between child and adult psychiatric services creates discontinuity in care
- Lack of accountability and overburdened systems
- Long waiting times and bureaucratic hurdles delay access to mental health care
- Non-Nordic and disadvantaged communities often face barriers, such as language issues and stigma
- Trust (general skepticism toward “the system”)

Examples of differences between countries

- The Therapy Guarantee Initiative in Finland aims to provide faster access, but services are still inconsistent across regions
- The Quick Mental Health Help initiative in Norway provides timely initial sessions but are limited in number, with increased reliance on private care for long-term support
- Generally, and especially in Sweden, emerging adults are shifting toward private health care for faster access to mental health services

Quotes

“The public health care system is challenged. Mental health help exists, but it needs to be more easily attainable, accessible, and affordable, e.g., more scalable digital solutions to reach more emerging adults.”

Charlotte Lundgren
Special Advisor at the NCMH¹

“Public health care leaves many gaps, currently filled by NGOs and private actors. We need more low-threshold support options for emerging adults that the public system struggles to deliver currently.”

Aija Salo
Secretary General at Mental Health Partnership Finland

Deep dive: Public health care



Key gaps mentioned in interviews

Leadership and accountability: Lack of leadership accountability means a lack in providing evidence-based treatments and outcome tracking.

Transition challenges: Poor integration between child and adult psychiatric services creates discontinuity in care.

Uneven access: Geographic and socioeconomic disparities restrict access to adequate care, with those in lower socioeconomic groups facing greater difficulties.

Overburdened psychiatry: Psychiatry often handles cases that could have been mitigated with earlier intervention in primary care.

General **lack of preventive efforts**, with treatment mainly aimed toward treating symptoms rather than causes

Long waiting lines and bureaucratic hurdles delay access to mental health care for those in need

Non-Nordic and disadvantaged communities often face barriers, such as language issues and stigma, further limiting them from seeking and accessing support

Lack of trust, with a general skepticism toward “the system”

Critical actions mentioned to bridge gaps

Restructure incentives in primary care: Reform payment models to make early interventions and therapeutic approaches financially viable for primary care providers.

Develop specialized emerging Adult clinics: Establish clinics tailored for emerging adults, with a focus on their unique needs and early intervention.

Enhance socioeconomic access: Address inequities by expanding access in underserved regions and providing additional support to those in lower socioeconomic groups.

Further actions mentioned in interviews, in addition to the key insights for action mentioned in this report

“Inclusivity and trust are the foundations of a sustainable mental health ecosystem. Without them, we fail the most vulnerable.”

Anna Clara Hollander
Karolinska Institutet

Deep dive: Private health care



What we learned: Key insights from interviews

General sector input

- Private sector health care solutions are becoming increasingly important for providing mental health services e.g., digital therapy platforms
- Private solutions typically fill gaps where public health care falls short e.g., long waiting times or gaps in public care offering
- Private solutions are often expensive, reducing the accessibility of care to the broader public

What do emerging adults feel works well today?

Private actors and companies are filling gaps in mental health support left by public health care, especially by offering digital tools and services that offer low-threshold access to therapy. These are, however, still at price points that far from everyone can afford

Key gaps encountered in interviews

- Low trust in actors that primarily aim to make a profit rather than supply the best care
- A significant gap in patient capital funding of low-tech solutions
- Many struggle to find mental health services that are affordable and accessible to them
- Lack of mental health services tailored specifically for disadvantaged or marginalized groups (e.g., foreign-born individuals and/or those from lower socioeconomic backgrounds)

Examples of differences between countries

- In Finland, private sector investments in mental health are growing, but there is still a lack of venture funding for mental health startups
- In Denmark, the private sector is being called on to collaborate more actively, as NGOs and foundations currently play a critical role in supporting mental health
- In Norway, there is a strong cultural resistance toward private solutions due to profit incentives, with a strong preference toward public solutions

Quotes

“There is limited risk capital for those who want to e.g., grow more regionally in Sweden. There needs to be more patient capital, not just short-term, high-return investments.”

Ruth Brännvall

Co-founder, Impact Invest

“More funders and private sector collaborations are needed to support mental health solutions. Mental health is still largely viewed as the public sector’s responsibility.”

Katariina Helaniemi

Head of Impact, Illusian

Deep dive: Civil society



What we learned: Key insights from interviews

General sector input

- Civil society organizations are crucial in filling gaps left by public services, especially when it comes to reaching marginalized groups
- Civil society is often left to fill gaps left by public health care, where financial returns are not attracting private actors
- NGOs or social entrepreneurs are often the first point of contact for mental health support among emerging adults, especially in underserved areas

What do emerging adults feel works well today?

- High trust in civil society initiatives
- Many civil society initiatives provide low-threshold, accessible mental health support that caters to the specific needs of emerging adults
- Grassroots and local organizations offer physical presence and support (especially in rural areas)
- Partnerships between civil society and educational institutions have positive outcomes, particularly in early intervention and preventive care

Key gaps encountered in interviews

- Civil society organizations face challenges with funding, limiting the ability to scale and sustain mental health services
- A lack of coordinated effort across civil society and public services leads to fragmented mental health care (e.g., limited support in rural areas)
- A shortcoming in the offering of diverse and culturally appropriate mental health services for minorities (where stigma and access may limit seeking help)

Examples of differences between countries

- In Finland, civil society organizations have seen a critical reduction in state funding due to a new government. NGOs are forced to find alternate sources of funding, making it difficult to maintain previous levels of quality support
- There is a broad variety in terms of where mental health support is sourced in civil society across countries and regions, depending on local needs, resources, and priorities

Quotes

“Civil society organizations are crucial for young people who can't access public services. We need more preventive care and early intervention. That's where help is impactful.”

Rickard Bracken
Secretary General at Mind

“Emerging adults rely on the mental health support of NGOs that the public health care system doesn't cover, particularly low-threshold and accessible support. This is a vital part of Finland's mental health ecosystem.”

Aija Salo
Secretary General at Mental Health Partnership Finland

Deep dive: Workplace



What we learned: Key insights from interviews

General sector input

- Mental health awareness is growing, but actual implementation of proactive mental health programs remains uneven, particularly in sectors with high workloads
- Progress varies widely between countries and company sizes (larger companies tend to provide some form of mental health support, while SMEs often lack the necessary resources to provide support)

What do emerging adults feel works well today?

Select few examples of larger corporations that have started to take mental health more seriously, spreading awareness and offering employees more support. However, these are general mental health topics, and we have not encountered any dedicated efforts toward emerging adults in our interviews and research

Key gaps encountered in interviews

- Lack of awareness of mental health and emerging adults, in particular among employers
- SMEs often lack any formal mental health support
- Unclearity of roles and responsibilities within the ecosystem (e.g., companies rely on health care systems to address mental health topics)
- Lack of training and awareness for mental health, especially for management and manager roles
- Priorities (profit over employee wellbeing)
- Often reactive rather than proactive efforts

Examples of differences between countries

- In Denmark, flexible work is common, but mental health stigma persists and is especially prevalent in SMEs and certain sectors
- Broad variety of mental health awareness and formal support from workplaces across countries and sectors, depending on resources, priorities, cultures and norms

Quotes

“It should be mandatory for workplaces to include mental health awareness and support in their onboarding. And ensure employees understand where they can access support for their mental health, especially younger employees.”

Jimmy Westerheim

Founder of The Human Aspect

“There is a financial upside to investing in mental health, e.g., reduced sick leave, retention, and productivity. I don’t know why companies are hesitant to invest.”

Anonymous

Head of HR of retailer with Nordic presence

Deep dive: Workplace

~45% of emerging adults feel stressed with work or school (of those who have been unwell)

SWEDEN EXAMPLE



of EAs employed
(% of total EA population)

Mental health capabilities

Conclusion

Quotes

Public sector

~200k
~15%



Typically lacks any mental health support for young adult employees (e.g., onboarding)

Targeted efforts needed, with a focus on emerging adults

“Some big companies have started to act on general mental health initiatives, but progress is limited and there’s no collaboration on these topics. It’s difficult for small companies and the public sector, where they need clear guidance to create better support for emerging adults.”

Emma Claesson
Former HR Director at Axel Johnson Group

Private sector (large corps.)

~300k
~20%

Large variety in progress



In general, select efforts support employee mental health (e.g., workshops)

Continued efforts needed, with a focus on emerging adults

“I believe there needs to be a law to specify minimum requirements for what companies need to know, such as early signs of struggle and knowledge of where to seek help.”

Anonymous
Head of HR of retailer with Nordic presence

Private sector (SMEs)

~350k
~25%



Typically lacks any mental health support for young adult employees (e.g., onboarding)

Limited resources to provide support, more efforts needed, with a focus on emerging adults

Note: SMEs = less than 250 employees; Large corporations = 250 or more employees

Source: Emerging adult and ecosystem interviews (across countries & sectors); SCB; European Commission

Deep dive: Workplace

Private sector (large corporations)

The E.U. Corporate Sustainability Reporting Directive has started including requirements for reporting on mental health issues (e.g., work-related stress) and the extent support is embedded within health and safety management systems

Axfood

Launched a service allowing employees to anonymously speak with professionals such as social workers, psychologists, lawyers, and financial advisors. This service is also available to managers, who can use it to receive guidance and support in their leadership roles.

Dedicated September 2024 a health month, focusing on the wellbeing of employees and customers, including a seminar on mental health

V O L V O

Volvo Group's Health & Safety Policy incorporates mental health, also offering stress surveys and multiple day onboarding

Offer a range of support measures to identify warning signs and prevent factors leading to excessive stress (e.g., apps, training videos, face-to-face sessions with psychologists and occupational therapists)

H&M Group

Annual Report 2023: "We are exploring innovative initiatives to create awareness and promote physical and mental health in our workplaces, with a focus on store and warehouse employees. In 2024, we will also relaunch H&M Group's Global Health & Safety Week to address these topics. Through training and different activities, we aim to empower all employees to take care of themselves and their colleagues while at work."



Health & Resilience programs: Large-scale stress and mindfulness trainings, and leadership development for 21,000 managers.

Are You OK? campaign: Promotes open mental health dialogue, reducing stigma as a part of continued investment in mental and physical safety in the workplace.

Examples of major private companies addressing general employee mental health, still without any focus on emerging adults

To drive meaningful systems change, a broader commitment across companies is needed, with initiatives that prioritize proactive mental health support for emerging adults

Deep dive: Workplace

Private sector (large corporations)

Mental health initiatives



“... we address wellbeing proactively and the share of employees reporting stress symptoms is continuously reduced. EVP area target: 10% annual improvement of employees reporting stress symptoms.”

“All employees are encouraged to pay attention to their mental health. Goal: all employees can access knowledge and tools to act on their mental wellbeing.”

“Global leadership guidelines have been developed to promote mental wellbeing and support managers in taking responsibility for creating healthy workplaces. We train and educate our human resources experts and managers to have open dialogues with teams, so that issues in the psychosocial working environment and mental health are identified and addressed.”



“... we carried out training on stress and burnout in management teams and drew up a guide to avoid burnout. We also marked World Mental Health Day.”

“This year’s (2021) Christmas gift from DNB therefore goes to Mental Helse Ung. The gift of NOK 1 million goes to their important work on increased transparency about mental health, the prevention of mental disorders and a better mental health service.”

