

Making Sense of Mental Health 2018-2019

***Children and Young People's Wellbeing
in the London Borough of Lewisham***

TAKE NOTICE

I can take
notice of
the people
that aren't
happy and
try and make
them happy.

connect
people
with who

Ag

T





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What is Healthwatch Lewisham?

We are one of 152 local Healthwatch organisations that were established throughout England in 2013, under the provisions of the Health and Social Care Act 2012. The dual role of local Healthwatch is to champion the rights of users of health and social care services and to hold the system to account for how well it engages with the public.

Our remit as an independent health and social care watchdog is to be the voice of local people and ensure that health and social care services are safe, effective and designed to meet the needs of patients, social care users and carers.

We give children, young people and adults in Lewisham a stronger voice to influence and challenge how health and social care services are purchased, provided and reviewed within the borough.

Our core functions are:

1. Gathering the views and experiences of service users, carers, and the wider community,
2. Making people's views known,
3. Involving locals in the commissioning process for health and social care services, and process for their continual scrutiny,
4. Referring providers of concern to Healthwatch England, or the CQC, to investigate,
5. Providing information about which services are available to access and signposting,
6. Collecting views and experiences and communicating them to Healthwatch England,
7. Working with the Health and Wellbeing board in Lewisham on the Joint Strategic Needs Assessment and Joint Health and Wellbeing strategy (which will influence the commissioning process).



Strategic Drivers

Mental health is crucial to wellbeing, including that of children and young people (CYP). National statistics highlight just how important CYP mental health is:

- Almost one in four CYP show some evidence of poor mental health (including anxiety and depression).¹
- In 2017, one in eight 5-19 year olds assessed had at least one mental disorder (emotional, behavioural, hyperactivity and other less common disorders). The most common disorder experienced was emotional.²
- Only a quarter of CYP who require mental health support can access the services they need.³
- 50% of mental health problems manifest by the age of fourteen, and 75% by the age of 24.⁴
- In 2015, suicide was the most common of death for both boys and girls aged between 5 and 19 years, at 17% and 11% respectively.⁵

In particular, these statistics demonstrate the importance of early intervention in CYP mental health. CYP need support before they reach adulthood, and before they reach crisis point. Mental wellbeing is a matter of priority, and young people need our support.

Recently, CYP mental health has been recognised as a national priority. Mental/emotional health was the number one concern CYP talked to Childline about in 2017/18.⁶ Issues included low self-esteem, lack of confidence, anxiety, low moods and loneliness, as young people struggled to cope with challenges such as difficulties at school and relationships. In their annual review, Childline stated they are 'overwhelmed' by the numbers of young people who contact them, and that they 'need everyone, the public and the professionals to hear them too, because to solve this huge problem, we urgently need to recognise

it.⁷ In Lewisham, CYP mental health has also been described as "everybody's business"⁸. Young people's mental health problems must be all of our concern.

Locally, significant plans have been set out to transform CYP mental health services. In Lewisham, CYP (under 19 years) make up a major proportion of the population, at 25%⁹. Essential concerns have been highlighted, such as accessibility to services. The Children and Young People's Partnership has stated it is committed to ensuring that 'new and existing service developments are accessible to all children and young people 0-18 (up to 25 for children with disabilities)'¹⁰. A transformation of the Children and Adolescent Mental Health Services in Lewisham has also been set out, with the following vision:

1. ONS (2016) Selected Children's Well-being Measures by Country; 3 CentreForum (2016) Commission on Child.
2. <https://digital.nhs.uk/data-and-information/publications/statistical/mental-health-of-children-and-young-people-in-england/2017/2017>
3. <https://www.parliament.uk/business/committees/committees-a-z/commons-select/public-accounts-committee/inquiries/parliament-2017/inquiry12/>
4. Kessler RC et al., (2005), 'Lifetime Prevalence and Age-of-Onset Distributions of DSM-IV Disorders in the National Comorbidity Survey Replication.' Archives of General Psychiatry, 62 (6) pp. 593-602.
5. <https://www.ons.gov.uk/peoplepopulationandcommunity/birthsdeathsandmarriages/deaths/bulletins/deathsregisteredinenglandandwalesseriesdr/2015#number-of-land-transport-accidents-among-5-to-19-year-olds-decreases-in-2015>
6. <https://learning.nspcc.org.uk/media/1596/courage-talk-childline-annual-review-2017-18.pdf>
7. Ibid
8. Mental Health and Wellbeing Strategy of the London Borough of Lewisham, <https://www.lewisham.gov.uk/mayorandcouncil/aboutthecouncil/strategies/Documents/CYP%20MH%20and%20EWB%20strategy.docx>
9. <http://www.lewishamjsna.org.uk/a-profile-of-lewisham/demography/population>
10. <https://www.lewisham.gov.uk/mayorandcouncil/aboutthecouncil/strategies/Documents/Mental%20Health%20and%20Emotional%20Wellbeing%20Strategy%20for%20Children%20and%20Young%20People.pdf>



