

# MENTAL HEALTH AMONG YOUTH IN GREENLAND

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WHO IS RESPONSIBLE? WHAT IS BEING DONE?



norden

Nordic Centre for  
Welfare and Social Issues



**AUTHOR: Sidsel Karsberg, PhD Student, Institute for Psychology,  
University of Southern Denmark**

# FOREWORD

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## **Youth in the Nordic Region - Mental Health, Work and Education**

All children and young people are a huge resource. We have never had such well-educated and competent youngsters in the Nordic countries as we do today. At the same time there are all the more young persons who claim to be suffering from mental illness, and young persons who, for various reasons, risk ending up in vulnerable situations. Growing mental illness amongst young people is one of the most serious public health challenges facing our Nordic society.

The project Youth in the Nordic Region focuses on young persons who suffer from or are at risk of suffering from mental illness, as well as their situation at school and their later transition to work and providing for themselves. A further important topic of the project is early retirement and retirement on mental health grounds amongst young adults.

As part of the project we have produced reports which shed light on various aspects of these areas. The report you are holding in front of you aims to give a quick, clear overview of who does what in Greenland in matters concerning young persons who suffer from or risk suffering from mental illness, and end up in long-term unemployment and with no meaningful purpose in life.

We have produced summaries of all the Nordic countries plus Greenland, the Faroe Islands and Åland. All summaries can be ordered or downloaded from [www.nordicwelfare.org](http://www.nordicwelfare.org). We would like to point out to our readers that the summaries do not include everything that is done and that important and useful contributions may be lacking.

The Nordic countries have a lot of challenges in common; one of these is to ensure that all children and young persons enjoy good living conditions. We also know that particular efforts and investments are required for a heterogenous group of young people who are at risk of exclusion owing to mental illness, dropping out of their studies, long-term unemployment and other factors.

We can learn a lot from each other's different solutions and contributions. So let yourself be inspired!





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# **VULNERABLE YOUNG PEOPLE IN GREENLAND**

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Greenland has the youngest population of the Nordic countries (Nomesko, 2013). In 2011, the youth population (15 to 24 years) of Greenland was 8979 people, which is approximately 40% of the population (MIPI, 2012). Of these, 7638 lived in cities while 1341 lived in small settlements. Around 10% of the entire Greenlandic youth population emigrate to Denmark to study or to work (MIPI, 2012).

In terms of the general population, Greenland is small with around 57,000 inhabitants. Nuuk, the capital, is by far the largest city, with around 17,000 inhabitants (Grønlands Statistik, 2014). Approximately 89% of the Greenlandic population is native (Inuit), while the remaining 11% is primarily Danish (Hamilton & Rasmussen, 2009). Most of the population lives in small cities along the west coast. Around one-fifth of the population lives in smaller settlements often with no more than 200 inhabitants, where access to healthcare, electricity, education, everyday goods and other services can be very limited or even non-existent (Grønlands statistik, 2014b). Average life expectancy in Greenland is 68.6 years for men and 74.0 years for women (Nomesko, 2013). This is markedly lower than in other Nordic countries. One of the explanations may be the very high prevalence of unnatural deaths, such as killings, suicides and accidents (Bjerregaard, 2004).

Harsh weather conditions, the remote location of the island, and the necessity to import goods all contribute to a high cost of living in Greenland compared to other Nordic countries. Limited transportation options and higher import costs make living costs in the smaller cities greater than in the larger cities. When taking the unequal economic conditions into consideration, it is to no surprise that poverty is least prevalent in Nuuk and most prevalent in the smaller settlements.

There is no official or national data on the numbers of young people in Greenland who have mental health problems or are at-risk of developing them. Very little research or information is available on this group. To get an overview of the current situation, it is therefore necessary to look at other relevant data on the physical, psychological, behavioural and environmental factors, which have been found to correlate with vulnerability in terms of marginalisation and poor mental health among young adults.

## **Mental health**

Precursors of future mental health problems have been examined in both the child and adolescent Greenlandic population. In a national study, 78% of Greenlandic adolescent boys and 93% of girls reported at least one mental health problem such as anxiety, nervousness, weak appetite, and nightmares (Bjerregaard & Pedersen, 2012). This rate is higher than the prevalence shown in the corresponding Danish study from 2008. The large international HBSC study from 2009/2010 included an assessment of life satisfaction. Among Greenlandic children aged 11, life satisfaction was average when compared to other countries, but at the age of 15 the rate was lower when compared to the other countries (Currie et al., 2012).

**Self-rated mental health:** In the ICSRA survey (Gudmundsdóttir, 2010) the majority (74%) of Greenlandic adolescents reported very good or good mental health, 22% reported reasonable mental health, and 4% reported poor mental health. However, the ratings of the girls were significantly lower than the boys. Compared to the rates from other Nordic countries, the Greenlandic rates were low.

**Self-injury:** In a national survey, one in every four young people (23%) in Greenland reported deliberate self-harm (Pedersen & Bjerregaard, 2012). No gender differences were shown.

**Suicides, suicide attempts and suicidal ideation:** The rate of committed suicides in Greenland is one of the highest in the world per capita. In 2010, 61 people committed suicide in Greenland (Grønlands statistik, 2013). When this is converted into a percent-

age of the population, this is approximately 9 times higher than the Danish rate and five times higher than the Finnish rate in the same year (Nomesko, 2013). The prevalence is particularly high among young people aged 20-24. When compared to the much larger group of people aged 25- 65, the prevalence of committed suicides is three times higher among young people aged 20-24 (Nomesko, 2013). Compared to the rates from the other Nordic countries, the extremely high prevalence of suicides in young people is a unique pattern. Similar to data from other Nordic countries, the prevalence of suicide is much higher in males than in females in Greenland (Grønlands statistik, 2013).

The rates of attempted suicides of young people in Greenland have been reported to be equally high, with up to every fifth young person and every fourth young girl having attempted suicide (Pedersen & Bjerregaard, 2012; Karsberg et al., 2012). In contrast to committed suicides, attempted suicides are reported to be significantly more prevalent among young females.