Mental health support options (e.g., therapy) included in employee benefits



“Our colleagues are a powerful source of support and it’s therefore important that everyone is equipped to recognize when someone may be struggling. To that end, we provide training and resources to help our employees identify the signs of mental health challenges in themselves and their colleagues, empowering our teams to be proactive in offering support when it’s needed most.”

“We actively promote open dialogues about mental health within teams, and our ShareToCare Employee Resource Group brings people together to have open conversations about mental health by sharing personal experiences and making early emotional support more accessible.”

Confidential mental health resources provide counseling and guidance, ensuring employees are supported when navigating difficult times

Examples of major private companies addressing general employee mental health, still without any focus on emerging adults

To drive meaningful systems change, a broader commitment across companies is needed, with initiatives that prioritize proactive mental health support for emerging adults

Deep dive: Media

What we learned: Key insights from interviews

General sector input

- Media has a major influence on the mental health of emerging adults, with the majority online and participating in e.g., social media
- Can play a positive (e.g., raising awareness) and negative role (e.g., contributing to anxiety and self-esteem issues)
- Influencers and news media are responsible for shaping emerging adults' opinions and discussions

What do emerging adults feel works well today?

- Normalizing mental health by spreading awareness and reducing stigma
- Leveraging online communities to create positive conversations and communities, where emerging adults can connect and talk about common mental health issues or stressors
- Using media as a platform to connect in real life

Key gaps encountered in interviews

- False sense of community, as it is not fulfilling to participate but isolating to not participate at all
- News media profiting from sensationalism or clickbait headlines, impacting public perception
- Discrimination and racism on social media
- Influencers content creators profiting from mental health instead of e.g., spreading awareness

Examples of differences between countries

Difficult to regulate media for 18+, with no examples.

Other examples related to minors:

Non-Nordic countries considering regulating the usage of social media for minors:

E.g., U.K. discussing limiting or prohibiting usage of social media for those under the age of 16

E.g., U.S.A. discussing age limit of 13 and parental consent up to 18 years, having already passed two bills protecting children on social media



Quotes

“Social media influencers have a huge responsibility, as they have access and influence on young people. We have seen positive and negative examples of how they can use this influence.”

Aija Salo

Secretary General at Mental Health Partnership Finland

“Racism is everywhere on social media, especially targeting minorities and immigrants. It drives mental health struggles and contributes to an overall lack of trust in society.”

Tariq Omar

Project manager at SAMHA Ry¹

Note: 1/ Substance Abuse and Mental Health Association Finland; Source: Ecosystem interviews (across countries & sectors); a) Ryan, Tracii et al. “How Social Are Social Media? A Review of Online Social Behaviour and Connectedness.” Journal of Relationships Research 8 (2017); b) de Hoog, N., & Verboon, P. “Is the news making us unhappy? The influence of daily news exposure on emotional states.” British Journal of Psychology (2020); c) McCready, A. M., Rowan-Kenyon, H. T., Barone, N. I., & Martínez Alemán, A. M. “Students of Color, Mental Health, and Racialized Aggressions on Social Media.” Journal of Student Affairs Research and Practice (2021)

Deep dive: Community/household



What we learned: Key insights from interviews

General sector input

- Family and community play a central role in shaping the mental health of emerging adults
- Many depend on family for support, but mental health support varies greatly across e.g., socioeconomic factors and parents' attitude
- Communities can create a sense of belonging for emerging adults, especially for minorities

What do emerging adults feel works well today?

Social inclusion, creating supportive spaces for emerging adults to engage in community activities, such as volunteering or participating in peer support groups

E.g., Culture Vitamins in Aalborg, Denmark, successfully promoting mental wellbeing by encouraging culture community engagement for those suffering from e.g., stress or anxiety

Key gaps encountered in interviews

- Mental health stigma is mentioned as a key factor that limits emerging adults from seeking help
- Socioeconomic barriers, limiting access to cultural or community activities (e.g., affordability)
- Limited awareness of community activities
- Large variety in living family situations and community possibilities (e.g., some emerging adults bear the responsibility of family/income)

Examples of differences between countries

Large regional discrepancies in terms of mental health support, based on resources and priorities (regions, municipalities, and communities, rural vs. urban, religions, etc)

Quotes

“In our focus group, we provide many emerging adults the help, nurturance, and guidance that they need but haven’t received from their own family or community.”

Tariq Omar

Project manager at SAMHA Ry¹

“Social inclusion and community play a huge role in mental wellbeing. If you don’t feel you belong anywhere, there’s a high risk you will struggle and be less resilient in your mental health.”

Charlotte Lundgren

Special Advisor at the NCMH²

Note: 1/ Substance Abuse and Mental Health Association Finland, 2/ Norwegian Council for Mental Health

Source: Emerging adult and ecosystem interviews (across countries & sectors)

Deep dive: Culture & leisure



What we learned: Key insights from interviews

General sector input

- Participation in sports or leisure groups, particularly physical activity, has a positive impact on the mental health of emerging adults
- Leisure activities can provide both structure and a sense of community for emerging adults
- Often provide physical interactions and connections, in contrast to the many digital aspects of emerging adults' lives today

What do emerging adults feel works well today?

- Community-based programs involving sports or cultural activities have been shown to promote mental wellbeing, providing emerging adults with spaces to connect and express themselves
- Leisure activities give emerging adults good opportunities to connect with peers with similar interests, driving a strong sense of belonging

Key gaps encountered in interviews

- Accessibility to leisure activities, e.g., harder for emerging adults in rural areas to find and engage in structured leisure activities, driving isolation
- Affordability of leisure activities, particularly in areas where public support is limited, can severely limit access to activities for emerging adults from lower socioeconomic backgrounds

Examples of differences between countries

Large geographic discrepancies in terms of offering organized leisure activities across countries and regions

Quotes

“We work a lot with community/ household and culture/leisure. We see this as an antidote for mental health. Young people need to be more active and find activities that give them a sense of belonging, and we need to activate them more.”

Bettina Bisp Jensen

Director at Center for Mental Sundhed

“Politicians and the health sector should recognize and encourage more leisure and culture activities as a form of remedy for mental health struggles.”

Bettina Bisp Jensen

Director at Center for Mental Sundhed

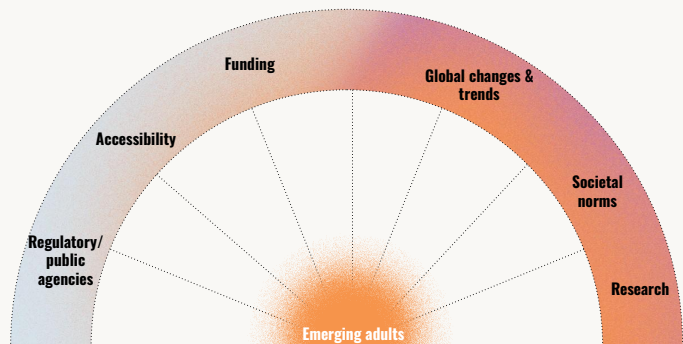
Overview: Direct ecosystem

	Education	Public health care	Private sector	Civil society	Workplace	Media	Community/ household	Culture & leisure
Role	Large share of emerging adults attend educational institutions , which can provide crucial social community	Publicly funded general health care available in Nordic countries (retroactive help)	Paid services that complement public health care when and where it falls short	Fill gaps from public health care for underserved/ marginalized groups (often free) + advocacy	Large share of emerging adults are a part of the workforce , constituting a potential important community	Social media platforms are key engagement spaces for emerging adults	Everyday support (emotional and practical) through family, friends, and communities	Structured social engagement and/or physical activity can be an important social community
Typical actors	Schools, universities, vocational schools, student unions, training institutes	Primary care (hospitals and local doctors' offices), regional health care	Private clinics (doctor/therapist), digital mental health platforms	NGOs, grassroots organizations, local social entrepreneurs	SMEs, large corporations (HR departments), employee insurance benefits	Social media platforms, influencers, news media (public and private actors)	Family, friends, local community (e.g., religious or neighborhoods)	Sports and outdoor clubs, culture programs, youth leisure programs
Examples of existing support options	Student counseling, peer activities that develop a sense of community and belonging, courses to prepare students for work life	Free/low-cost services (e.g., general practitioner or counselor)	Therapy at a clinic or on a digital mental health platform, general digital health tools	Low-threshold mental health services , school partnerships, free/ low-cost support and counseling	General lack of support , employer potentially offers some mental health support in employee benefits	Online communities, social media campaigns promoting mental health awareness	Family, friend of community activities, peer-support groups, family-based interventions	Limited structured support , however, leisure activities do provide a sense of community and physical activity
Key gaps	Digital and individual courses drive isolation, a reduction in vocational training , marginalized students lack access to support, inconsistent early intervention	Transition gaps for emerging adults with a discontinuity between child and adult care, treatment addresses symptoms rather than causes, long waiting times, limited rural access, gaps in preventive efforts, lack of minority adaptations	Lack of affordable options, lack of adaptations for marginalized groups, for-profit solution providers aim for profit over best possible care , which drives a lack of trust	Difficulty raising sufficient funding to empower low-tech, long-term support, varied collaboration with public sector which creates fragmented support (e.g., less in rural areas)	SMEs/public sector often lack support , awareness among businesses and management is low, big corporations just started acknowledging mental health, even less awareness regarding emerging adults' needs	Social media amplifies discrimination and anxiety, creates a false sense of community, exploits mental health content (e.g., buy this product to feel better)	Socioeconomic barriers, stigma limiting mental health support in many families, uneven regional support, lack of awareness of community activities	Affordability to certain leisure activities (e.g., sports or culture), accessibility to activities varies greatly, particularly in rural areas

INDIRECT INFLUENCE

Deep dive: Indirect ecosystem

Indirect ecosystem around emerging adults



“There needs to be a shift to finance more social innovations. However, social entrepreneurs also need more support to become investment ready. Many need support to professionalize their organizations before they go to investors, ensuring they have their impact processes and financials in place.”

Ruth Brännvall
Co-founder of Impact Invest

What we learned: Key gaps

Limited but increasing policy attention

Mental health for emerging adults is gaining attention but still lacks strong, coordinated policy focus and cross-sectional collaboration.

Fragmented institutions and siloed systems

Institutions operate in isolation with conflicting goals. Clearer directives and incentives for cross-sector collaboration are necessary.

Funding challenges

While capital exists, it is not easily accessible to social innovations, particularly low-tech solutions. Investments favor tech and climate initiatives, leaving mental health underfunded.

Societal norms and structural inequalities

Economic, social, and physical environments significantly influence mental health. Structural inequalities must be addressed at both the individual and systemic levels to improve outcomes.

Lack of access and inclusivity

Mental health resources are often inaccessible to underrepresented groups, such as foreign-born individuals or those in rural areas. Low-threshold, inclusive solutions are needed to meet emerging adults in their everyday environments.