'Our children and young people will be emotionally resilient, knowing when and where to go for help and support when faced with challenges and adversities as they arise. Those that require mental health support are able to access this, where and when they need it.

*Secondly our parents/carers and young people's workforce will be equipped to identify and respond to low levels of emotional well-being amongst our young people.'*¹¹

In order to achieve a vision that meets the needs of CYP, it is fundamental that their voices continue to be heard in the process.

Healthwatch Lewisham's role is to support the voices and views of the local community and ensure their voice is taken into account when health and social care services are developed and commissioned. We exist for our residents, and therefore asked them what our 2018/19 priorities should be. The answers: mental health, access to services, and disadvantaged groups (CYP and older people). Lewisham's CYP Mental Health Strategy and Childline's message - that we must share responsibility for young people's mental health - was also felt by Lewisham residents.

In 2016, we engaged with 70 CYP in a survey of young people's mental health needs in Lewisham. We felt a more in-depth investigation was necessary and so, we embarked on a survey of young people's mental health knowledge, experiences and opinions on services available to them. We aimed to identify where any gaps may fall in services provided to CYP. The findings presented in this report are the result of engagement with 511 CYP in Lewisham.

This report presents findings that emerged through our engagement with CYP in relation to their mental health needs. The recommendations made are based on the experiences and feedback shared by the CYP themselves, and can be used to shape the future provision and commissioning of services.

This report will be shared with the Lewisham Health and Wellbeing Board, CYP Strategic Partnership Board, Lewisham CYP Joint Commissioners, the schools and organisations that participated, the Lewisham Clinical Commissioning Group (CCG), Young Mayor and Advisors, the Care Quality Commission (CQC), NHS England, Healthwatch England and others.



¹¹ NHS Lewisham CCG CAHMS Transformation Plan, October 2018, <https://www.lewisham.gov.uk/mayorandcouncil/aboutthecouncil/strategies/Documents/Lewisham%20CAMHS%20Transformation%20Plan%202018.pdf>



Engagement Methodology

This project took place from October 2018 to January 2019, with two main aims. First, to educate CYP on what mental health is, and how to look after their wellbeing. Second, to capture the views of CYP on their mental health needs and services available to them, and identify where any gaps may fall. Both a survey and a focus group were used to achieve this. A total of 507 CYP completed the survey. Three CYP and one adult attended the focus group.

The following schools and organisations took part in this engagement:

- Bonus Pastor Catholic College
- Trinity Secondary School
- Lucas Vale Primary School
- Forster Park Primary School
- Launcelot Primary School
- The Metro Charity
- Lewisham Young Advisors
- Young Lewisham Project

Surveys

During a two week period, Healthwatch Lewisham participated in the Lewisham Junior Citizens Scheme. 1,200 Year 6s attended the scheme, where they took part in a variety of workshops, including our workshop on Wellbeing. Each 8-12 minute workshop began with an informal discussion about health in general. In order to gauge CYP understanding of their mental health, they were asked:

- Who has physical health?
- Who has mental health?

Answers included 'disabled people', 'bonkers people', 'old people' or 'athletes'. Generally, answers had negative connotations. Around half answered

correctly, that everybody has both, and this was explained to those who were unsure. Many children were surprised and confused at this. It was explained that physical health is how healthy our bodies are, and mental health is how we are feeling, and that both are linked.

Next, they were asked:

- If you got sick e.g. with the flu, and had poor physical health, what would you do to look after yourself?

Answers included taking medicine, resting and drinking lots of fluids. Then, they were asked:

- If you wanted to prevent yourself from getting sick, what should you do every day?

Answers included getting enough sleep, exercise, eating a balanced diet and drinking lots of water. Most children were very confident with these answers.