In a comparative study about suicidal ideation in the Arctic, the rates in Greenland were found to be very high when compared to the other states in the study, which included Alaska, Sweden and Norway. Within the youth population aged 15-34 in Greenland, 10% of males and 19% of females reported having suicidal thoughts in the previous year (Broderstad et al., 2011). In a large national report from 2011 (Pedersen & Bjerregaard, 2012) the high prevalence of suicidal ideation was confirmed. Within their lifetime 31% of girls and 15% of boys had seriously thought about committing suicide, while 21% of girls and 5.6% of boys had seriously thought about committing suicide in the previous year. The most commonly reported reasons for suicidal thoughts and/or attempts among young Greenlandic people include feeling lonely, heartbreak, problems in the family such as alcohol abuse, violence and sexual abuse, and grief for close relatives who have committed suicide (Pedersen & Bjerregaard, 2012).





## **Familial/environmental influences**

**Sexual abuse:** Numerous Greenlandic studies have found an exceptionally high lifetime prevalence of sexual abuse, ranging from 4.4% to 16% among men and 14.6% to 43% among women (Curtis et. al, 2002; Bjerregaard & Dahl-Petersen, 2008; Baviskar & Christensen, 2010; Karsberg, 2012, Pedersen & Bjerregaard, 2012). Studies that focus on sexual abuse in childhood show that the majority of all sexual abuse in Greenland takes place in childhood. In studies only involving young people, the prevalence of childhood sexual abuse was estimated to lie between 4.4% and 9% among boys and between 14% and 28% among girls (Karsberg et al., 2012; Curtis et al., 2006). One of the most recent studies from 2011 concludes that the prevalence of sexual abuse has not fallen since 2004 (Pedersen & Bjerregaard, 2012).

**Violence/Physical abuse:** Violence is currently a serious health issue in Greenland. Even though the number of cases involving violence has been decreasing since 2008, the number of cases per inhabitant is still very high, for example five times higher than in Denmark (Politiet i Grønland, 2011). Young people in particular are exposed to violence (ibid.). In the national survey from 2011, (Pedersen & Bjerregaard, 2012) one out of every ten young Greenlandic students reported having witnessed their mother being exposed to crude violence (such as hitting, kicking, choking, etc.) within the previous year. Also, approximately one out of ten students was exposed to crude violence from one parent. One out of six students had been exposed to some kind of violence (from mild to crude violence) from one parent at some point. The violence does not just occur within families; one in four students reported being exposed to violence outside the family. No gender differences in exposure to violence were reported.

**Alcohol abuse in the family:** Alcohol and alcohol-related problems have been an increasing problem in the 20th and 21st centuries in Greenland. Approximately 37% of young Greenlanders report alcohol abuse in their immediate family, and approximately 20% report alcohol abuse among the parents (Pedersen & Bjerregaard, 2012). A strong link between alcohol abuse and other intra-familial issues has been confirmed in numerous studies; young Greenlandic people who report alcohol problems in their immediate family are overrepresented in the group that experience violence, poverty,

neglect and sexual abuse in the familial context (Bjerregaard & Dahl-Petersen, 2008; Pedersen & Bjerregaard, 2012).

**Poverty:** In a report from 2007, it was estimated that 18% of all Greenlandic children lived in relative poverty and that approximately 40% of all Greenlandic children lived in a household that had received financial state benefits in the previous year (Schnohr, Nielsen & Wulff, 2007).

**Moving to a new societal context:** Most Greenlanders moving to Denmark will adapt successfully into the Danish society, but some of them will encounter a more problematic life situation and need help from the Danish social services (Rådet for Socialt Udsatte, 2014). Social workers and other support services find that their general approach and working methods don't work as well with young Greenlanders as for other target groups. The report "I bruger alt for mange ord!" (Socialstyrelsen, 2016) investigates what goes wrong in the encounter between Danish social workers and young Greenlanders, and how things can be done differently. The professionals are recommended to pay extra attention to their written and oral language, as many Greenlanders don't fully understand Danish at the level expected from them. Cultural differences further complicate the relation between young Greenlanders and the social workers, and need to be taken into consideration.

## **Physical health**

While not necessarily indicative of poor mental health, physical health problems can be related to mental health issues, and certain health issues and health behaviours may be a result of mental health issues. The following section contains information on the prevalence of selected physical health problems that may have a bearing on the mental health of young people in Greenland.

**Self-reported health:** Self-reported health in Greenlandic children and adolescents has recently been examined in three large studies (Currie, 2012; Gudmundsdóttir, 2010; Pedersen & Bjerregaard, 2012). Overall, self-reported health rates in children and adolescents in Greenland are low when compared to children and adolescents from other countries (Currie, 2012; Gudmundsdóttir, 2010). Between 20% and 30% of Greenlandic adolescents rate their health as being “fair” or “poor” as opposed to good or very good. Across all studies females reported worse health than males and, in a national study from 2011, 44% of females only reported fair or poor health.

**Alcohol abuse:** In the past, surveys have indicated that Greenlandic children and adolescents had some of the highest rates of binge drinking (Currie et al., 2004; Hibell et al., 2003). Some recent studies have suggested that alcohol intake is falling (Nielsen & Schnohr, 2008). However, in the large HBSC survey about wellbeing among Greenlandic adolescents from 2011, Greenlandic adolescents still stood out when it came to drinking habits (Currie et al., 2012). Adolescents try alcohol and try being drunk at an earlier age in Greenland than in other countries, but in terms of weekly intake the Greenlandic rates are very low. It has been suggested that one possible explanation for this low weekly rate is that the Greenlandic population generally drink more episodically than in other countries – and go on day-long binges at varying intervals (Bjerregaard, 2004). These binges are more damaging than non-binge drinking in terms of physical health and accidents. The number of alcohol-related accidents is very high in Greenland, and they are thought to play a role in the high suicide rate in the Greenlandic population. Consequently, although weekly intake of alcohol is low among Greenlandic adolescents, hidden cultural circumstances relating to alcohol intake may still have a very negative impact on the welfare of young Greenlandic people.

**Sexually transmitted diseases:** The rate of STDs in Greenland is high compared to the other Nordic countries. From 2000 to 2011 the rates of gonorrhoea, syphilis and chlamydia were more than ten times higher than all other Nordic countries respectively (Nomesko, 2013).



**Obesity:** The prevalence of overweight and obesity among young people and adults in Greenland is increasing. In a large national survey of young Greenlandic people from 2011, 20% of all girls and boys aged 17-19 were overweight, while 7.4% of girls and 6.5% of boys were obese (Pedersen & Bjerregaard, 2012). When compared to adolescents from other countries however, the rate of obesity and self-assessed obesity among Greenlandic adolescents is average (Currie et al., 2012).