Enhance inclusivity

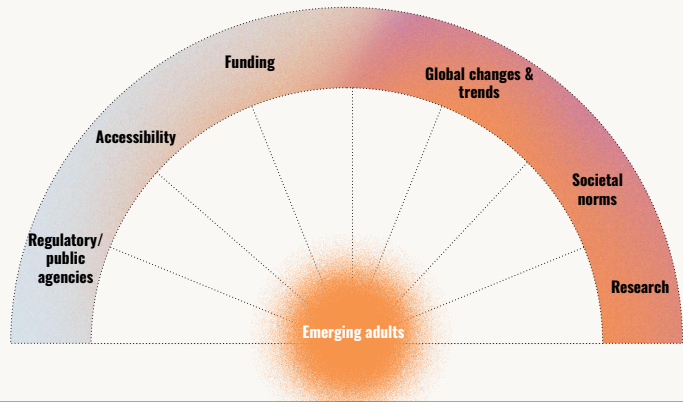
Clear gaps exist in meeting the needs of specific groups. Address systemic inequities and focus on underserved groups, including ethnic minorities and individuals with neurodevelopmental challenges.

Research disconnected from practice

Research provides solutions but is poorly linked to the direct mental health ecosystem, reducing the practical impact of findings.

Deep dive: Indirect ecosystem

Indirect ecosystem around emerging adults



“Emerging adults are an under-prioritized group. The moment you turn 18, support disappears. We talk a lot about children and adults, but this in-between group needs real focus to increase capacity, invest in prevention, and amplify advocacy, especially for those with disabilities who are left with far too little support.”

Malin Ekman Aldén
Director General at Swedish Agency for Participation (MFD)

Conclusions

Lack of flexibility

Systems are rigid and age-restrictive, often preventing early intervention or support continuity. By encouraging and advocating for system flexibility, more fluid systems prioritize individual needs over rigid age-related constraints.

The impact of racism on mental health is overlooked

Racism and systemic biases negatively impact mental health, yet these issues are often overlooked in mainstream mental health services. Racism in education and employment exacerbates mental health issues, but these systemic problems remain unaddressed, leading to challenges that the current system is not equipped to address adequately. Racism is present in all countries but prevalent in Finland.

Legislation and policies exist but lack effective execution

Anti-discrimination laws, mental health provisions, and mechanisms for addressing systemic racism exist – on paper – but lack effective execution.

Need for simplifying scaling mechanisms

Public procurement processes are complex and discourage narrow, specialized innovations, especially by small organizations. Streamline public procurement processes to facilitate the adoption of specialized solutions, without overwhelming administrative hurdles.

Resistance to prevention work

Little budget or willingness to invest in preventive measures, despite proven long-term cost benefits.

Build competence and common language for procurement

Educate municipalities and public health entities on specialized needs, and align terminology around social impact and procurement.

Community-based focus

Community-based measures are seen as effective, but these are underutilized and underfunded.

Prevailing stigma prevents innovative and effective methods to be implemented

The system often focuses on problems like e.g., gaming addiction rather than leveraging gaming positively to connect with and support individuals.



Dependency on foundation/impact investing and limited access to capital

		Typical focus/investment criteria	Example of funding sources	Accessibility to capital
Public capital	Public health care (National budget)	Primarily to increase capacity of primary care (addressing symptoms rather than improving proactive initiatives)	E.g., Swedish government allocating €150M to increase capacity of primary care for mental health services (2024)	
	National & regional funding (Government grants)	Broader development, awareness, and knowledge spreading Social support to different target groups (can be mental health related but primarily broader societal matters)	E.g., Swedish government grants of €13M to mental health and suicide prevention for NGOs (2025)	
	Municipalities (Local budgets)	Typically aimed toward urgent needs in local communities (e.g., education, health care, or welfare). Children are prioritized, with limited focus on mental health initiatives	E.g., Swedish government allocating €20M to municipalities and regions to improve accessibility of mental health support (2024)	
Private capital	Private equity/ venture capital	Attractive short-term financial returns and scalability Very limited funds for low-tech/long-term solutions	E.g., annual investments of up to €100M into wellbeing/ mental health startups and scale-ups (e.g., digital health/therapy platforms)	
	Impact investors (for & non-profit)	Positive social impact that is also financially attractive and scalable (rarely low-tech or long-term initiatives)	The Inner Foundation (€100M over 20 years) offering dedicated funding to mental health initiatives and solutions	
	Non-profit/ NGO investments	Main objective is impact, often longer time horizon, focus on health promotion, preventive solutions, local reach, and underserved groups (e.g., minorities, emerging adults, etc)	E.g., Kavli Trust donating €2M per year to mental health initiatives	
	Corporations	Can invest in mental health by purchasing support services and (to a small degree) by donating to non-profits	Generally limited investments into mental health support /services for employees. Donations: e.g., IKEA donating €1M to NGOs in 2023 (not mental health related)	

Backup: country funding discrepancies

	 Sweden	 Norway	 Denmark	 Finland
Funding differences per country	“Municipalities have mandate to make smaller investments (e.g., through IOP - idéburet offentligt partnerskap) but will need national support to increase public capital.” “Private capital investments are welcome but seldom have sufficient time horizon or willingness to invest in low-tech solutions. Mainly NGOs and impact investments are supporting these high-impact social entrepreneurs.”	“Strong cultural/ideological resistance toward for-profit solutions. Preference that social solutions are provided by state.” “Majority of municipalities have budget deficits and critically need to invest in infrastructure. Very limited funds are available for social entrepreneurs.” “Funding likely needs to be public and national initially while working toward a shift in mindset to accept more private support.”	“Municipalities have mandate to make small and medium investments in social impact initiatives. However, there is often a lack of social entrepreneurs on the local level.”	“New government is reducing spending across social impact and NGOs, making it much more difficult for NGOs to continue their operations, significantly reducing their potential impact and reach.” “Impact investments are often directed to climate technology or sustainability solutions rather than mental health.”
Sources	Malin Ekman Aldén, Director General at the Swedish Agency for Participation (MFD)	Dagfinn Mørkrid Thøgersen PhD, Innovation and Service Development Expert at the Norwegian Center for Child Behavioral Development NUBU	Jette Louise Larsen, Member of Rødovre Municipality City Council and Founder at Minplan International	Frans Horneman, Chief Psychologist at Mieli Mental Health Finland

Regulatory

The E.U. Comprehensive Approach to Mental Health (2023) focuses on prevention, access to quality mental health care, and reintegration, supported by frameworks like the EU4Health Programme and the European Framework for Action on Mental Health. These initiatives aim to guide member states in improving mental health systems and tackling stigma.



Sweden



Norway



Denmark



Finland

Key authorities and mandates

Folkhälsomyndigheten (Public Health Agency of Sweden)
Mandate/role: Monitor mental health trends, provide data, and support national strategies for mental wellbeing and suicide prevention. **Focus:** Public health awareness and research dissemination.

Socialstyrelsen (National Board of Health and Welfare)
Mandate/role: Oversee health and social care, develop guidelines for mental health services, and ensure compliance with legislation. **Focus:** Ensuring equitable and high-quality care nationwide.

Helsedirektoratet (Norwegian Directorate of Health)
Mandate/role: Oversee implementation of health policies, including mental health, and provide guidance to health care providers. **Focus:** Promoting public health, ensuring quality, and coordinating health initiatives.

NAV (Norwegian Labour and Welfare Administration)
Mandate/role: Financial and social support, rehabilitation, and employment services for those in need. **Focus:** Supporting mental health and reintegration into education/employment.

Rådet for psykisk helse (Norwegian Council for Mental Health)
Mandate/role: Promote awareness and improve mental health services through advocacy and education. **Focus:** Nationwide campaigns and resource dissemination.

Sundhedsstyrelsen (Danish Health Authority)
Mandate/role: Oversee public health initiatives, including mental health, and provide guidelines for health care providers. **Focus:** Promoting mental wellbeing and ensuring the quality of mental health services.

Socialstyrelsen (Danish National Board of Social Services)
Mandate/role: Support municipalities in delivering social services, including mental health, through guidance and best practice. **Focus:** Enhancing social support systems to improve general health, particularly for vulnerable populations.

Terveyden ja hyvinvoinnin laitos (THL) (Finnish Institute for Health and Welfare)
Mandate/role: National expert agency under the Ministry of Social Affairs and Health. **Focus:** Research, development, and guidance on public health and welfare, including mental health services and policies.

Sosiaali- ja terveysministeriö (STM) (Ministry of Social Affairs and Health)
Mandate/role: Oversee social affairs and health policies. **Focus:** Formulating national health strategies, including mental health initiatives, and ensuring their implementation.

Current legislation

Hälsö- och sjukvårdslagen (Health and Medical Services Act)
Ensures access to health care for all residents, emphasizing equal care regardless of demographic, including mental health services for young adults.

Patientlagen (Patient Act)
Enhances the rights of patients in health care, including those receiving mental health services, with a focus on informed consent and participatory decision-making.

Lov om psykisk helsevern (Mental Health Care Act)
Regulates provision of mental health care, ensuring patients' rights and the quality of services provided.

Folkehelseloven (Public Health Act)
Framework for public health efforts, including mental health promotion and preventive measures at both national and municipal levels.

Helse- og omsorgstjenesteloven (Health and Care Services Act)
Governs the provision of health and care services in municipalities, including mental health services, emphasizing accessibility and quality.

Sundhedsloven (Health Act)
Framework for health care services in Denmark, including mental health care, ensuring equal access for all citizens.

Serviceoven (Social Services Act)
Outlines provisions for social services to ensure support, including mental health needs.

Barnets Lov (Child's Law)
Effective from January 1, 2024, this law consolidates regulations for support to children and youth, including those with mental health challenges, aiming to provide better and earlier interventions.

Mielenterveyslaki (Mental Health Act)
Governs the provision of mental health services, patients' rights, and the criteria for involuntary treatment.

Terveydenhuoltolaki (Health Care Act)
Regulates the organization of health care services, emphasizing accessibility, quality, and patient-centered care, including mental health services. Also includes maximum limits for waiting times.



Sweden



Norway



Denmark



Finland

Public funding into mental health

The Swedish government allocated an additional SEK 150 million to NGOs in 2025 to promote mental health, prevent mental illness, and reduce suicides.

Beyond 2024, the government has committed approximately **SEK 1.6 billion per year for 2025 and 2026** to improve access and strengthen capacities of mental health services in primary care, improve quality mental health care, and drive mental health and suicide prevention initiatives in regions and municipalities.

The Norwegian government plans to increase allocation to mental health by **NOK 3 billion over a 10-year period** with Opptrappingsplan for psykisk helse (Mental Health Ramp-Up Plan) (2023–2033). Strengthen access to services and early intervention, shift from centralized to community-based psychiatric care, and integrate mental health care with education, employment, welfare systems.

An additional NOK 400 million is proposed to follow up on the above plan and for the upcoming prevention and treatment reform for substance abuse.

The Danish government has allocated **DKK 2.4 billion over the next 10 years** as part of the new national mental health strategy. To strengthen psychiatric care infrastructure, provide early intervention and support for vulnerable groups, and improve collaboration between psychiatric and social services to offer comprehensive care.

Free Psychological Counseling for Young Adults – DKK 47.2 million annually (from 2022 on) – provides free and accessible mental health support to young people, reducing barriers to care.

No publicly available breakdown of what the Finnish government is expected to allocate toward mental health. However, sizable investment into mental health is required as part of the new national mental health strategy.