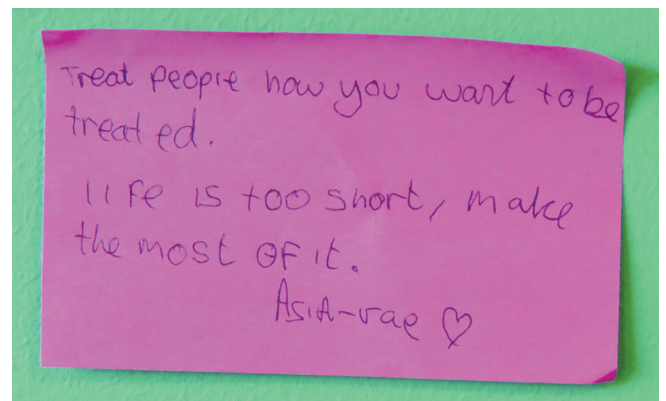
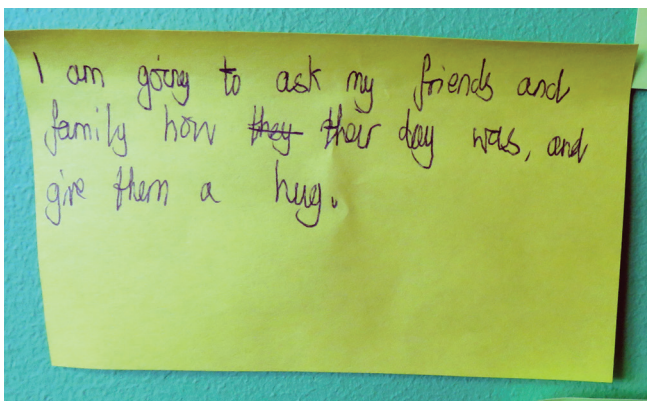
It was then explained to participants that just as we can look after our physical health, and prevent ourselves from getting sick, we can also look after our mental health. It was explained that there are Five Ways to Wellbeing, which can be used to look after our mental health, build resilience and to feel as happy as possible. Participants were played a video that explained the Five Ways: Take Notice, Connect, Be Active, Give and Keep Learning¹².

¹² 'What are the 5 Ways to Wellbeing?' Rochdale Borough Council, <https://www.youtube.com/watch?v=yF7Ou43Vj6c>



After the video was played, participants were asked again: who has mental health? Nearly all children answered correctly and those who were still unsure were reminded. The Five Ways to Wellbeing were recapped and how they help improve their mental health, and the children were asked to give examples of how they could incorporate them into their everyday lives. They then each made a pledge, based on the Five Ways to Wellbeing, of how they would look after their mental health. After the workshops, participants were asked to complete a survey¹³.

In addition, ten workshops were held across two secondary schools (Bonus Pastor Catholic College and Trinity Secondary School), following a similar format but with more time for in-depth discussion. CYP completed the surveys before the workshop. Participants were also asked to devise a short performance around problems they felt young people faced in relation to mental health. Examples included bullying and sexual pressure. The situations and characters were discussed, and the advice and support that could be given in these scenarios.



CYP's comments on the workshop:

- 'It was very informative.'
- 'It is really helpful.'



Teacher's comments on the workshop:

- 'Pupils really enjoyed the sessions and got a lot out of them.'
- 'Very enjoyable'
- 'Very interesting'



13 Appendix Two



Focus Group

Moreover, a focus group was held in partnership with the Metro charity. The Metro charity promote health and wellbeing and celebrate difference. We attended their LGBT group for young people in Lewisham. This engagement method allowed meaningful qualitative data to be gathered from a seldom heard group. Participants were asked core questions, including:

- Do you feel you have experienced poor mental health?
- What would you do/who would you turn to if you felt this way?
- Have you ever used any mental health services?
 - If yes, what was your experience?

The demographics of the focus group were recorded separately, and can be found alongside their experiences.

