



STIME

Easily Accessible Services and Cross-sector Collaboration

Malene Hein Damgaard, Chief Psychologist, Frederiksberg Municipality

Katrine Bærentzen, Head of Unit, Child and Adolescent Mental Health Center, Capital
Region of Denmark

February 2025



From Project to National Service



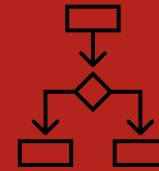
2018

National project funding for regional development.
9 mio. EUR for The Capital Region



2018-2022

STIME is developed to accomodate the need for preventing and treat early signs of mental illness in the Capital Region



2022 →

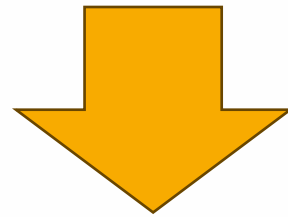
STIME is a permanent Service in the Capital Region and is currently being implemented in all five regions and 92 municipalities.

Developing Manualized Treatment

- Framework

Laboratory research → Action learning

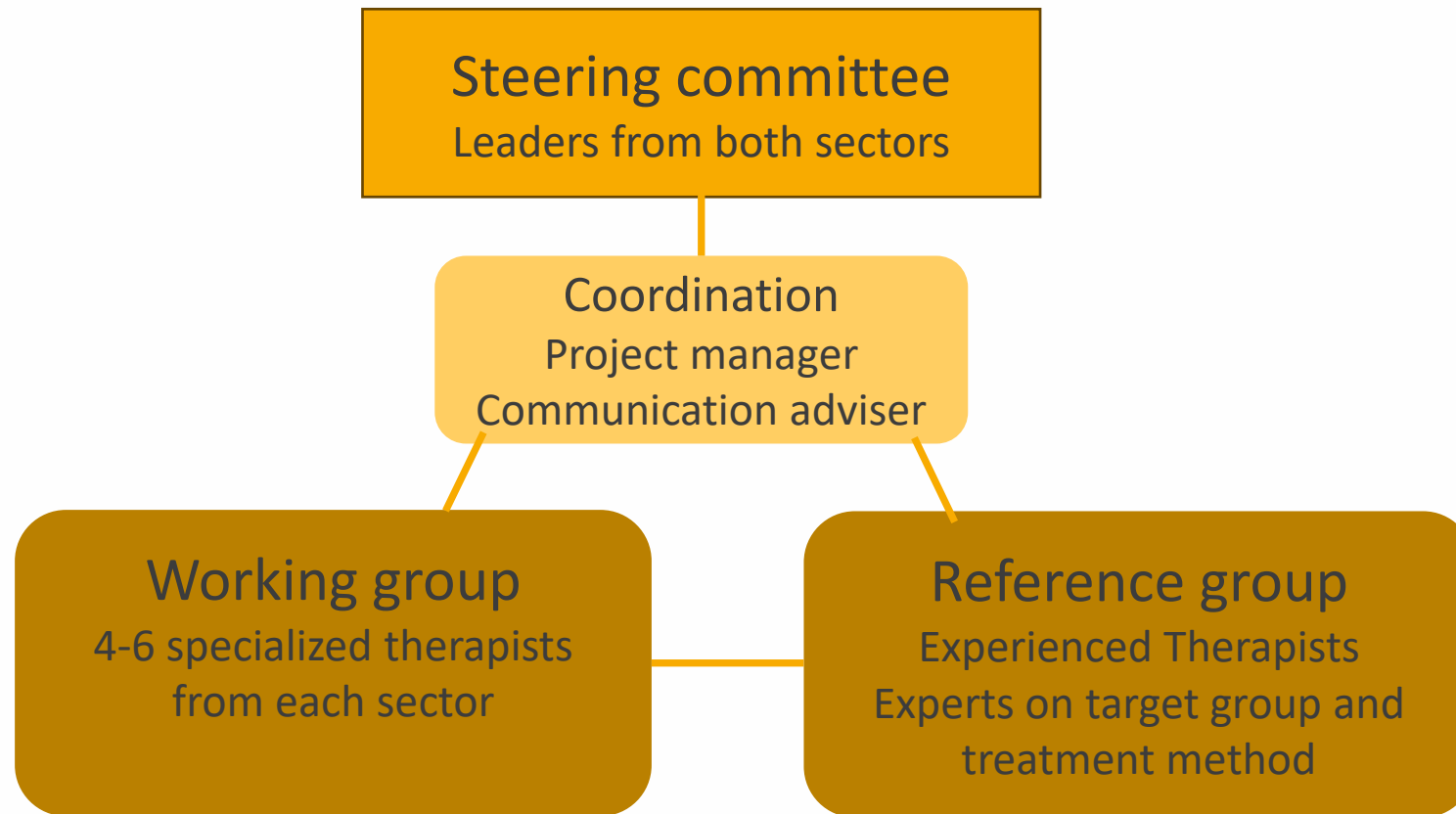
- Development of methods and materials from evidence-based building blocks
- Systematic revision based on experiences from treatment and implementation



- Sustainable set-up within the practical framework in both sectors
- Operational and adaptable to municipal practice across the country

Developing Manualized Treatment

- Framework



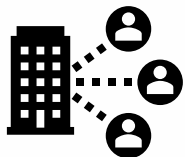
A Rough Sketch of the Developing Process



Year 1: Development

- Defining target group
- Selecting methods/building blocks
- Writing the manual
- Selecting assessment tools
- Adaptation of database