Recently proposed mental health strategies

10-year national strategy for mental health and suicide prevention (currently being formulated)

Scope: Appointment of a national coordinator for suicide prevention, improve access to mental health services, especially in underserved areas, establish a national research program for evidence-based practices, and place emphasis on early detection, intervention, and support for vulnerable groups.

Mental Health Ramp-Up Plan (2023–2033)

Scope: Enhance mental health promotion and preventive measures and early intervention, improve accessibility to services where people live, provide support for individuals with long-term and complex needs, focus on community-based services and integration with other sectors, and prioritize vulnerable groups.

Action Plan for Suicide Prevention (2020–2025)

Scope: Reduce suicide rates and attempts, improve support systems, and raise awareness and competencies.

10-Year Plan for Psychiatry (2023)

Scope: Enhance mental health services over the next decade, prioritizing early intervention and support for children and young people to prevent the development of severe mental health issues. Encourage cooperation between health care, social services, and educational institutions to provide holistic support.

Expansion of 'headspace': Nationwide expansion of a counseling service aimed at young people facing mental health challenges, to provide accessible support and prevent the escalation of mental health issues.

National Mental Health Strategy and Programme for Suicide Prevention (2020–2030)

Scope: Recognize mental health as a resource that contributes to wellbeing and societal success, emphasizing the importance of fostering mental wellbeing from an early age through supportive environments and education. Ensure that individuals' mental health rights are protected and promoted within health care system and society, and provide comprehensive and accessible mental health services that cater to the diverse needs of the population. Effective leadership, coordination, and evaluation of mental health policies and services to ensure quality and impact.



Sweden



Norway



Denmark



Finland

What we saw

Limited mention of emerging adults as a target group in need of dedicated mental health resources in any current or suggested policies

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What we heard in interviews

“We need more low-threshold and preventive measures for young adults in need of help. A lot of funding is going to increasing capacity of reactive care, which is good, but we need to invest in more proactive measures to reduce the number of people who need to seek care for their mental health.”

“I feel there is a lack of enforcement of laws or a lack of consequences. For example, a workplace should be punished in some way if many employees are sick due to stress and/or mental health issues.”

“It’s important to listen to what emerging adults actually want now when we are establishing the new mental health strategy in Sweden.”

“Due to the resistance toward private mental health solutions, a large responsibility falls on the government, which is struggling to ensure all those in need of help get it quickly and of a good quality, meeting the diverse needs of the population. We need more collaboration, as it’s very difficult for one actor to provide all this on the local level.”

“I think the Nordic countries are moving in the right direction with their new mental health strategies, but I still feel like emerging adults are not being acknowledged as one of the most vulnerable groups in need of dedicated support systems that don’t disappear the day you turn 18. More improvement of preventive, everyday support around them is needed.”

“The laws are only one part of the equation; we can write down a bunch of nice things on paper, but what we really need is to ensure we implement and enforce these things.”

“Municipalities play a huge part in if we succeed in improving mental health support or not. They are the ones who need to partner with social entrepreneurs or invest in more local solutions. Perhaps we need more national guidelines on what is expected of municipalities when it comes to this, as many of them are very slow to drive change.”

“Mental health needs to be prioritized high up in our government. Otherwise, very few meaningful changes can be driven in our country.”

“Our system doesn’t even follow its own laws. We have maximum waiting times for care in our laws, but people are waiting, sometimes for more than a year for help. What good do the laws do when our public health care can’t follow them?”

“Our government is reducing financial support to NGOs, which will worsen the mental health support systems that are helping people today. There needs to be a collaboration between the government, NGOs and other actors to deliver more low-threshold, accessible support for those who need it most.”

“There should be much stricter rules or laws surrounding racism.”

THE COST OF INACTION

Reactive support equals extensive costs to society

Investing in proactive mental health support for emerging adults is critical. This not only improves the wellbeing and future prospects of this age group. It also reduces the escalating cost of reactive care and supports sustainable societal development.

Mental health challenges among emerging adults pose a significant financial burden on society — around **€10 billion annually** — according to OECD estimates. That represents more than the total annual state costs for parental leave benefits in all four countries combined.

This impact reflects the long-term consequences of untreated mental health conditions, affecting individuals' ability to fully participate in education, work, and society.

Despite these high costs, Nordic countries invest less than **1%** of the total societal cost in proactive mental health care, focusing predominantly on reactive measures. Yet, estimates show that every €1 invested in evidence-based preventive measures saves society €5 in improved health outcomes and productivity over time. This significant gap highlights the **urgent need to shift toward preventive approaches** that can alleviate the growing financial burden on society.



Key data: The cost of inaction

Mental health in
the Nordics costs society
€65-80 billion per year
(4-5% of GDP)

Emerging adults are
estimated to account for
~€10 billion per year*

*(> total cost of annual parental leave
benefits in all 4 countries)

health care
costs
~25%

Social
benefits
~35%

Indirect
costs
~40%

(e.g., sick leave and
disability payment)

(e.g., reduced workforce
participation and
productivity loss)

Nordic countries are only investing a
fraction (<1%) of the total societal cost
to increase capacities of proactive care.

**Critical to invest and work proactively
to avoid the significant and increasing
costs of providing reactive care**

Providing reactive support equals extensive societal costs

	 Sweden	 Norway	 Denmark	 Finland	Nordics
Total mental health cost to society	SEK 320 billion in 2023 (total cost of mental health) Direct health care costs: 84 Bn Direct social benefit costs (such as sick leave and disability payment): 111 Bn Indirect costs (productivity losses and reduced workforce participation): 124 Bn	~NOK €17 billion (2018 estimate) Approximation: SEK 165-250 billion using population and GDP to scale Swedish societal cost number as reference	~DKK 110 billion annually primarily from social benefits, production losses, etc Approximation: SEK 120-130 billion using population and GDP to scale Swedish societal cost number as reference	~€11 billion (2018 estimate) (weak source) Approximation: SEK 140-175 billion using population and GDP to scale Swedish societal cost number as reference	~€60-70 billion previous Next In Mind number Sum of approximations: SEK 745-875 billion
Estimate for 18-29 year olds	14% of population is 18-29 (assuming shared societal cost burden across ages) Est: ~SEK 45 billion	15% of population is 18-29 (assuming shared societal cost burden across ages) Est: ~SEK 30 billion	15% of population is 18-29 (assuming shared societal cost burden across ages) Est: ~SEK 19 billion	14% of population is 18-29 (assuming shared societal cost burden across ages) Est: ~SEK 22 billion	Sum of estimates: ~SEK 110-130 billion
Sources	Ungas välmående och framtidstro (Skandia) SCB (Statistiska centralbyrån)	OECD Samfunnskostnader ved sykdom SSB (Statistisk sentralbyrå)	Health Care Denmark Danmarks Statistik	OECD Tilastokeskus (Statistics Finland)	Unfulfilled potential (Next in Mind) Combination of country sources

Mental health in the Nordics is estimated to cost society €60-80Bn per year

KEY INSIGHTS

Action steps for a thriving future

Our mapping has made one thing clear: **current mental health support systems in the Nordics are not fully meeting the needs of emerging adults.** Despite the availability of services, many struggle to access the right support at the right time. Stigma, long waiting times, lack of tailored intervention, and a disconnected support system leave too many emerging adults without the help they need to navigate this critical life stage.

At the same time, there is **no shortage of innovative solutions.** Social entrepreneurs, community initiatives, and public-private partnerships are developing promising approaches to mental health support. However, these solutions often remain **fragmented, underfunded, and difficult to scale.** By working together across sectors, **we can shift from reactive to proactive support models,** ensuring access to **preventive, accessible, and inclusive mental health resources.**

This section outlines **six key actions needed to transform mental health support for emerging adults** across the Nordics. Condensed and refined after extensive research, these active recommendations offer concrete steps toward a holistic ecosystem that supports mental wellbeing — for all emerging adults.



Overview: Key insights

1. Establish emerging adults as their own target group

Acknowledge emerging adults as a new target group that requires a support system developed specifically for them

2. Destigmatize seeking support for mental health

Remove the stigma surrounding mental health and seeking help by actively spreading healthy narratives, normalizing the topic among emerging adults and the key stakeholders in their lives

3. Ensure responsibility and commitment from key actors in emerging adults' lives

Leverage non-health care actors (workplaces, schools, communities) to support and implement proactive mental health strategies for emerging adults in their everyday lives

4. Commit to cross-sector collaboration to increase access to preventive support

Create coordinated support across sectors — public, private and civil society — as emerging adults interact with a variety of actors, including media, employers, and health care providers

5. Improve access to low-threshold support during critical transition phases

Increase accessibility and awareness of low-threshold mental health support options through centralized information platforms, guiding emerging adults to different types of support

6. Improve implementation of proven mental health innovations for emerging adults

Acknowledge the important role of civil society to deliver low-threshold support services for emerging adults' mental health

Society level

These insights require action from a societal level. This requires higher awareness about the target group among political decision-makers and policies addressing these challenges.

System level

These insights are targeted at those actors with direct influence on emerging adults, placing greater responsibility on them. This includes public health care, schools, and workplaces.

Social entrepreneur level

These insights show the need and potential of enabling social entrepreneurs and their innovative solutions to be a bigger part of the support system.

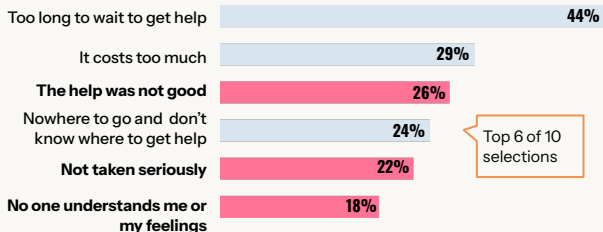
1. Establish emerging adults as their own target group

Description

- Emerging adults (EAs) are often underserved or miscategorized as "youth" or "adult." EAs have unique challenges and support needs, distinct from both children and adults
- When turning 18, societal safety nets disappear. Adult support systems are not adapted to the youth of today. EAs say they need more relevant support than what is available in current care (e.g., transitions, identity formation, and social connections)

Supporting data

Have you ever run into problems trying to get help? (max. 3 selections)



Why is there still work to be done?

- Lack of knowledge and awareness in society of emerging adults and their life challenges (survey respondents say they are often misunderstood or not getting relevant help)
- Lack of culturally and contextually adapted and inclusive support for all emerging adults
- Lack of involvement and representation when problems are defined, and solutions are designed and implemented
- Low-quality help or being misunderstood or not taken seriously is the reality many emerging adults face when seeking mental health help
- Select high-risk groups with higher rates of having been unwell: **78% of females, 77% of people diagnosed neurodivergent or with a disability, 71% of minorities, 73% with one or both non-Nordic parents**

Quotes

"I tried to get help but they didn't have any knowledge of me or my life. Even if they wanted to help me, they couldn't. My doctor was at least 30 years older than me and, for example, had no clue of how we use social media, etc today."

Emerging adult
(Survey respondent)

"Nobody in health care cares about me. As soon as I turned 18, I have just been ignored and put on waiting lists. When I finally got some help after waiting for months, it was terrible."