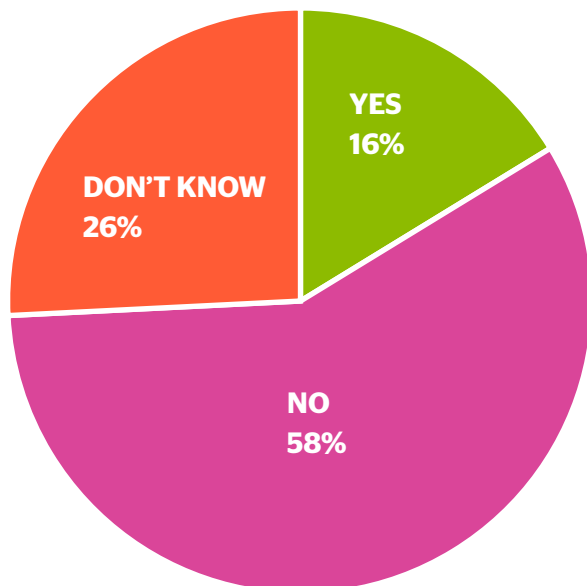




Survey Findings

507 CYP completed our survey. Below is a summary of the findings, question by question. A summary of the demographic data of survey participants will be provided in the appendices.¹⁴

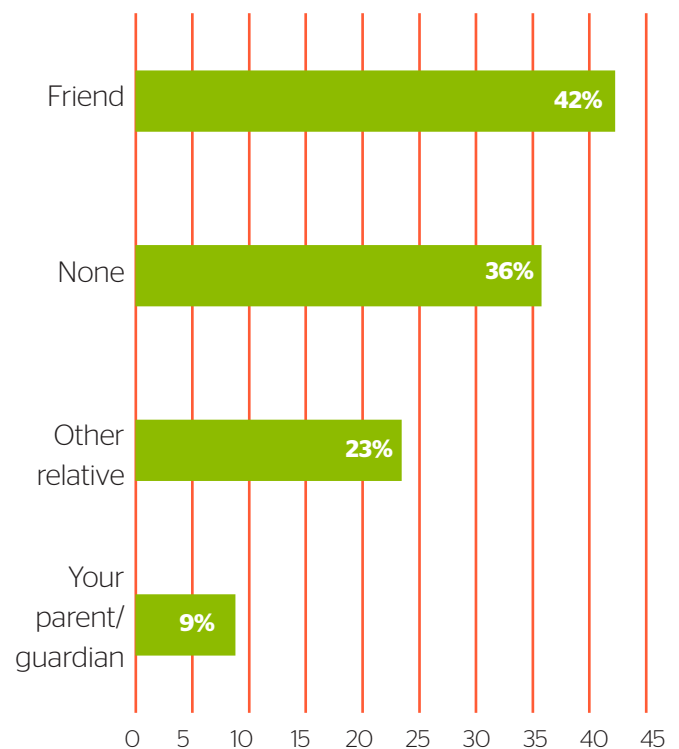
Do you believe that you have ever suffered with poor mental health?



58% of respondents did not believe that they had ever suffered with poor mental health. 16% replied yes, they did feel that they had suffered with poor mental health, and 26% were unsure.

The most common issues CYP felt they had experienced were exam stress, stress and trouble sleeping.

Do you feel any of the following people around you have experience poor mental health?