**Induced abortions:** Greenland has the highest rate of induced abortions of all the Nordic countries, and one of the highest rates in the world. From 2000 to 2011 around half of all pregnancies were terminated by induced abortion. From 2007 to 2011 approximately one in every five Greenlandic women below the age of 24 underwent an induced abortion (Nomesko, 2013).

### **Education/employment**

**School satisfaction and bullying:** According to the HBSC study from 2009/2010, Greenlandic students have one of the highest rates of school satisfaction compared to 23 other countries, both among 11-year-olds and 15-year olds (Currie et al., 2012). Overall, Greenlandic students do not particularly stand out when it comes to school satisfaction in the ICSRA study, but a relatively large proportion of Greenlandic boys reported that they wish to change school, that they feel bullied at school, that they feel bad at breaktimes, that they don't get along with the teachers, and that they feel bad at school in general (Gudmundsdóttir, 2010).

**Level of education:** Previously, the level of education achieved and the percentage of educated people in Greenland had been low compared to other Nordic countries (Norden, 2014). However, since 2005, the number of active students in Greenland has increased by approximately 60%, and the number of students who complete their education has increased by approximately 65% (Uddannelsesstrategien, 2014). In 2013/2014, the overall percentage of people taking educational courses in Greenland (36.5%) was comparable to other Nordic countries. However the percentage of people who studied at tertiary level such as a university degree (9.3%), was still low compared to other Nordic countries (Norden, 2014). The only Greenlandic university is in Nuuk



and this university has a limited range of courses. Because of these limitations, many students move abroad (primarily to Denmark) to study. Because moving to Nuuk, or to another country, involves financial strain and social upheaval, it is a fair assumption that the educational limitations in Greenland may prevent young people, who are otherwise capable of studying further, from studying at higher education level.

Among the Greenlandic population aged 25-74, more men have achieved some level of education than women but more women than men achieve the highest level of education. In 2013, 70 percent of Greenlandic graduates from a tertiary level educational programme were women (Norden, 2014).

The drop-out rate in educational institutions in Greenland is very high. In 2012 the drop-out rate for all educational institutions was 24.5% (Uddannelsesstrategien, 2014). This was the highest figure for more than ten years. There are some clear culture-specific reasons for the high drop-out rate, including issues with being away from family/friends, language difficulties (Danish is the primary taught language in secondary and tertiary level educations), financial issues (the family has to pay for transportation and housing), and problems with integration in an environment that may be very different from the environment in which the student grew up.

**Unemployment:** In 2013, the unemployment rate in Greenland (9.8%) was higher than in the other Nordic countries (3.6-8.3%), although lower than the average rate of unemployment across all 27 EU countries (10.9%). However, the unemployment rate for young people aged 15-24 in Greenland was lower than in Sweden, Finland and the 27 EU countries (Norden, 2014).

In sum, it is clear that many young Greenlandic people are struggling with serious issues that may have a negative impact on their future physical and mental health. In comparison to other Nordic countries, young Greenlanders have high rates of committed suicides, attempted suicides, suicidal thoughts, sexual abuse, self-injury, violence (both within and outside the family), alcohol abuse in the family, drop-out from education, a range of sexually transmitted diseases, induced abortions, poverty, and low life satisfaction (among 15-year-olds).



## **WHO IS RESPONSIBLE AND HOW IS THE RESPONSIBILITY DISTRIBUTED?**

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The overall political responsibility for the welfare of young people in Greenland lies with the Greenland government, “Naalakkersuisut”, and the four Greenlandic municipalities, “Kujalleq”, “Sermersooq”, “Qeqqata” and “Qaasuitsup”.

Within the Greenlandic government, issues regarding mental health and welfare among young people are divided between four different ministries. The Ministry of Health deals with everything related to both physical and mental health, e.g. national prevention, medical/psychological treatment and hospitalisation. The Ministry of Family, Gender Equality and Social Affairs deals with social issues such as interventions in relation to vulnerable children/young people and families. The ministry also runs institutions where children/young people are placed away from home. The Ministry of Education, Culture, Research and Church deals with educational issues, such as supportive interventions and action plans in relation to young people at risk of dropping-out/not completing their education. Finally, the Ministry of Industry, Labour and Trade deals with issues related to unemployment, and currently has a specific focus on young uneducated people below the age of 29.

The four Greenlandic municipalities have different departments or committees, some of which are relevant in the context of young people’s mental health. The Greenlandic national association of municipalities “KANUKOKA” is responsible for establishing the overall guidelines and goals of the municipalities. In 2005, a review of the political strategies aimed at children and adolescents in the municipalities was published by MIPI (the Research Centre for Children and Adolescents) (Dahler-Larsen, 2005). Among a range of issues, the review highlighted that most strategies were only aimed at younger children, that some municipalities had very brief or intangible strategies for children and adolescents, that there was very little focus on education, and that the

goals and strategies varied considerably from one municipality to another. It is now ten years since the report was published, so circumstances may have changed but no follow-up report has been issued.

### **Funding of initiatives**

Greenland's four municipalities fund almost 50% of all social interventions involving children and adolescents (Christensen & Hansen, 2011). One tendency is that the municipalities govern the larger initiatives centralised in institutions such as schools or hospitals, while the central authorities govern the more general informational initiatives. The Ministry of Family, Gender Equality and Social Affairs fund around 20% of social interventions and 26% are funded by independent (typically Danish) foundations or other NGOs (Christensen & Hansen, 2011). Many social interventions are funded by a combination of institutions

### **Public agencies**

To ensure specialised and centralised expertise, a range of national organisations have been set up with full or partial financial support from the Greenlandic Government. Most of these institutions focus on child and adolescent welfare and their roles and aims are outlined below. However, none focuses specifically on the welfare of young people older than 18 and there are no Greenlandic public agencies specialising in issues relating to vulnerable young people aged 18 to 29.

#### **MIO (National Advocacy for Children's Rights):**

MIO is a public agency comprising a children's ombudsman and a children's counselor, and is a children's rights institution. The goal of MIO is to ensure and strengthen the conditions for children and adolescents using the UN children's convention as a benchmark. MIO is run and financially supported by Nalakkersuisut and the Ministry of Family, Gender Equality and Social Affairs

**MIPI (Research Centre for Children and Adolescents):**

MIPI is a research centre that focuses on the living conditions of children and adolescents. MIPI collects and systematises knowledge on issues related to family, social status, health, school, and living standards. MIPI arranges public meetings and debates about relevant issues concerning children and adolescents. In 2012 MIPI merged with MIO, and is now a sub-department of MIO.