Emerging adult
(Survey respondent)

1. Establish emerging adults as their own target group

Key actors and actions

Political decision-makers

- Dedicate resources to ensure support meets the diverse needs of emerging adults
- Fund representative academic research into the specific needs of emerging adults and at-risk subgroups (e.g., minorities, neurodivergent individuals, those diagnosed with a disability)
- Train caregivers to better understand emerging adults lives and the challenges they face (e.g., health care and social workers)

Additional key success factors

- Provide inclusive support for marginalized groups, increasing diversity among mental health providers to ensure services are culturally relevant, fostering trust and accessibility
- Acknowledge and address the impact of discrimination and racism, as both impact the opportunity for minorities to access mental health services and in turn improve their wellbeing
- Involve and represent emerging adults when defining the problem and designing and implementing support
- Consider structural and socioeconomic inequalities when developing and delivering support
- Ensure that support is inclusive and both culturally and contextually adapted

Enablers

- General awareness of emerging adults and their needs among decision-makers
- Political support of influential parties or individuals that can push emerging adults higher up on the agenda

Quotes

“PLEASE acknowledge that this NEW target group — emerging adults — is an important target group with unique challenges and that needs support!”

Emerging adult
(Survey respondent)

“We see greater impact and results when we have invited children and adolescents into our process. It’s difficult for adults to understand everything youth today are going through. We need to collaborate with them. Understand what they actually need and want, not just look at statistics.”

Sara Fritzell
Folkhälsomyndigheten, Sweden

1. Establish emerging adults as their own target group

No country or organization we encountered has established emerging adults as a distinct target group across policy areas. 18-29 year olds are left out by current systems and rely on civil society and volunteer actors.

Source: Emerging adult and ecosystem interviews (across countries & sectors)

Inspiring examples: Filling systemic gaps and supporting emerging adults



The Inner Foundation identified major gaps between academic insight, best practice, and street-level action in mental health and DEI. Now investing in for- and non-profit social innovations to bring better mental health support to emerging adults



1825 is a clinic for therapy and treatment that focuses on 18-25 year olds in specific. Fueled by volunteers and therapists, who provide an average of ~30 sessions, a big difference from the ~10 sessions typically sponsored at the regional level



My Mental Wellbeing educates both young professionals and companies on managing mental health at the workplace. Specifically targeting GenZ and millennials, (e.g., educating managers on leadership and mental health for younger employees)



Right By Me is on a mission to protect, educate, and strengthen vulnerable youth through experiential learning, fostering self-leadership and societal engagement. Particularly empowering minorities and those with non-Nordic backgrounds by improving their participation in society and on the labor market

2. Destigmatize seeking support for mental health

Description

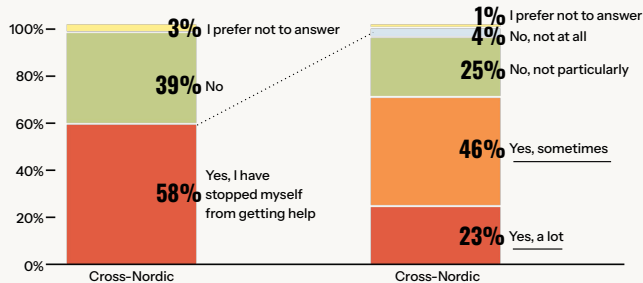
- Destigmatize mental health and seeking help for it by actively spreading healthy narratives, normalizing the topic among emerging adults and the key stakeholders in their lives
- Strengthen mental health literacy in society by spreading awareness and knowledge, reducing stigma and lowering thresholds for emerging adults to seek help

Why is there still work to be done?

- Limited mental health literacy in society, with people in general often misunderstanding when and why emerging adults struggle and possess a lack of knowledge on how to help
- Mental health is a sensitive topic that many actors in society find difficult to approach and talk about
- Lack of understanding around the connection between emerging adults' mental health and socioeconomic factors

Supporting data

If you've been unwell, have you ever stopped yourself from asking for mental health support because you were worried what people would think?



Do you feel there is stigma/ a negative view of getting mental health help where you live?

- ~58% of those who have been unwell have stopped themselves from getting help due to worrying about what other people would think
- ~69% of those feel there is a negative view or stigma around getting help for mental health
- Stigma surrounding mental health and seeking help is especially prevalent among minorities and those with non-Nordic parent(s)

Quotes

“I have struggled with my mental health back and forth for years, but I feel like I can’t really tell anyone about it, not even my parents, because I am afraid what others will think. I don’t want people to label me or think bad things about me.”

Emerging adult
(Survey respondent)

“I’m a minority and often encounter racism and feel alienated in society, which heavily affects my mental health. My parents and family have had a tough life and there is no chance that I can talk about my mental health with them. I feel so alone and like I don’t have the right to complain or feel bad. I wish it was easier to talk about these things.”

Emerging adult
(Survey respondent)

Source: Emerging adult and ecosystem interviews (across countries & sectors); Next in Mind/Perspetivo survey (Total N=1044)

Key actors and actions

Social media influencers/content creators

Activate influential social media platforms and actors to build and spread healthy narratives around mental health

Traditional media outlets

(news, streaming services, TV channels, etc)

Activate the influential media outlets emerging adults engage with (e.g., streaming services) to build and spread healthy narratives around mental health and destigmatize seeking help

Political and private decision-makers

Collaborate and support the role of the civil sector as a community enabler by creating peer-to-peer support communities specifically for emerging adults

Workplaces

Increase sense of belonging and community at work by spreading awareness, strengthening a sense of belonging, introducing peer-to-peer support communities, and lowering thresholds for mental health conversations

Educational institutions

Introduce mental health as curriculum and/or spread awareness and knowledge to further lower thresholds

Enablers

- Meet emerging adults where they are (social media, schools, youth centers, sports clubs)
- Invest in activities that strengthen the sense of belonging and community among emerging adults
- Leverage individuals or society actors that emerging adults listen to and trust (sports personalities, influencers, celebrities)
- Build trust to enable open conversations around mental health

Quotes

“There’s still way too much stigma around mental health. More action should be focused on normalizing it, encouraging and creating communities for people who need it, like ‘mama groups’ but specifically for emerging adults or other groups that need support.”

Emerging Adults

Advisory Board member

“Stress has become normalized in society, and there is no stigma if you seek help to manage stress. But as soon as you mention mental health, depression, or similar words, there’s a huge barrier for people. We need to talk more about mental health, keep normalizing it in society to spread knowledge and awareness, encouraging more individuals to dare to seek help.”

Fredrik Livheim

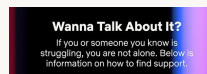
PhD, psychologist, researcher at Karolinska Institutet, ACT trainer

2. Destigmatize seeking support for mental health

Inspiring examples



EN AF OS (One of us) is a national anti-stigma campaign aiming to reduce discrimination and exclusion of individuals with mental illnesses in Denmark. In addition to spreading awareness and knowledge, they also offer an ambassador program, which trains individuals with lived experiences to share their stories, fostering empathy and understanding. They also offer public education, engaging in activities to increase knowledge and challenge stereotypes about mental health and mental illness.



NETFLIX

Netflix uses their streaming platform and content, reaching broad audiences to normalize mental health conversations. They provide an online resource hub with a variety of mental health information and support alternatives. They often share information about the platform at the start or end of movies and TV series that can trigger viewers or that contain scenes or characters with struggles, not only mental health related.



Aware (29k Foundation) is a free app with either open or private hosted live sessions for mental health, wellbeing and inner development. Developed by psychologists, it facilitates peer connections, reducing feelings of isolation, and provides science-backed techniques to manage stress and anxiety, promoting understanding and acceptance.



We Encourage provides mental health support and guidance to individuals affected by domestic violence. AinoAid, an AI-based conversational chat tool, offers assistance to individuals affected by domestic violence: victims, perpetrators, and others. Combining expertise and technology to deliver accessible and personalized support, their work also destigmatizes domestic violence and mental health, making it easier to spread knowledge about violence in close relationships.



The Green Ribbon is a symbol of mental health awareness. Encouraging employees to wear it is a simple and visible way of challenging stigma around mental health and demonstrates that a person is comfortable speaking about mental health, promoting open conversation.

3. Ensure responsibility and commitment from key actors in emerging adults' lives

Description

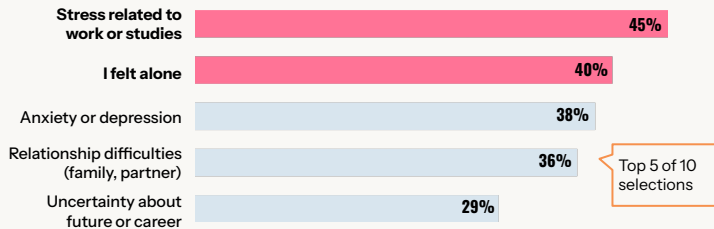
- Leverage non-health care actors (workplaces, schools, communities) to support and implement proactive mental health strategies
- Encourage key actors (e.g., educational institutions, workplaces, etc) to take increased responsibility for emerging adults, and embed and promote low-threshold mental health awareness and support

Why is there still work to be done?

- Lack of knowledge and awareness in society of emerging adults and their challenges
- Lack of policies or lack of enforcement and consequences for not following policies
- Stigma and lack of knowledge around the targeted help emerging adults require
- Disconnected support system with a lack of networks between key actors that could provide support
- Lack of resources

Supporting data

What were the main reasons you were unwell in the past? (max. 3 selections)



~45% of emerging adults have felt unwell due to unhealthy levels of stress at work or from their studies

~40% of emerging adults have felt unwell from feeling alone, which is common when joining the workforce or studying

Source: Emerging adult and ecosystem interviews (across countries & sectors); Next in Mind/Perspetivo survey (Total N=1044)

Quotes

“The company I work for says they care about their employees and mental health but I have not seen any actual initiatives on this topic.”

Emerging adult
(Survey respondent)

“Identifying early symptoms of mental health struggles and how to help should be basic common knowledge, especially for those who interact with EAs the most.”

Emerging Adults
Advisory Board member

“It’s difficult to talk investment in mental health. Oftentimes it comes down to profit vs. employee wellbeing. I think there needs to be some forcing mechanism, otherwise companies will choose profit.”