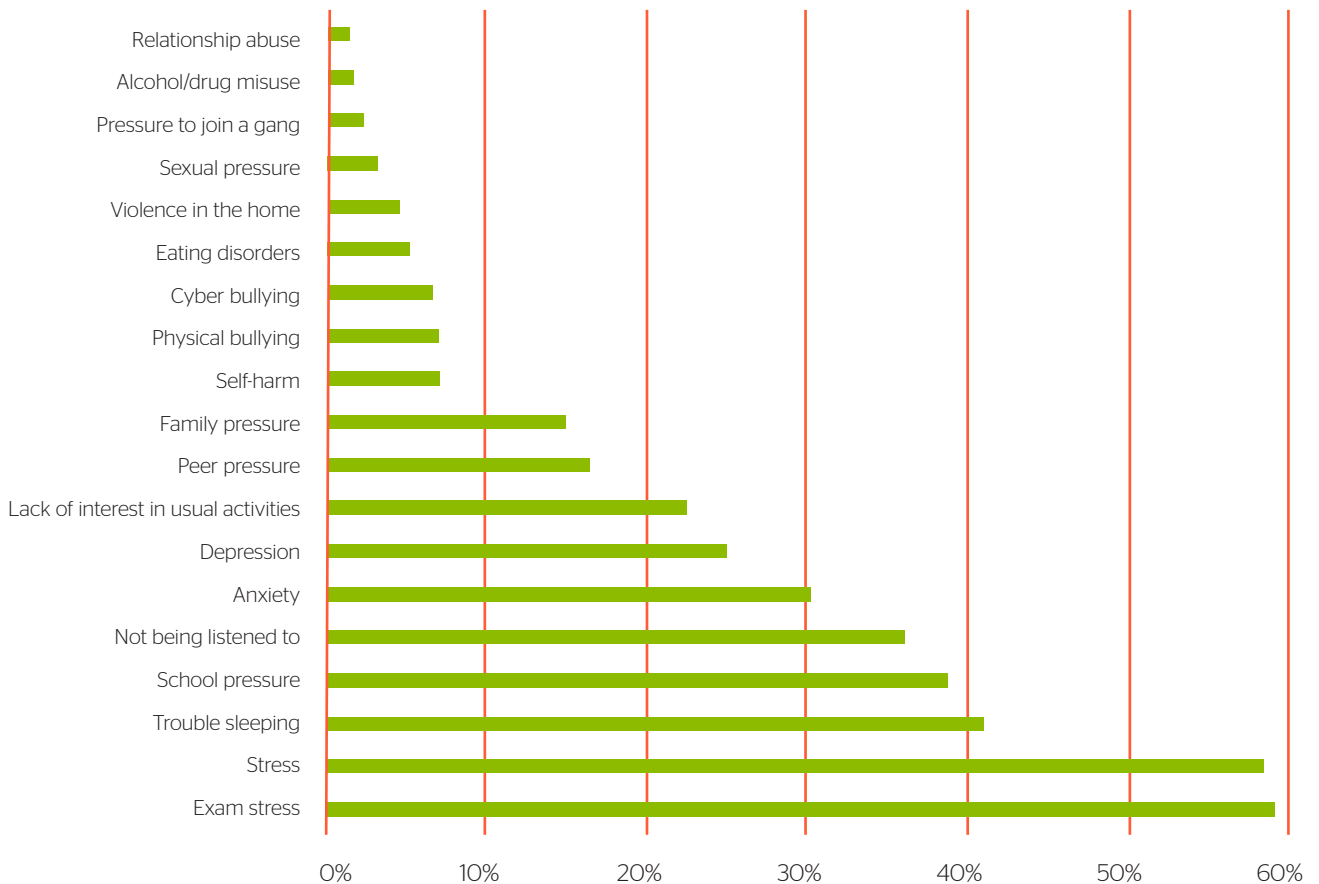


Whilst only 16% of CYP felt they personally had suffered with poor mental health, 42% felt that their friend had. 9% believed their parent or guardian had, and 23% felt another relative had. Just over a third felt that no one they knew had suffered with poor mental health.

14 Appendix One



Do you feel you have experienced any of the following?



CYP were asked whether they had experienced any of 19 indicators of poor mental health listed in the above graph, and had the opportunity to comment any others they may have experienced.

Overall, 89% of respondents admitted to having experienced an indicator of poor mental health. This number starkly contrasts with the above findings, that only 16% of CYP felt they had suffered with poor mental health. 26% were unsure if they had suffered poor mental health, signifying a need for further education on recognising indicators of poor mental health. It suggests that CYP associate experiencing

poor mental health with being seriously ill, rather than with the indicators outlined above. In particular, 59% felt they had experienced exam stress, and 39% school pressure. This demonstrates that issues related to school are a specific concern amongst CYP. Also, more than half of the respondents felt they experienced stress and 41% had experienced trouble sleeping. More than a third of CYP felt they had experienced not being listened to at some point in their lives.

Additionally, one in four CYP believed they had experienced depression, and 31% anxiety.



Experiences of depression were consistent with the national average, whilst experiences of anxiety were slightly above. This illustrates the fundamental need of CYP mental health support in Lewisham.