**NAKUUSA**

NAKUUSA was founded in 2011 by the Greenlandic Government, and is run under the auspices of the Ministry of Family, Gender Equality and Social Affairs and UNICEF. The overall objective is to create the best possible opportunities for the healthy development of Greenlandic children. The project is planned to run over a period of 5 years.

**PAARISA**

PAARISA is a sub-department of the Ministry of Health. PAARISA organises preventive interventions in relation to health promotion. The target groups are children, young people and families. The main goal is to increase public knowledge about health so that individual family members may make sound decisions based on their own knowledge. PAARISA primarily uses information and counselling as means to promote health. For example, PAARISA publishes two health magazines, INUK and SILA, which focus on wellbeing and lifestyle. PAARISA also develops health strategies for the government and serves as an external consultant for the municipalities and relevant governmental institutions such as hospitals and healthcare centres. PAARISA is also responsible for the national children's helpline, 134.





## **NGOs**

Several non-governmental organisations, which focus on child and adolescent well-being, also operate in Greenland.

### **FGB/Foreningen Grønlandske Børn (Association of Greenlandic Children)**

FGB was founded in 1924 with the main objective of ensuring that all Greenlandic children and adolescents get a dignified life, with the opportunity for normal and healthy development. FGB is situated in several Greenlandic and Danish cities. FGB initiates projects that strengthen the resources for and abilities of children and adolescents. The primary focus is on vulnerable children and adolescents.

### **MIBB (Better lives for children)**

MIBB was founded in 2007 and is situated in Nuuk. The organisation's primary objective is to ensure that children's rights in Greenland comply with the UN children's convention. MIBB focuses on long-term interventions such as raising public awareness of children's rights and communicating knowledge about the negative impact of experiences such as child sexual abuse, violence and alcohol abuse in families.

### **Nanu børn (Nanu Children)**

Nanu's overall objective is to improve conditions for children, adolescents and their families in Greenland. Nanu collaborates with national and international organisations, and partners who wish to support their objective. Nanu initiates its own projects and activities, but also supports projects initiated by the government or other organisations.



## NATIONAL INITIATIVES AND PROJECTS

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The four government ministries whose services and policies have an impact on vulnerable children and young people are all involved in national initiatives addressing various aspects of children and young people's physical and mental health and well being. Two NGOs are also managing smaller-scale initiatives that are of particular relevance.

### **Selected relevant political initiatives**

#### **The Ministry of Family, Gender Equality and Social Affairs**

The Ministry of Family, Gender Equality and Social Affairs has developed a strategy and action plan against violence, to be implemented between 2014-2017. The main project resulting from the action plan is named "Break the silence, stop the violence" and includes information campaigns, a national webpage about violence, closer interdisciplinary collaboration between professionals, more direct contact with victims of violence in public institutions and the municipalities, and educational material. The project has not yet been evaluated.

In addition, the Ministry of Family, Gender Equality and Social Affairs supports two other relevant initiatives: the SAAFIK national counselling and knowledge centre for sexually abused children and the Skolefe-ordningen (the School Fairy system). The purpose of SAAFIK is to evaluate, assess, process and follow-up cases of sexual abuse among children and adolescents throughout Greenland. Medical, psychological, legal and social support is provided to children and adolescents. SAAFIK was set up in 2011, evaluated in 2013, and is still running<sup>1</sup>.

The School Fairy system is a pilot project aimed at children and adolescents who need social support and further attention. The project was initiated because research from the schools implied that 15% of the girls and 24% of the boys had serious difficulties. A School Fairy is a person who reaches out and is available for all students at the school.

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<sup>1</sup> [www.saaffik.gl](http://www.saaffik.gl)

The School Fairy is a caregiver who can give children and adolescents support through conversation and activities. The School Fairy reports concerns and observations to the school when he or she deems that special interventions are required. The School Fairy system ran from 2012 to 2015, and the plan is to continue the project with full funding by the municipalities<sup>2</sup>.

### **Ministry of Health**

The Ministry of Health's National Strategy for Health 2014-2017 does not particularly focus on youth issues, but emphasises that primary prevention is essential for improving living conditions for children and adolescents. The National Strategy for Health highlights certain specific interventions, such as "The Healthy Sex life", "Early Intervention", "The Doll Project" and "Ready for a Baby". These four projects are part of the PAARISA initiatives, and comprise interventions aimed at young or vulnerable individuals, including school students, new families, and pregnant women. The aim of these nationally implemented interventions is to reduce the number of children who are exposed to neglect and abuse, and to prevent negative health patterns in children and adolescents. Many of the projects include school-based interventions that are often incorporated in the sex education curriculum in compulsory schools. Other projects such as "Early Intervention" are locally based in centres where education, information and counselling is provided to individuals or families who are deemed to need support. An evaluation of Early Intervention was carried out in 2010<sup>3</sup> and an evaluation of The Doll Project was carried out in 2013<sup>4</sup>. Further development of these programmes is vital to future health development in Greenland. Another conclusion is that new action plans regarding unwanted pregnancies, sexually transmitted diseases, and induced pregnancies are warranted.

In addition, the Ministry of Health has a national strategy for suicide prevention in Greenland for 2013-2019. The aims of the national strategy are to reduce the number

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<sup>2</sup> [www.naalakkersuisut.gl](http://www.naalakkersuisut.gl)

<sup>3</sup> [www.PAARISA.gl](http://www.PAARISA.gl)

<sup>4</sup> [http://pure.au.dk/portal/files/53329513/Rapport\\_Evaluering\\_Dukkeprojekt\\_Gr\\_nland.pdf](http://pure.au.dk/portal/files/53329513/Rapport_Evaluering_Dukkeprojekt_Gr_nland.pdf)



of suicides and suicide attempts, to strengthen the interdisciplinary cooperation in prevention of suicides, to enhance public awareness on mental health and suicide prevention, and to establish systematic registration of risk groups and risk behaviour. Young people are a specific focus group in this context. The strategy includes research, development and implementation of suicide prevention programmes in relevant educational institutions, suicide prevention through screening and treatment in the health care system, and courses and further training for the professionals concerned.