Anonymous
Head of HR, retailer with Nordic presence

3. Ensure responsibility and commitment from key actors in emerging adults' lives

Key actors and actions

Political decision-makers

Policy that enforces minimum requirements on workplaces to have knowledge of EAs, identifying early signals of mental health struggles and where to find support. Especially relevant for SMEs or public sector that have limited resources to invest in support services for employees (e.g., onboardings, therapy, etc)

Public work environment authorities

Clarify mental health requirements and emerging adult support to companies. Implement more frequent and stricter follow-ups of mental health laws and enforce consequences of shortcomings

Workplaces

1. Educate and raise awareness of mental health among business leaders, using positive incentives and consequences for not acting
2. Train supervisors/managers of emerging adults (increase knowledge of the group and mental health, educate on mental health first aid and recognizing early symptoms, etc)
3. Identify and collaborate across sectors with low-threshold providers from both the private and civil sectors

Educational institutions

1. Prepare students for transitions (for example, Hanken School of Economics' Navigator Path)
2. Collaborate with workplaces to support and prepare EAs as they transition into job market
3. Broaden general mental health support and develop support specifically for at-risk groups (e.g., students from non-academic families, minorities, or neurodivergent students)

Enablers

- General awareness of emerging adults and their needs among key actors (businesses, schools, etc)
- Buy-in from key actors to invest in knowledge on how to identify symptoms and available support options
- Communication regarding financial upsides (e.g., retention, productivity, employer branding) and consequences of not acting (e.g., high cost of sick leave)



Case study: The Netherlands

Shifting more responsibility and consequences to workplaces

Background and results

- The Netherlands successfully halved sick leave rates in the early 2000s by introducing robust legal and organizational reforms
- The reform measures shifted responsibility to employers, emphasizing reintegration into work rather than prolonged absence, while proactively managing employee wellbeing to avoid costs
- The approach highlighted the distinction between illness and work capability, ensuring individuals returned to work as soon as possible, even in a partial capacity
- The result was a dramatic decrease in long-term sick leave, with the Netherlands providing a leading example in Europe

Key reforms

Employer responsibility

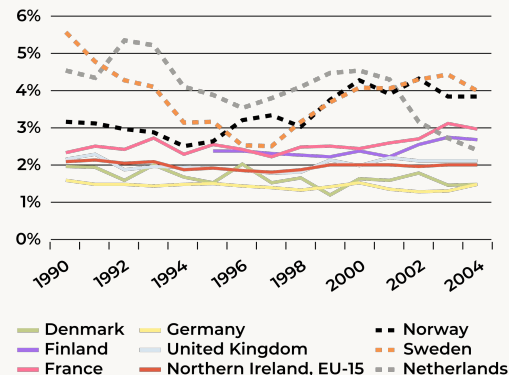
- Employers pay at least 70% of salary during the first two years of sick leave
- Mandatory reintegration efforts under the Gatekeeper Act, with structured timelines and collaboration with occupational health services
- Employees must participate in reintegration and follow medical/legal guidelines

Focus on reintegration

- Emphasis on assessing work capability rather than just medical recovery
- Clear accountability for employers to facilitate employees' return to work

These reforms created a proactive system, ensuring effective management of sick leave and reducing dependency on long-term leave.

Sick leave among employees aged 20-64



Source:

www.lakartidningen.se/wp-content/uploads/OldWebArticlePdf/7/7826/LKT0742s3022_3024.pdf

4 Commit to cross-sector collaboration to increase access to preventive support

Description

- Emerging adults interact with a variety of actors throughout their lives, including media, employers, educators, health care providers, and community organizations. Each of these actors can play a crucial role in supporting mental wellbeing, but these roles are often unclear or uncoordinated
- Clarify and coordinate support across sectors: public, private, and civil society

Why is there still work to be done?

- Lack of knowledge and awareness of emerging adults and their struggles
- Lack of incentives among key actors to collaborate across sectors
- Lack of systematic structures to prioritize and enforce collaboration
- Lack of know-how on how to apply a cross-sector collaborative approach

Supporting evidence



The vast majority of interviews across sectors and countries all mentioned the need for increased collaboration between actors and sectors to improve mental health support in society

Quotes

“Today there are too many silos and thinking that ‘someone else should fix that.’ We need more collaboration in municipalities, regions, nationally, and in the private sector. We need a new narrative to encourage and ensure that there are less silos and more teamwork on these topics.”

Kirsten Viga Skretting

Special Adviser at KS (Norwegian Assoc. of Local & Regional Authorities)

“There are some great examples of cross authority and cross-sector collaborations. During the pandemic, national health agencies drastically changed the way they worked internally, with other authorities, and with non-public actors. There was a need for it, and they solved it. We can do the same for mental health, but there needs to be a sense of urgency for things to actually happen.”

Ylva Nordling

Head of Operations, Sustainable Working Life, Partsrådet (Social Partners' Council)

Case study: Headspace (Norway)

headspace

Mental Helse has 160 local teams working to improve youth mental health across Norway

Headspace (part of national non-governmental organization Mental Helse) shows how civil society and the public sector can collaborate to leverage the strengths of various organizations to offer high-quality, local mental health support (e.g., through conversations, activities, community engagement)

Collaborative funding model

The operational costs of Headspace centers are shared between Mental Helse and participating municipalities and regions. This co-funding model allows for the sustainable delivery of services and facilitates the expansion of Headspace offerings to new areas. Headspace typically finances their share through fundraising, while the municipality and region use their respective budgets.

Collaborative operating model

Through partnerships, Headspace Norway collaborates with local municipalities and regional authorities to establish and operate its centers. For example, a municipality can provide local operations with facilities or office spaces. These partnerships are crucial for tailoring services to meet local needs and ensuring accessibility for youth seeking help across municipalities.

Example of local support

Viken County has allocated NOK 6.7 million over three years to support the establishment of Headspace centers in multiple municipalities within the region. This funding is aimed at creating accessible meeting places where young individuals can meet and receive early, low-threshold mental health support.

“I want to emphasize that in order to be successful with this model, it is crucial that civil society leads the collaboration with municipalities and the state (regions).”

Tom Guldberg, Leader of Headspace Norge

5. Improve access to low-threshold support during critical transition phases

Description

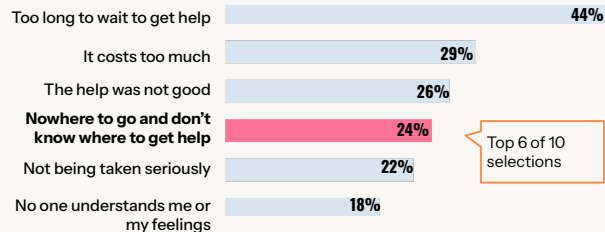
- Increase accessibility and awareness of low-threshold mental health support options through centralized information platforms that guide visitors to different types of support
- Embed low-threshold mental health services and knowledge in emerging adults everyday lives (universities, workplaces, social media, etc) to ensure support is easily accessible

Why is there still work to be done?

- Lack of knowledge and awareness about where to find adapted help for emerging adults (survey respondents say they often have no idea where to turn for help)
- Lack of knowledge and awareness from key actors regarding mental health support options for emerging adults and how to access them
- Lack of preventive measures for emerging adults, in addition to low capacity of reactive health care

Supporting data

Have you ever run into problems trying to get help? (max. 3 selections)



~24% of emerging adults that have actively sought help **don't know where they can go for help or feel there is nowhere to go for relevant help**

Source: Emerging adult and ecosystem interviews (across countries & sectors); Next in Mind/Perspetivo survey (Total N=1044)

Quotes

"I feel like there is nowhere to go for help for my mental health. There is no support that is adapted for me anywhere, at least not anything I know of."

Emerging adult
(Survey respondent)

"The accessibility to health care no longer depends on your personal knowledge. It needs to become more accessible and with much lower thresholds to find it."

Emerging Adults
Advisory Board member

"The big problem is not a lack of support options or methods, but rather that support options are not known about or are failing to reach their intended target groups. It should be much easier to find support in order to lower thresholds."

Malin Ekman Aldén
Director General at the Swedish Agency for Participation (MFD)

5. Improve access to low-threshold support during critical transition phases

Key actors and actions

Political decision-makers/NGOs

Develop a centralized website/platform in each Nordic country for emerging adults

- Summarize information about mental health (e.g., typical early symptoms, support during transition phases, general ways to address challenges typical for this diverse group), where support is available, and how to access it (e.g., 1177 in Sweden)
- Target information at those seeking help, those who know someone who needs support (e.g., friends, family, colleagues), and those who are just looking for information
- Support options can be public health care, regional NGOs/non-profit alternatives, and for-profit options

Key considerations

Public vs. private

It is essential to determine who is best suited to own and operate the platform. If public (state owned), there will be higher levels of scrutiny, with all support options needing to be vetted, etc. If privately owned, it may be too easy for support options to register. NGOs may be best suited to own the platform, but require sufficient resources.

Source: Emerging adult and ecosystem interviews (across countries & sectors); Next in Mind/Perspetivo survey (Total N=1044)



6. Improve implementation of proven mental health innovations for emerging adults

Description

- Identify successful examples of social innovations and proven solutions, and determine key success factors
- Spread knowledge of best practices to improve mental health solutions in society
- Acknowledge the important role of civil society in delivering low-threshold support services for emerging adults' mental health

Why is there still work to be done?

- Low awareness of both the important role of civil society and the effective solutions that support emerging adults' mental health
- Lack of patient capital into effective local, low-tech solutions
- Lack of collaboration internally in the public sector, e.g., operating in silos, not sharing best practices between municipalities
- Lack of support adaptations to e.g., minorities, neurodivergent, those with disabilities, etc

Enablers

- General awareness of emerging adults and mental health among decision-makers
- Knowledge about civil society solution providers and their role in providing high-quality, local support to emerging adults
- Political prioritization of public funding, while placing emerging adults and mental health high on the agenda

Quotes

“There are examples of great organizations that offer mental health support to target groups, but they’re often very local. Other actors or cities don’t know about them, what they do, and how they do it to be impactful.”

Jette Louise Larsen

Member of municipality city council in Rødovre, Founder of Minplan International

“I live in a smaller town and for me, there is nowhere to go. I’ve heard of other municipalities having youth centers or other types of community support, but we don’t have anything like that here. I wish we did.”

Emerging adult

(Survey respondent)

Key actors and actions¹

Political decision-makers

Acknowledge the role of civil society and social innovations as complementary low-threshold solution providers, integrating their role into mental health strategies

Standardize procurement of social innovations based on best practices within the public sector (e.g., IOP (idea-driven public partnerships in Sweden)), and promote these methods

Allocate more funding to mental health and emerging adults — from project financing to long-term financing — using patient capital deployed on national/regional/municipal levels

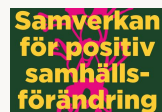
Build capacity within impact measurement across sectors,¹ utilizing organizations with impact measurement know-how to provide insights on impact investing

Support the development of social financing instruments¹ such as microfinancing, cooperative venture capital, and social impact bonds

Amend directives and practices within public venture capital and project funds,¹ ensuring that public venture capital and project funds do not exclude companies or organizations based on legal form

Develop strategies for social enterprise on the national level, such as the national strategy in Finland that aligns with E.U. recommendations

Inspiring examples



Samverkan för positiv samhällsförändring:

En guide för sociala entreprenörer och kommuner is a best practice guide explaining how to practically implement partnerships between municipalities and social innovators in Sweden, with the aim of easing the replication of successful initiatives to further areas.



Kukunori (Finland) leverages culture and creativity to improve mental wellbeing, with 25 Culture Houses in Finland and additional ones internationally. Collaborating with 43 partner organizations, Kukunori fosters peer-led, meaningful activities tailored to participants' interests, using the Guided Functional Peer Support (GFP) model. Recognized by the E.U. as a best practice, Kukunori collaborates internationally to further scale its model to mental health support, emphasizing active community participation and cultural engagement.

OUR COMMITMENT

Our commitment. Your involvement

This report is a milestone and an invitation. A resounding call to action.

Too many **emerging adults** are navigating mounting mental health challenges. The age group most affected yet least supported by today's systems. The problem is complex. Change is essential.

Next in Mind was born from the belief that no single actor or quick fix can solve a problem this complex or pressing. Our chosen path of **collective impact** — uniting social entrepreneurs, investors, policymakers, practitioners, and **emerging adults** themselves — is our way of building a more inclusive and resilient support ecosystem.