Other comments/issues raised by CYP included:



It is also interesting to note that when asked if they

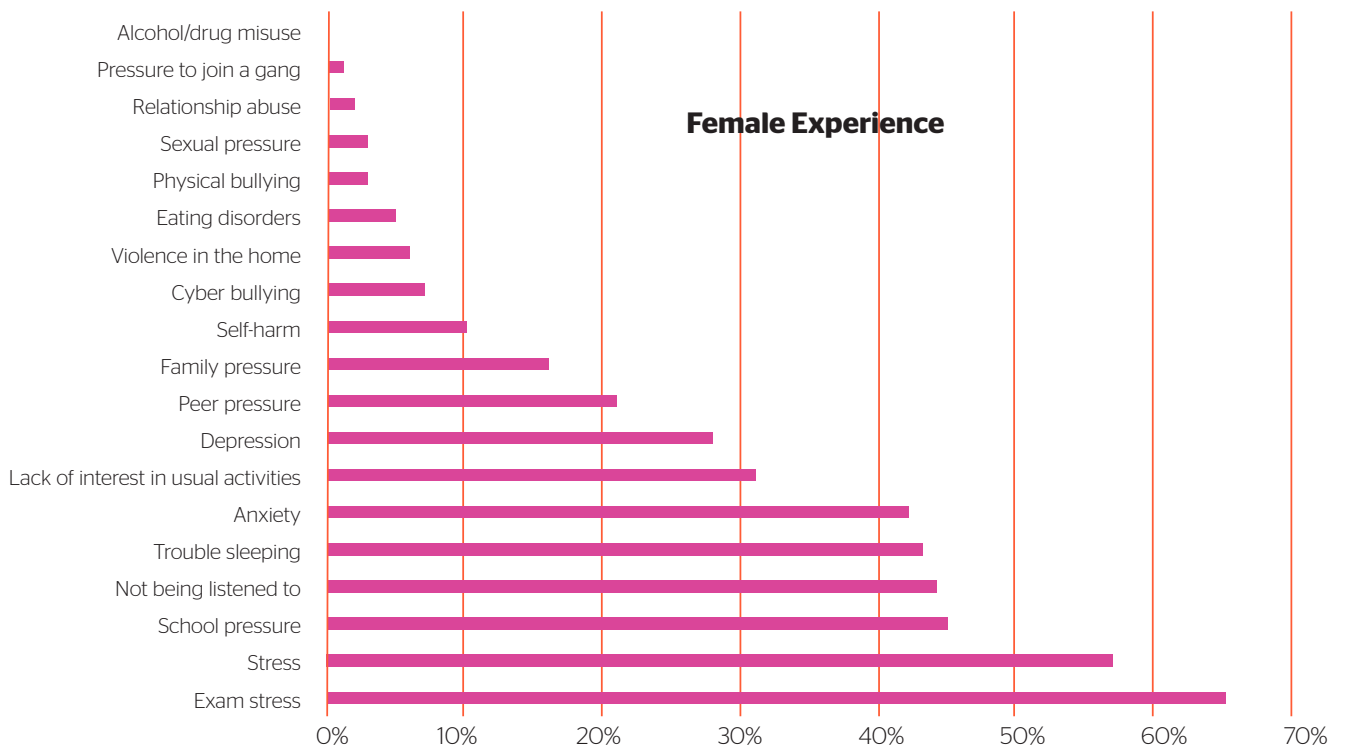
considered themselves to have a disability, 8 of the 507 survey respondents listed issues related to anger. One respondent stated 'I get annoyed and angry easily', whilst another cited 'hot-headed/anger issues'.