- Writing guidelines for schools
- Education and training concept
- Teaching materials
- Information materials
- Layout
- Education and training plan



Year 2: Testing


- First round of training of therapists
- 1 year of supervision
- Data registration (pre/post measuring)



Year 3: adjustment and scale-up

- Review and adjust of manual, materials and training program
- Open up to new municipalities


Evidence-based Building Blocks



WHEN FEELINGS OF
ANXIOUSNESS OR
DISTRESS BECOME A
PROBLEM

The unified protocols for the treatment of emotional disorders in children and adolescents
(Jill Ehrenreich-May 2018)


The modal model of emotions (Gross og Thompson 2007)



WHEN DIFFICULT
FEELINGS LEAD TO
SELF-HARM


ERITA: Emotions Regulation Individual Therapy for Adolescents (Johan Bjurebjerg)

ERGT – Emotions Regulation Group Therapy (Kim Gratz 2009)



WHEN THOUGHTS
OF BODY AND FOOD
BECOME
OVERWHELMING

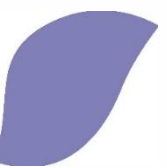
Cognitive Behavior Therapy and Eating Disorders (Fairburn, Cooper & Shafran 2003)



WHEN RESTLESSNESS,
ATTENTIVENESS OR
IMPULSIVITY IS A
CHALLENGE

New Forest Parenting Programme (NFPP) (Sonuga-Barke, David Daly et.al 2001-2021)

Få styr på angsten (get anxiety under control) (Center for Angst – University of Copenhagen)



WHEN OBSESSIVE
THOUGHTS AND
BEHAVIORS TAKE
OVER

NordLOTS – The Nordic Long-term OCD Treatment Study (multicenter i Norway, Sweden and Denmark 2012-)

TECTO - Treatment Effects of Cognitive Therapy in Adolescents with OCD – (Danish RCT study 2018-2022)

Validated Assessment Tools

Name	Use
SDQ (Strength and Difficulties Questionnaire)	Focuses on strengths and difficulties in children aged 2-17 years. Available in a version for parents and children from 11 years.
ADHD-RS (Attention Deficit/Hyperactive Disorder-Rating Scale)	Rates severity of ADHD symptoms at home and in daycare/school. Available in toddler and schoolchild version.
RCADS (Revised Child Anxiety and Depression Scale)	Measures anxiety and depression symptoms in children aged 7-17 years. Available in a version for both young people and parents.
DERS-16 (Difficulties in Emotion Regulation Scale)	16 questions that measure difficulties in relation to being able to regulate emotions. To be filled in by the young person.
EAT-26 (Eating Attitudes Test)	26 questions about attitudes, feelings and behaviour related to eating in relation to eating to uncover the risk of eating disorders. To be filled in by the young person.

STIME Education and Training Programme

The Parent Pilots

Day 1: Introduction to STIME, BUL and questionnaires, visitation and psychopathology

Day 2: Teaching in the program

Day 3: Teaching in the guides to the learning environment and networking

In continuation of and as part of the education, four supervisions and one completed course are followed.

Other four treatment tracks:

Block 1 (2 days): Introduction to STIME, BUL and questionnaires, visitation, psychopathology and suicide screening

Block 2 (2 days): CBT education and (2nd and 3rd wave) + involvement of parents in the treatment

Block 3 (2 days): training in each of the manuals

Block 4 (1 day): training in the guides to the learning environment and network around the child

In continuation of and as part of the training, 10 group supervisions are followed, requiring four cases during the first year.



Manualized Therapy in STIME



WHEN FEELINGS OF ANXIOUSNESS OR DISTRESS BECOME A PROBLEM

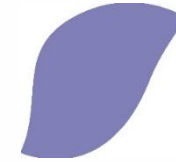
- ✓ 13-17 years: 6-9 modules (1-2 sessions per module)
- ✓ Support within learning environment



WHEN THOUGHTS OF BODY AND FOOD BECOME OVERWHELMING

- ✓ 10-17 years: 6-10 sessions

- ✓ Support within learning environment



WHEN OBSESSIVE THOUGHTS AND BEHAVIORS TAKE OVER

- ✓ 6-17 years: 8 sessions

- ✓ Support within learning environment



WHEN DIFFICULT FEELINGS LEAD TO SELF-HARM

- ✓ 12-17 years: 9 sessions
- ✓ Support within learning environment



WHEN RESTLESSNESS, ATTENTIVENESS OR IMPULSIVITY IS A CHALLENGE

- ✓ 3-10 years: 'The parent pilots' - 4 workshops
- ✓ Support within learning environment

Case: When feelings of anxiousness or distress becomes a problem



Maria – 15 years

- Hard getting to school and high school absence.
- School and parents contact PPR, because Maria has a very difficult time. PPR psychologist refers to STIME.
- At home, Maria withdraws more and more from contact and prefers to stay in her room.
- She's not seeing her friends any longer and appears sad and despondent.
- She's basically happy with school and the class but finds it difficult to say anything out loud in class and in larger groups and often stays at home when she has to speak in front of the class.

Case: When feelings of anxiousness or distress becomes a problem



Intervention

Visitation

- The family contact STIME
- Maria and her parents answer the questionnaire
- Preliminary interview / visitation interview

Intervention in STIME

- STIME intervention: 8 sessions
- Teachers are offered guidance on how to support the process.
- Network meeting

Intervention in PPR

- Participate in network meeting and guidance on how to support Maria
- When the STIME interventions has finished, PPR psychologist continues to guide the teachers.