### **Ministry of Education, Culture, Research and Church**

The Ministry of Education, Culture, Research and Church has published a National Strategy for Education 2014. The Strategy for Education was originally initiated in 2005. The overall goal of the strategy is that 70% of all students who complete compulsory school should then go on to complete upper secondary education. Focal areas in the 2014 strategy include strengthening compulsory schooling, lowering the age of students starting education, improving the skills of personnel, reducing drop-out rates, improving guidance and counselling for students (including therapy), improving students' information and communication technology skills, and evaluation of intervention effects. There has been a remarkable rise in the number of active students and students completing their education in Greenland as a result of interventions related to the strategy. As part of the new national strategy for education, a national centre for student counselling has been set up in Nuuk, and the centre now trains school counselors all over Greenland<sup>5</sup>.

### **Ministry of Industry, Labour and Trade**

The Ministry of Industry, Labour and Trade has established an action plan for the unemployed 2012-2015. The action plan primarily consists of intervention courses of up to two years duration. The intervention course consists of job and/or education counselling, skill improvement seminars, youth projects and a one-year course (Piareersarfik) with teaching and tests in general school subjects. Unemployed citizens below

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<sup>5</sup> [www.vejledning.gl](http://www.vejledning.gl)

the age of 29 and citizens who live in the smaller settlements are a particular focus group for the project.

Piareersarfik is a national initiative that focuses on upgrading educational qualifications among Greenlandic citizens. The main focus groups are young people who left compulsory school with no or very low grades, and others who want to improve their educational qualifications. There is a Piareersarfik centre in all 17 cities in Greenland. The primary function of Piareersarfik is to guide and advise citizens who contact the centre. Piareersarfik offers education that improves the educational level as well as personal skills. The primary goal of the intervention is to give the participants a stronger educational and personal base from which to continue to further education or to obtain employment.

## **NGO intervention projects**

### **TIMI ASIMI**

The TIMI ASIMI project<sup>6</sup> was founded in 2011 and is based in Nuuk. TIMI ASIMI is an active, action- and outdoor-based intervention for at-risk adolescents aged 13 to 21. All employees at TIMI ASIMI are trained in outdoor activities such as fitness, trekking, mountain running, abseiling, and geocaching. The 12-week programme includes health education, various demanding physical activities and field trips, courses (medical, first aid, life-saving), community service and educational counselling. Local entrepreneurs and organisations primarily fund the TIMI ASIMI project.

### **Sapiik**

Sapiik<sup>7</sup> is a youth-to-youth mentoring project, which was founded in 2009. The project is a part of the FGB (Association of Greenlandic Children) projects. Sapiik means 'brave' and the intervention seeks to inspire and motivate students who are considering dropping out of school, or who have difficulties in school. Because many students move from their homes and even town or settlement to study, many feel lonely and lost

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6 [www.timiasimi.gl/](http://www.timiasimi.gl/)

7 [www.fgb.dk/sapiik/](http://www.fgb.dk/sapiik/)

during their period of study. These students are a particular focus group. The project interventions consist of social activities, field trips and group sessions aimed at improving self-esteem, self-confidence and strengthening relationships between participants and mentors. Sapiik is offered to young students in Nuuk, Ilulissat and Qaqortoq

### **Current research projects**

#### **Resilience in Youth Education - a Brief Intervention Programme (Robusthedsprojektet)<sup>8</sup>**

The intervention project “Resilience in Youth Education” was originally aimed at Danish school students but, after positive evaluations in Denmark, it is now being nationally implemented in 10 compulsory schools and 13 residential institutions in Greenland. The intervention and the subsequent evaluation are integrated in a Ph.D. research study. The intervention is designed to support the development of resilience in vulnerable children, adolescents and families, as well as to promote mental health. The intervention informs participants about resilience, providing reliable information about thoughts, feelings and the brain, and tackling knowledge about common challenges such as bullying in an easily accessible format. The current programme being run in Greenland is primarily aimed at year 5 students (age 11-12). The project was initiated in 2014 and will run for three years, after which evaluations of the projects will be published.

#### **Mental Health and Suicide – a Greenlandic contribution to an international research project<sup>9</sup>**

The aim of the research project is to identify and analyse the social determinants for mental health and suicidal behaviour in Greenland.

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<sup>8</sup> Contacts: Professor Karen Wistoft and Ph.D. student Cecilia Pedersen, Aarhus University.

<sup>9</sup> Contacts: Professor Peter Bjerregaard & Post. Doc. Christina Viskum Lytken Larsen. National Institute of Public Health (SIF), University of Southern Denmark.



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# APPENDIX I: OVERVIEW OF RELEVANT RESEARCH PAPERS FOUND IN THE LITERATURE SEARCH

	TITLE	REFERENCE	TYPE OF STUDY AND METHOD	PARTICIPANTS
SUICIDE	Prevalence of self-reported suicidal thoughts in SLiCA. The Survey of Living Condition in the Arctic (SLiCA).	Broderstad et al. (2011)	Cross-sectional, descriptive study, questionnaire	2099 participants Age: 16-84
	Suicide--a challenge in modern Greenland.	Bjerregaard & Lynge (2006)	Descriptive study, review	-
	The challenge of reducing youth suicide in Greenland--interventions, strategies and roads to be explored.	Févre (2003)	Political brief, Ministry of health	-
	High prevalence of medicine-induced attempted suicides among females in Nuuk, Greenland, 2008-2009.	Bloch et al. (2013)	Descriptive study, medical records	74 cases of attempted suicide Age: 18-50+
	Culture change and mental health: The epidemiology of suicide in Greenland	Leineweber & Arensman (2010)	Descriptive study, civil register	Whole population from 1972-1995
	Mental health, substance use and suicidal behaviour among young indigenous people in the Arctic: a systematic review.	Lehti et al. (2009)	Descriptive study, review	
TRAUMATIC EXPERIENCES	Victimisation and PTSD in a Greenlandic youth sample.	Karsberg et al. (2012)	Cross-sectional, descriptive study, questionnaire	269 participants Age: 12-18
	Sexual assaults in Greenland: characteristics of police reported rapes and attempted rapes.	Mejlvang & Boujida (2007)	Descriptive study, police files	173 rapes and attempted rapes Age: 12+