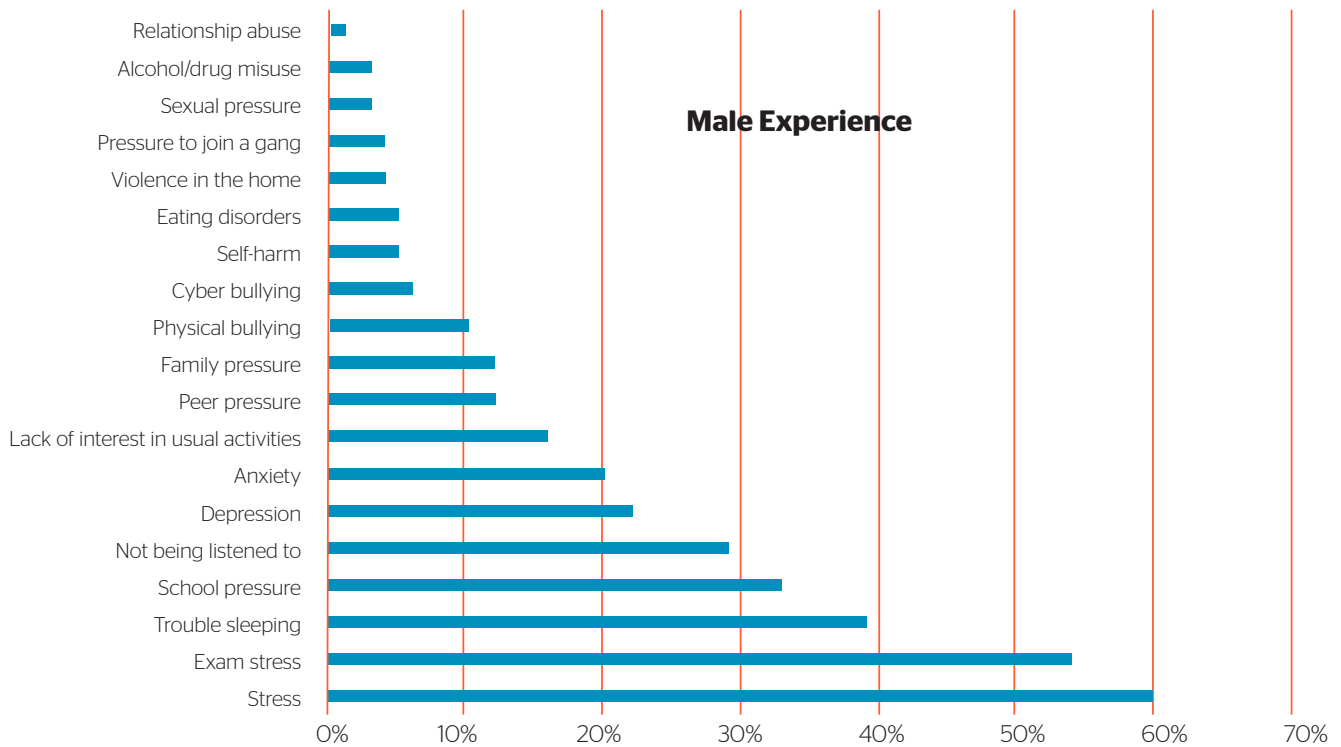
The top five concerns for female respondents were:

1. Exam stress (65%)
2. Stress (57%)
3. School pressure (45%)
4. Not being listened to (44%)
5. Trouble sleeping (43%)

The top five concerns for male respondents were:

1. Stress (60%)
2. Exam stress (54%)
3. Trouble sleeping (39%)
4. School pressure (33%)
5. Not being listened to (29%)





Both male and female respondents shared the same top five concerns. The top concern for female respondents was exam stress, whereas male respondents highlighted stress more generally. A significantly higher number of female respondents felt they had suffered from anxiety, at 42%, 22% higher than male respondents. 28% of females felt they had experienced depression in their lives, compared to 22% of males. One in ten females had experienced self-harm, at twice the rate of males.

- Stress (males 60%, females 57%)
- Physical bullying (males 10%, females 3%)
- Pressure to join a gang (males 4%, females, 1%)
- Alcohol/drug misuse (males 2.7%, females 0%)
- Eating disorders (both 5%)
- Sexual pressure (both 3%)

Of the 19 categories presented in the survey, female respondents stated they had experienced more indicators of poor mental health than males, with the exception of:



The table below demonstrates a breakdown of the top three CYP concerns by age:

Age	Concerns
10	1. Exam stress (52%) 2. Stress, not being listened to, trouble sleeping (39%)
11	1. Exam stress (45%) 2. Stress (39%) 3. Not being listened to (32%)
12	1. Exam stress (63%) 2. Stress (62%) 3. Trouble sleeping (44%)
13	1. Stress (69%) 2. Exam stress (56%) 3. School pressure (43%)
14	1. Exam stress (71%) 2. Stress (65%) 3. School pressure (49%)
15	1. Stress (69%) 2. Exam stress (59%) 3. Anxiety, trouble sleeping, school pressure (41%)

Across all age groups, the most common causes for concern were exam stress and stress, with the highest rates of exam stress felt by 14 year olds and the highest rates of stress felt by 13 and 15 year olds. Also, school pressure was the third highest concern amongst 13, 14 and 15 year olds. Strengthening mental health support of CYP in schools therefore must be a matter of priority.

Amongst 10 and 11 year olds, not being listened to was their third highest concern. 10 and 15 year olds also cited trouble sleeping. 15 year olds experienced particularly high levels of anxiety, at 41%.