The insights in this report point the way to this work: from recognizing **emerging adults** as a distinct target group to scaling low-threshold solutions and unlocking stronger cross-sector collaboration. Not simple fixes, yet powerful levers for change.

While this report deepens our understanding of the complex ecosystem surrounding **emerging adults**, the work continues. We vow to keep championing the bold innovations reshaping the landscape. To strengthen the infrastructure around them so what works can grow, spread, and endure. And to urge everyone to listen, adapt, and evolve to instigate lasting change.

The shared journey toward a future where all **emerging adults** in the Nordics have the support they need to thrive – not merely survive – is well underway.

Let's build this movement together!



FOUNDING PARTNERS



SUPPORTING PARTNERS



KNOWLEDGE PARTNERS



NORTHZONE

DDC

Perspetivo



LORENSBERGS*

APPENDIX

Interviews conducted

(Complete sources, N=51)

All sectors in each country were discussed and covered during interviews, despite absence of a dedicated representative from some sectors



Denmark (N=11)



Finland (N=10)



Norway (N=10)



Sweden (N=20)

Education/ research

- National Union of Students Denmark (Esben Salmonsén)

- National Union of University Students in Finland (Akseli Tiitta)
- Hanken University (Christina Dahlblom)
- Tampere University (Sami Pirkola)

- Oslo School of Architecture and Design (Josina Vink)

- Karolinska Institutet (Anna-Clara Hollander)
- Lena Nylander (Psychiatrist in VUB team)
- Fredrik Livheim (Author & psychologist)

Public health care

- One of Us (Anja Kare Vedelsby)
- Center for Mental Sundhed (Bettina Bisp Jensen)
- Politician and social entrepreneur (Jette Larsen)

- Norwegian Association of Local and Regional Authorities (Kristen Viga Skretting)
- Nasjonalt Utviklingssenter for Barn og Unge (Dagfinn Mørkrid Thøgersen) – 2x interviewed

- Folkhälsomyndigheten (Sara Fritzell)
- Sveriges Kommuner och Regioner (Maja Hagström)
- Myndigheten för delaktighet (Malin Ekman Aldén)
- Psychiatrist (Anna Lundh)

Private sector

- Ebbefos Fonden (Illa Westrup Stephensen)
- TryghedsGruppen (Ditte Ehrenreich)
- Egmonts fondssekretariat (Jørgen Anker)

- Illusian (Katariina Helaniemi)
- Eva Ahlström Foundation (Anna Tornivuori)

- Katapult X (Ida Faldbakken)
- Impact StartUp Norway (Karen J. Skarbø)
- Bank2 (Diana Peters)

- Impact Invest (Ruth Brännvall)
- Mindler (Louise Lind)
- The Inner Foundation (Ye Liu-Poon)
- We Mind (Urban Pettersson Bargo)

Civil society

- Center for Digital Youth Care (Signe Sandfeld Hansen)
- Healper (Andreas Aabo)
- Headspace (Trine Hammershøy)

- Mielenterveyspooli (Aija Salo)
- SAMHA Ry (Tariq Omar)
- HelsinkiMissio (Heidi Rouhiainen)
- Yeesi (Vanessa Grant)
- MIELI Sekasin (Frans Horneman)

- Norwegian Council of Mental Health (Charlotte Lundgren)
- The Human Aspect (Jimmy Westerheim)
- Gamingkontakten (Marius Ruud)

- Ing-Marie Wiselgren Stiftelse (Fredrik Lindencrona & Lars Stjernkvist)
- Mind (Rickard Bracken)
- Vårdföretagarna (Karin Elinder)
- Samtalsringen (Charbel Gabro)

Workplace

- Anonymous (Nordic HR Director at large fashion retailer)

- Skandia (Joakim Karlsson)
- Axel Johnson (Emma Claesson)
- Partsrådet (Ylva Nordling interviewed twice)

Media

- Emma Holtén (Influencer)

Leisure

- Scouterna (Ingrid Häggblom)

Participants

Next in Mind Emerging Adults Advisory Board

Matilda Holmberg (SE)
Sabad Mohammed (SE)
Mohammad Zia (SE)
Marvin Kouassi (SE)
Mohammed Almashhadani (NO)
Emma Effie Morrison Lund (NO)
Daniel N. Restad (NO)
Ole Johannes Ferkingstad (NO)
Jone Smørdal (NO)
Athiraga Arumugam (NO)
Vilma Rimpelä (FI)
Antti Ollikainen (FI)
Venla Jusslin (FI)
Thamer Negash (DK)
Anna Ralkov Broens (DK)
Mathilde Ingemann Gylstorff (DK)
Thor Svanholm Gustavfson (DK)

Next in Mind reference group and knowledge partners

Henrik Haaland Jahren, Braive
Charlotte Lundgren, Rådet for psykisk helse
Liban Ismael, Illusian
Suzan Hourieh Lindberg, Perspetivo
Hans Ahlström, Eva Ahlströms stiftelse
Laura Meyer, Eva Ahlströms stiftelse
Marte Sotholtet, Impact Startup
Karl Hedlund, Bain
Amanda Sundell, Ashoka
Kimmie Tentschert, Danish Design Center

Roundtable participants, Oslo, Norway, October 2024

Kredinorstiftelsen
Young Happy Minds
NextGen Ambassadors
Mental Helse (Headspace Norge)
Girku SOS
Rådet for psykisk helse
Oslo City Council
Kronprinsparets Fond
Prosperastiftelsen
INSPIRIA Science Center
Norwegian Institute of Public Health
Oslo Røde Kors Ungdom
Gamingkontakten
Reynd

Participants

Roundtable participating organizations, Almedalen, Sweden, 2024

Sydsvenskan, DI, DN etc

UNICEF

Psykisk hälsa på schemat

Kungliga Musikhögskolan
& Karolinska Institutet

Right By Me

Folkhälsomyndigheten

Folkhälsomyndigheten
(Enheten för psykisk hälsa och suicidprevention)

NSPH

Nationellt programområde psykisk hälsa

Healthy Women Idrotts- och Kulturförening

Sveriges Elevkårer

Socialstyrelsen
(Rådet för barn och unga)

MUCF

Socialtjänstminister (M)

Ramboll

Sveriges Elevråd

Ing-Marie Wieselgrens Stiftelse

MyBrain (Fryshuset Helsingborg)

Stiftelsen 1825

SKR Psykisk hälsa

Socialdepartementet

Knas Hemma

Röda Korsets Ungdomsförbund

Tilia

Postkodstiftelsen

Insight Gap

Skandia Idéer för livet

Postkodlotteriet

Podden: Berätta alltid det här

Handelshögskolan

We Listen In

SOS Barnbyar

20 social entrepreneurs
selected for
Next in Mind

Sweden (7)

- Healthy Women
- Stiftelsen 1825
- Right by Me
- Insight Gap
- Tjejzonen
- Tilia
- Fryshuset/ICbility

Norway (5)

- Girku SOS
- Norse Feedback
- Young Happy Minds
- Headspace Norway
- NextGen Ambassadors

Denmark (4)

- Healper
- My Mental Wellbeing
- Boblberg
- Minplan International

Finland (4)

- Kukunori
- MIELI
- MARKED with purpose
- We Encourage Oy

Healper

Andreas Aabo

Problem

Emerging adults in Denmark face significant barriers to accessing appropriate mental health support, with 89% never attending therapy due to the complexity of treatment options and subsidy systems. Even for those who do seek help, satisfaction is low. Only 1 in 5 report a strong connection with their therapist, a crucial factor for successful therapy outcomes. Therapists face challenges too, often working outside their specialty, leading to high dropout rates, and spending excessive time on administrative tasks.

Solution

Healper offers a matching service that connects emerging adults with certified mental health counselors, ensuring the right fit, while also providing therapists with an administrative system to focus support on quality care.

Contact

www.healper.dk/en



My Mental Wellbeing

Subhi Irshed and Olga Skalska

Problem

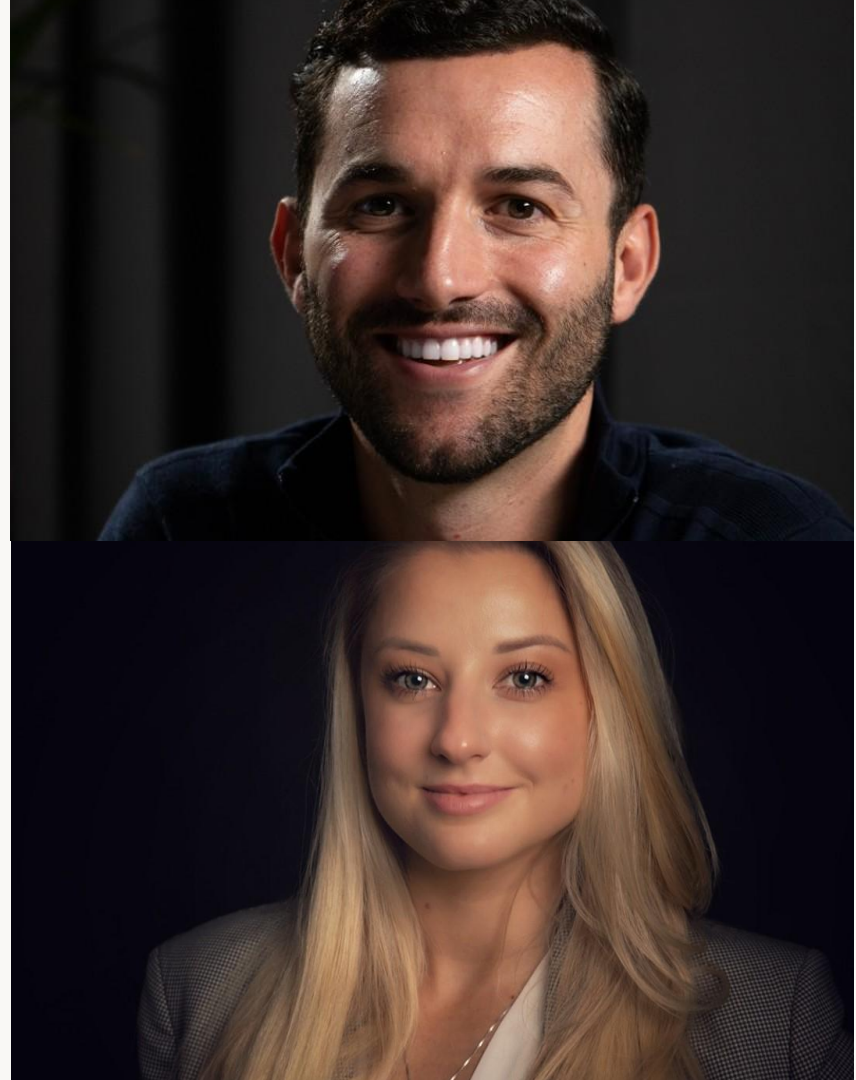
Emerging adults will dominate the future workforce, while their growing mental health crisis threatens societal stability. Stress and burnout significantly impact job performance and career growth, with 68% of Gen Z and young millennials frequently feeling stressed. Mental health support is a key workplace priority, with over 70% valuing employer policies on mental wellbeing, yet many feel uncomfortable discussing their struggles with managers.