	<b>TITLE</b>	<b>REFERENCE</b>	<b>TYPE OF STUDY AND METHOD</b>	<b>PARTICIPANTS</b>
<b>TRAUMATIC EXPERIENCES</b>	Patterns of victimization, suicide attempt, and posttraumatic stress disorder in Greenlandic adolescents: A latent class analysis	Karsberg et al. (2014)	Cross-sectional, descriptive study, LCA analysis	269 participants Age: 12-18
	To get rid of a heavy load.. Structural violence and youth in Paamiut in Kalaallit Nunaat.	Berliner & Glendøs (2010)	Qualitative, descriptive study, interviews	5 participants Age: -
	Violence, sexual abuse and health in Greenland	Curtis et al. (2002)	Cross-sectional, descriptive, Interview survey + questionnaire	1393 participants Age: 18-60+
<b>YOUTH LIFE AND HEALTH</b>	Self-rated health among Greenlandic Inuit and Norwegian Sami adolescents: associated risk and protective correlates	Spein et al. (2013)	Cross-sectional descriptive, questionnaire	4880 Sami and 508 Inuit Participants Age: 15-16
<b>MENTAL DISORDERS</b>	Common mental disorders among patients in primary health care in Greenland	Lynge et al. (2004)	Cross-sectional descriptive, questionnaire	376 participants Age: 18-64
<b>INTERVENTIONS/PROJECTS/INITIATIVES</b>	"Some people escape through dying. I choose to live, to have dreams and to believe in the future"	Berliner (2012)	Qualitative description of the Photo-project: "With love from Paamiut"	-
	Then I get up and walk back to Paamiut-Monologues in young peoples' theatre in Paamiut Asasara.	Berliner (2012)	Qualitative description of a theatre-based project	-
	Life and possibilities of young people-Action research in Paamiut	Wattar & Berliner (2010)	Qualitative description of the Paamiut Youth Voice Project	-



## **MINISTRIES AND ADMINISTRATIVE AUTHORITIES**

### **Ministry of Education, Culture, Research and Church**

**Ministry of Industry, Labour and Trade:** [www.naalakkersuisut.gl](http://www.naalakkersuisut.gl)

**Ministry of Family, Equality and Social Welfare:** [www.naalakkersuisut.gl](http://www.naalakkersuisut.gl)

- Børnerettighedsinstitutionen/National Advocacy for Children's Rights (MIO):  
<http://mio.gl>

**Ministry of Health:** [www.naalakkersuisut.gl](http://www.naalakkersuisut.gl)

- Ung i Grønland PAARISA/Young in Greenland: [www.inuusuk.gl/paarisa.html](http://www.inuusuk.gl/paarisa.html)

## **MUNICIPALITIES AND REGIONS**

- De Grønlandske Kommuners Landsforening/The Greenland Association of Local Authorities: [www.kanukoka.gl](http://www.kanukoka.gl) (4)

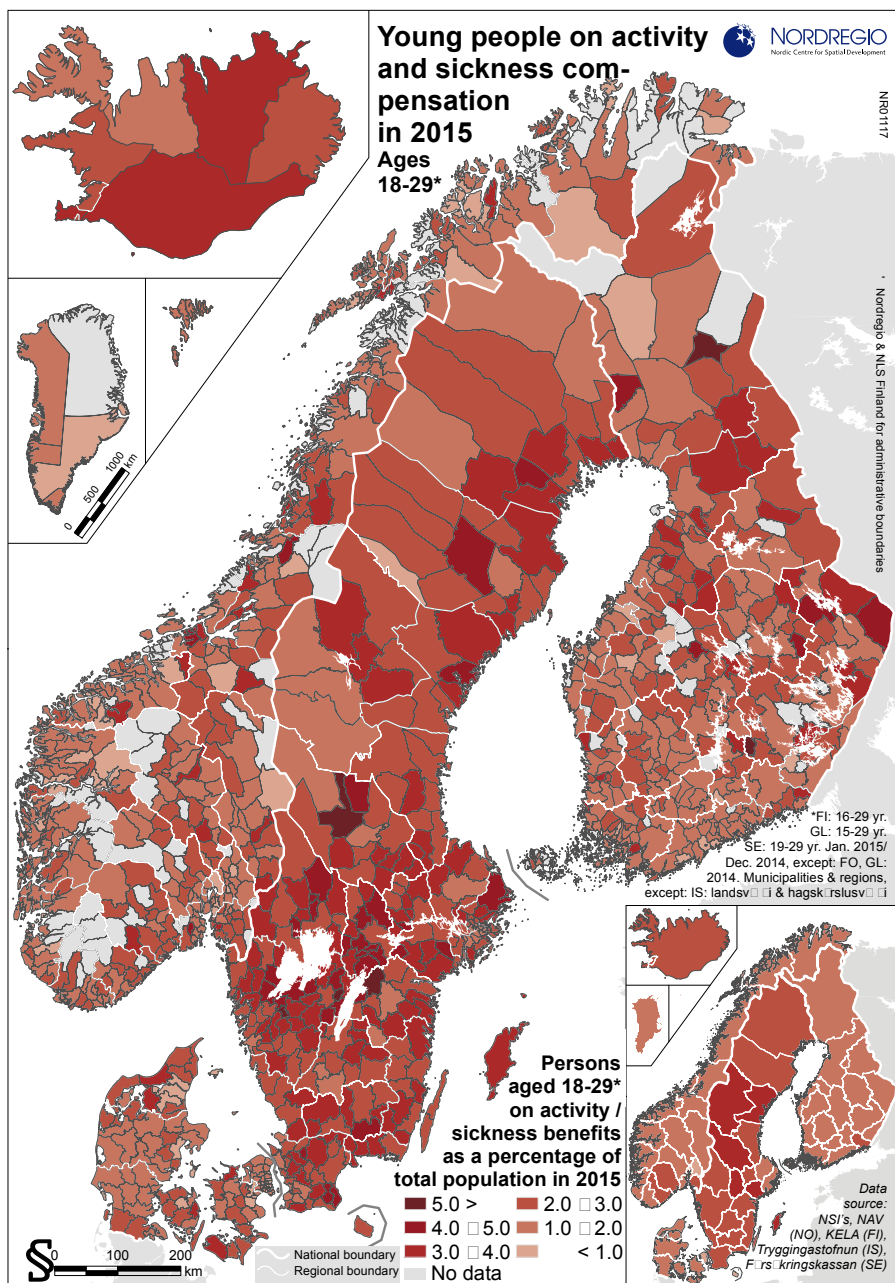
## **RESEARCH**

- Det Nationale Forskningscenter for Velfærd/The Danish National Centre for Social Research: [www.sfi.dk](http://www.sfi.dk)
- Videnscenter om Børn og Unge i Grønland/Children and youth research center:  
<http://mipi.nanoq.gl>

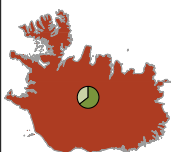
## **CIVIL SOCIETY**

- Bedre Børneliv/Children rights organization: *[www.mibb.gl](http://www.mibb.gl)*
- Foreningen Grønlandske Børn/Children rights organization: *[www.fgb.dk](http://www.fgb.dk)*
- Kalaallit Røde Korsiat/Red Cross: *[www.krak.gl](http://www.krak.gl)*
- Lions Club: *[www.lions.dk/groenlandsfonden](http://www.lions.dk/groenlandsfonden)*
- Nanu Børn/NGO in the social sector: *[www.nanuhoern.gl](http://www.nanuhoern.gl)*
- Red Barnet/Save the Children: *[www.redbarnet.dk/groenland](http://www.redbarnet.dk/groenland)*
- Rotary: *[www.rotarynyt.dk/distrikter/distrikt1470/groenland](http://www.rotarynyt.dk/distrikter/distrikt1470/groenland)*
- Unicef: *[www.unicef.dk/groenland](http://www.unicef.dk/groenland)*
- Børnerettighedsinstitutionen MIO/Children's Rights Organization: *<http://mio.gl>*

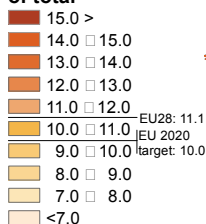




# Early school leavers in 2014 by NUTS 2 regions Persons with at most lower secondary education, aged 18 to 24\*



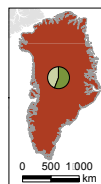
## Early school leavers: percentage share of total



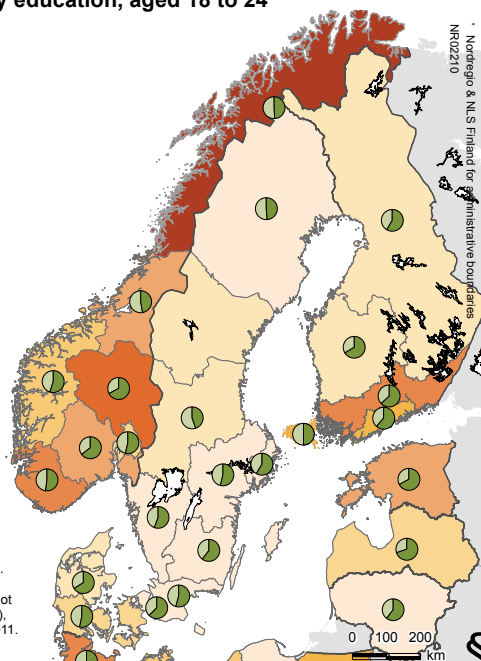
EU28: 11.1  
EU 2020  
target: 10.0

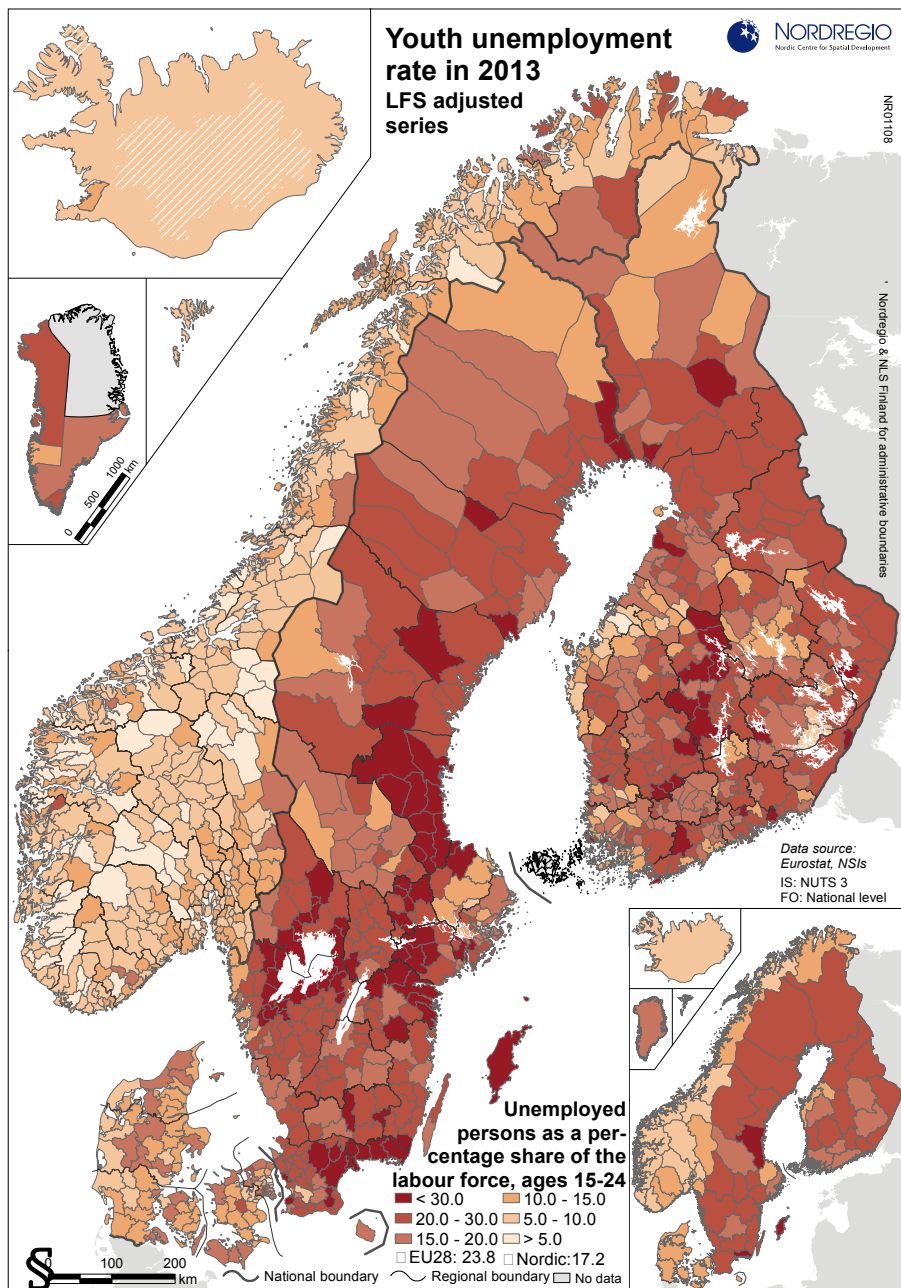
## Early school leavers: gender shares

Females Males  
EU28:



\* Percentage of the population aged 18 to 24 having attained at most lower secondary education and not being involved in further education or training. Regional level: NUTS 2. In EE, IS, LT & LV, NUTS 2 equals national level. AX, GL: estimates. AX: Share of early school leavers probably over estimated, as students studying in Sweden are not included in estimates. SJ: Jylland, Nordjylland (DK), Mellersta Norrland (SE): No gender data. FO: 2011. Source: Eurostat & (for AX, FO, GL) NSI's.