Solution

An AI-powered platform providing relevant and accessible mental wellbeing tools for employees and employers. Their mission is to train, educate, and empower emerging adults by providing them with science-based techniques and practical instruments to enhance mental, physical, and emotional wellbeing.

Contact

www.mmwforimpact.com



Boblberg

Rasmus, Nikolaj, and Anders Staehr

Problem

A European Union analysis reveals that over 19% of young people (16-30) struggle with loneliness, particularly during major life transitions, making them more vulnerable to stress, depression, and anxiety. Moreover, the WHO warns that loneliness not only affects mental health but also increases the risk of stroke, dementia, cardiovascular diseases, and suicide. The need for supportive communities is greater than ever.

Solution

Boblberg offers a safe and inclusive platform and app. People can find and build new supportive communities, while enhancing their social skills and networks based on interests.

Contact

www.boblberg.dk



Minplan International

Jette Larsen

Problem

Emerging adults face increasing mental health challenges due to the pressure of transitioning into adulthood, career uncertainty, financial burdens, and social expectations. According to WHO, suicide is the fourth leading cause of death among 15-29 year olds globally. In Denmark, studies show a rising trend in suicide attempts among young people since the early 2000s.

Solution

A suicidal thoughts' prevention platform. Minplan enhances self-awareness, encourages proactive mental health approaches, and fosters support from family and health care through tools for self-assessment, data sharing with trusted networks, and access to coping strategies.

Contact

www.minplan.org





Finland



Kukunori

Markus Raivio

Problem

Emerging adults in Nordic countries struggle with mental health recovery in a system that focuses on their problems rather than strengths and individuality. In Finland alone, nearly 60,000 young adults (ages 15-29) are excluded from work and education due to mental health struggles. Meanwhile, a shortage of mental health professionals leads to long wait times for care. These challenges highlight the urgent need for client-centered, empowering mental health solutions.

Solution

Kukunori, the Central Association of Culture and Wellbeing, offers a Guided Functional Peer Support (GFP) model, with diagnosis-free spaces in Culture Houses where emerging adults use their strengths and passion in arts and culture to build confidence and community.

Contact

www.kukunori.fi/eng



Finland



Sekasin

Satu Raappana and Johanna Kronstedt

Problem

Finland is facing a growing mental health crisis among emerging adults, with studies showing that 25% of youth are affected. While severe disorders have remained stable, mild anxiety and mood symptoms are rising, creating a large demand for accessible mental health services. Despite the increasing need, mental health funding has declined.

Solution

A national chat service that supports mental wellbeing and helps cope with mental health problems. The chat is targeted at 12-29 year olds and is free of charge, anonymous, and confidential, with extensive opening hours.

Contact

www.sekasin.fi



Finland



Marked with Purpose

Ida Nevalainen

Problem

A majority of schools fail to teach social-emotional skills like self-awareness, emotional regulation, and personal growth, leaving many emerging adults feeling unfulfilled. In the Nordic region, only 10% of schools offer a structured SEL (Social-Emotional Learning) curriculum, far below the OECD average of 29%. This gap contributes to higher stress, anxiety, and depression among students.

Solution

Marked with Purpose is a 12-step program supported by a mobile app that empowers students aged 15-25 through experiential learning, helping them build self-awareness and emotional intelligence.

Contact

www.markedwithpurpose.com



Finland



We Encourage Oy

Anna Juusela and Ulla Koivukoski

Problem

Domestic violence (DV) is a hidden epidemic largely due to shame, lack of knowledge, and difficulty accessing support services. DV causes significant harm to individuals, society, and the economy. It affects people of all genders, ages, ethnicities, and economic backgrounds, with estimates on the frequency of human suffering by DV varying from close to 44% or 1 in 4 women, and 1 in 6 men becoming a victim of DV in their lifetime.

Solution

AinoAid is a chatbot and knowledge platform offering essential resources, guidance, and mental health support for individuals experiencing or affected by domestic violence.

Contact

www.encourage.fi

NextGen Ambassadors

Sondre Siira

Problem

Emerging adults facing challenges related to crime, addiction, and mental health are increasingly excluded from activities and the workforce, leading to social marginalization. In Norway, emerging adults who are outside the workforce and education system are in a more vulnerable position than their European peers. Specifically, 70% of Norwegian NEETs (Not in Employment, Education, or Training) are inactive, neither seeking work nor education.

Solution

The NextGen Ambassadors program aims to empower individuals facing social exclusion by enhancing skills and boosting self-esteem, while creating opportunities for those outside the labor market and education system.

Contact

www.nextgenambassadors.no



Girku SOS

Gry Jeanette

Problem

Suicide rates among the Sami people are significantly higher than in the general population. There are approximately 30,000 Northern Sami speakers across Norway, Sweden, and Finland, but there is a lack of help services in their native language with people who understand their culture.

Solution

A low-threshold helpline service driven by volunteers for Sami people, with the ultimate goal of suicide prevention.

Contact

www.girku-sos.no



Headspace

Tom Guldberg

Problem

75% of the Norwegian population will face mental health challenges before turning 25, but most of these issues can be prevented from developing into serious disorders. In Norway, the cost of mental illness was NOK 338 billion in 2021, with 99.7% of funds allocated to treatment and only 0.3% to prevention. While focusing on health services, society has overlooked the need for emerging adults to be seen, heard, and equipped with tools to manage their lives, losing the human aspect in the process.

Solution

Headspace provides a safe, anonymous space for emerging adults to express themselves. It offers free support through trained volunteers, where no issue is too small or too big to discuss. The service encourages open dialogue and helps emerging adults address concerns before they become problems.

Contact

www.mentalhelse.no



Norse Feedback

Joachim Vie

Problem

For the past 40 years, there has been little progress in improving the effectiveness of mental health treatment, leading to a growing crisis with more patients and longer waiting times, particularly for emerging adults with lower resilience. Additionally, a major issue is that many mental health services operate in a “data blackout,” with no effective monitoring or measurement of treatment and outdated diagnostic methods.

Solution

A SaaS-based solution of empowering therapists to track patient’s progress in real time and adjust support accordingly. Norse Feedback turns data into wisdom and wisdom into action by measuring mental health and showing systems how to manage it.

Contact

www.norsefeedback.no/en



Young Happy Minds

Karina Hollekim and Martine Kveim

Problem

Emerging adults are facing a growing mental health crisis, driven by societal pressures, the impact of social media, academic and career stress, and the struggle for identity and belonging during this transitional phase of life. According to the WHO, half of all mental health struggles begin by the age of 14, and three-quarters by the mid-20s. This is reflected in rising suicide rates among emerging adults, which is the fourth leading cause of death for individuals aged 15-29 globally.

Solution

Workshops — both online and offline — focus on teaching essential social and emotional skills to individuals, including emerging adults, parents, educators, and leaders worldwide.

Contact

www.younghappyminds.com





Sweden



Healthy Women

Susan Dahlbeck

Problem

Over the past 20–30 years, mental health challenges among youth and emerging adults have significantly increased, with a noticeable surge in the past decade. Young women especially show a significant increase in fatigue and stress symptoms, widening the gender gap in mental health. Young women in suburban areas are particularly vulnerable, facing exclusion, a lack of belonging, and meaningful leisure activities.

Solution

Healthy Women provides a safe network for women aged 13–30 in suburban areas, offering physical and social activities. All based on the belief that knowledge, a sense of belonging, and meaningful leisure time is key to physical and mental wellbeing.

Contact

www.healthywomen.nu



Sweden



Stiftelsen 1825

Caroline Stiernstedt Sahlborn

Problem

In Sweden, 70% of young adults (18–29) have experienced mental health issues, but half have never sought help. The main causes are stress (linked to work or studies), anxiety, depression, and loneliness. Stigma remains a barrier: 4 in 10 avoid seeking help due to fear of judgment. Those who do seek help face obstacles: 40% experience long waiting times, 1 in 4 find care too expensive, and 74% feel misunderstood or not taken seriously by health care professionals.

Solution

1825 promotes mental health for young adults across Sweden by providing support and treatment lacking in the public welfare system during the transition to adulthood. They also contribute to increased knowledge and engagement for the entire target group. Providing personalized support and treatment tailored to each individual's needs and preferences, 1825 ensures youth are matched with qualified counselors from diverse backgrounds, training, and therapeutic approaches. Thanks to dedicated volunteer counselors, emerging adults have access to high-quality, affordable treatment.

Contact

www.1825.nu



Sweden



Tilia

Annso Blixt

Problem

Emerging adults struggle with a lack of mental health support, even though they face some of the greatest challenges to their wellbeing. Research shows that those dealing with mental health issues without a formal diagnosis often receive little societal help, while suicide rates among emerging adults aged 20-29 continue to rise.

Solution

A dedicated helpline for emerging adults, where they can freely discuss any concerns. While they are otherwise often overlooked by existing systems, this service ensures emerging adults are truly seen, heard, and supported.

Contact

www.teamtilia.se



Sweden



Tjejzonen

Erika Steorn

Problem

Young women experience mental health issues at higher rates than other groups but receive the least societal support, risking exclusion during adolescence. Reports show rising anxiety, depression, and self-harm among young women in Sweden, with higher antidepressant use and suicide attempts as compared to boys. This crisis not only affects individuals but also limits women's participation in society.

Solution

A free, online, and anonymous helpline service for young women, offering easy access to preventive support.

Contact

www.tjejzonen.se



Sweden



Right By Me

Anna Lind

Problem

Emerging adults with foreign backgrounds in Sweden face social and economic exclusion, leading to mental health challenges.

This group, including newly arrived youth, unaccompanied minors, and second-generation immigrants, reports higher rates of mental distress due to displacement, isolation, and limited social connections. They also encounter significant barriers to employment and lack representation in key societal discussions, further impacting their wellbeing.

Solution

Right By Me empowers emerging adults by creating safe social spaces, promoting physical activities, and offering a capacity-building program to boost employability, youth leadership, and participation in societal discussions. It also fosters cross-sector partnerships to expand opportunities for the target group.

Contact

www.rightbyme.se



Sweden



Stiftelsen Fryshuset & ICibility

Jan-Ulf Söderberg and Sacharias Wirén

Problem

Over the past two decades, stress and mental health struggles among youth aged 16–29, have doubled. Emerging adults today navigate cultural diversity, social polarization, segregation, and the influence of social media, often leading to stress, low self-esteem, mental health challenges, and feelings of exclusion.

Solution

ICbility, an Integrative Complexity-based intervention for emerging adults in Sweden, aims to enhance resilience, SEL (Social-Emotional Learning) competencies, and IC self-regulation capacities to promote mental health.

Contact

www.fryshuset.se/verksamhet/ic-sverige



Sweden



Insight Gap

Joakim Blomqvist and Krister Ruth

Problem

Mental health issues are a significant concern among emerging adults. Still, mental health remains a highly stigmatized topic in society, with studies showing that the barriers to discussing and seeking help remains high.

Solution

An award-winning digital education program that is quick to distribute, easy to access, and highly effective in simplifying mental health concepts. It enhances knowledge, raises awareness, combats stigma, and strengthens resilience.

Contact

www.insightgap.com

THANK YOU!