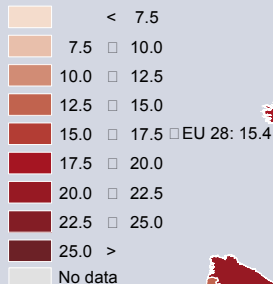




# NEET rates in European countries in 2014

Young people neither in employment nor in education and training (NEET)

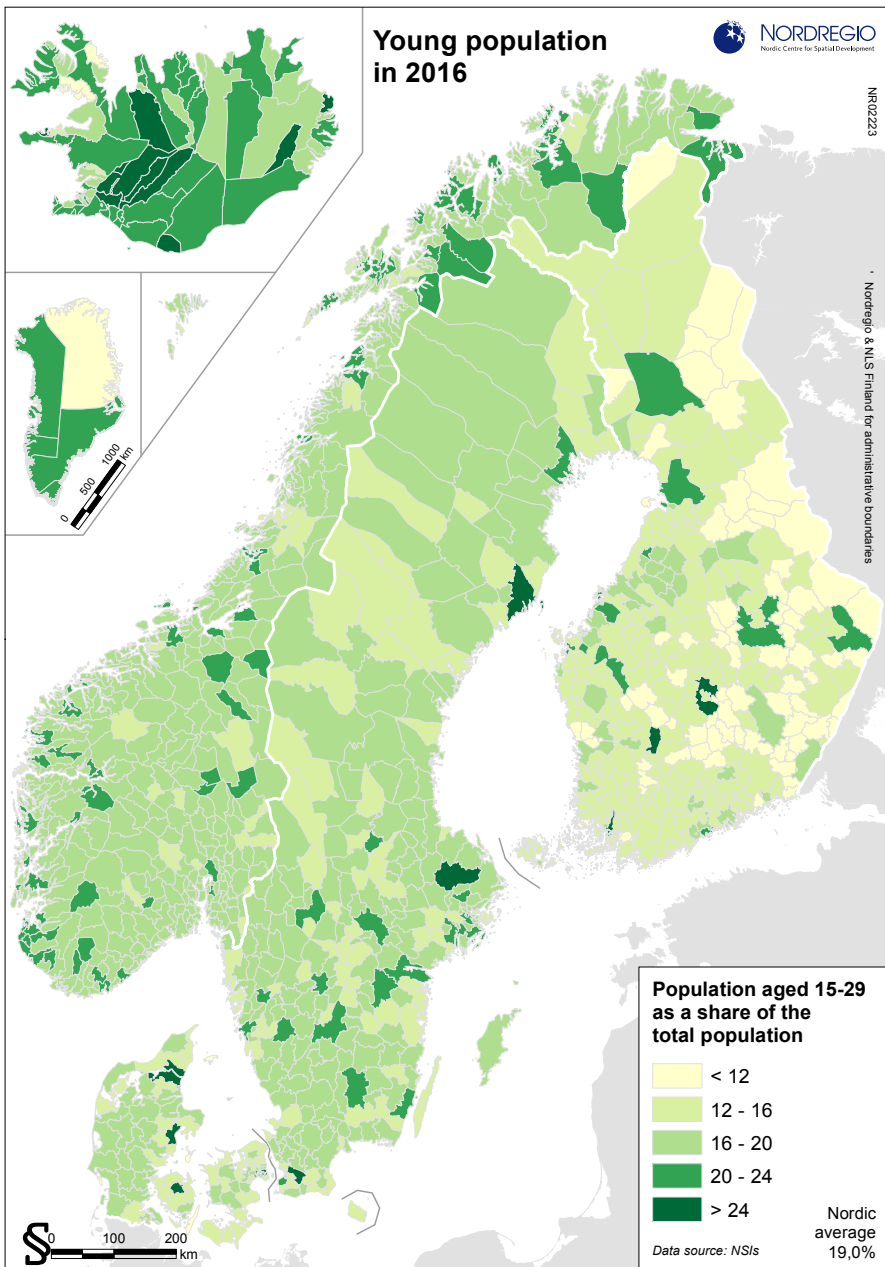
**NEET percentage of total population, ages 15-29**




FO: 2011  
Source: Eurostat, NSIs

NR01116

Nordregio, NLS Finland & ESRI for administrative boundaries



A stylized map of the Nordic region, including Denmark, Finland, Iceland, Norway, and Sweden, set against a blue background. The map is white with black outlines for the coastlines and borders.

*The Nordic co-operation involves Denmark, Finland, Iceland, Norway and Sweden, as well as the Faroe Islands, Greenland and Åland.*

## **NORDIC CENTRE FOR WELFARE AND SOCIAL ISSUES – AN INSTITUTION UNDER THE NORDIC COUNCIL OF MINISTERS**

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**Although there are some national differences in the Nordic welfare systems, there are also great similarities between the countries. National differences provide opportunities for comparison and learning from each other's experiences. The Nordic Centre for Welfare and Social Issues is a key-actor in explaining, supporting and developing the Nordic welfare model.**

Our work aims at developing strategic input to politicians, compiling research findings and arranging Nordic and international conferences on current welfare issues.

### **Our focus areas are:**

- Welfare policy
- Disability issues
- Labour market inclusion
- Alcohol and drug issues
- Welfare technology

## **Nordic Council of Ministers**

The Nordic Council of Ministers is the official inter-governmental body for co-operation in the Nordic region. The ministers within each specific policy area meet a few times a year to collaborate on matters such as working life issues, social and health policy, and education and research.

Within each policy area, there is also a committee of senior officials, comprising civil servants whose task is to prepare and follow up issues.

## **Nordic Council**

The Nordic Council is the official parliamentary body of the Nordic co-operation. Members of the Nordic Council are members of parliament in the individual countries.

The Nordic Council meets twice a year. The decisions taken at the meetings are implemented by the Nordic Council of Ministers and the Nordic governments. The day-to-day political work is carried out in committees and political party groups.





**NORDIC CENTRE OF WELFARE  
AND SOCIAL ISSUES**

**+46 8 545 536 00  
info@nordicwelfare.org**

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