The table below outlines the experiences of depression and anxiety felt across the age groups surveyed.

Age	Depression	Anxiety
10	12%	17%
11	16%	26%
12	36%	34%
13	30%	31%
14	22%	38%
15	16%	41%

More than a third of 12 year olds and 30% of 13 year olds felt they had experienced depression during their lives. Significantly, one in four 11 year olds had experienced anxiety. The 2017 'Review of Transition from Primary to Secondary School' notes the important impact transition can have on a child's wellbeing¹⁵. Children from Lewisham revealed their biggest worries included the behaviour of older children, homework and the school journey. The transition from primary to secondary school is a difficult time for 10-11 year olds, and CYP need the appropriate support. It is interesting to note that one primary school from the Junior Citizens Scheme declined to complete our survey, stating that it was felt 'that the questionnaire is more appropriate for children rather more mature than our current Y6'.

However, the above data shows that it is imperative that the mental health needs of children of a young age are not underestimated.

15 <http://councilmeetings.lewisham.gov.uk/documents/s48752/Appendix%20A%20Transition%20from%20primary%20to%20secondary%20review.pdf>

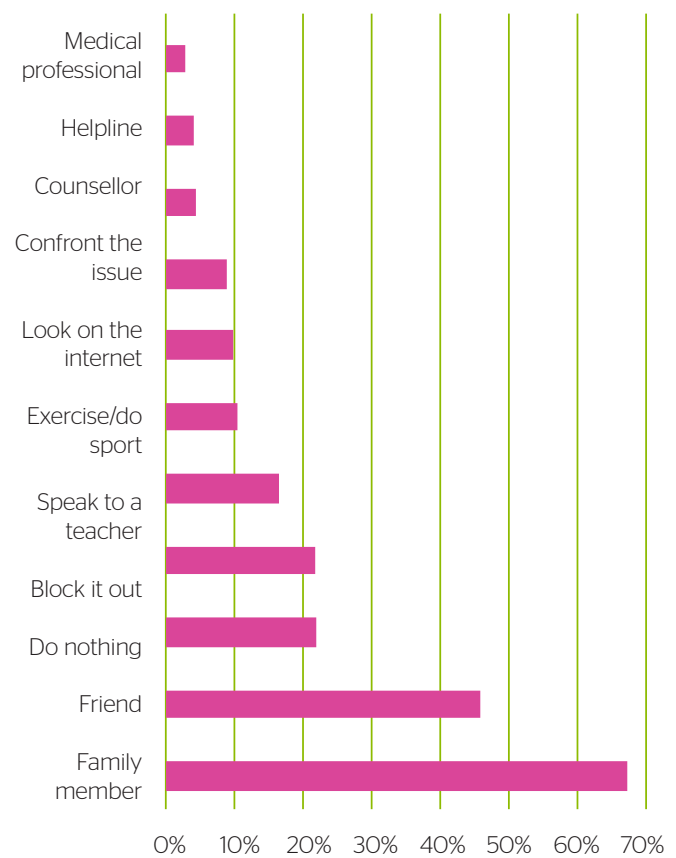


The table below outlines the levels of depression, stress and anxiety felt by those who considered themselves to have a disability:

	Depression	Stress	Anxiety
Learning disability/difficulty	45%	71%	52%
Mental health condition	75%	69%	63%
Physical or mobility	25%	50%	38%
Hearing	40%	80%	40%
Visual	28%	44%	22%
Long standing illness or health condition	40%	60%	40%

Three quarters of those who suffered from a mental health condition felt they had experienced depression. Of the five respondents who stated they had a hearing disability, 4 of them had experienced stress. Just over two thirds of those who suffered from a mental health condition had experienced anxiety.

When or if you feel that you need support with any of the above, where might you turn to and/or what may you do?



CYP were asked where they might turn or what they may do when they are experiencing the above difficulties. The most popular answer was to turn to a family member, at 68%. 46% would speak to a friend, and 17% would speak to a teacher.

Of those who admitted to experiencing a symptom of poor mental health, 23% stated they would either do nothing or block it out. This suggests that one in five young people may benefit from further education on alternative coping mechanisms when experiencing poor mental health.



The top three answers from female respondents were:

1. Family (66%)
2. Friend (54%)
3. Do nothing (29%)

The top three answers from male respondents were:

1. Family (71%)
2. Friend (40%)
3. Block it out (18%)

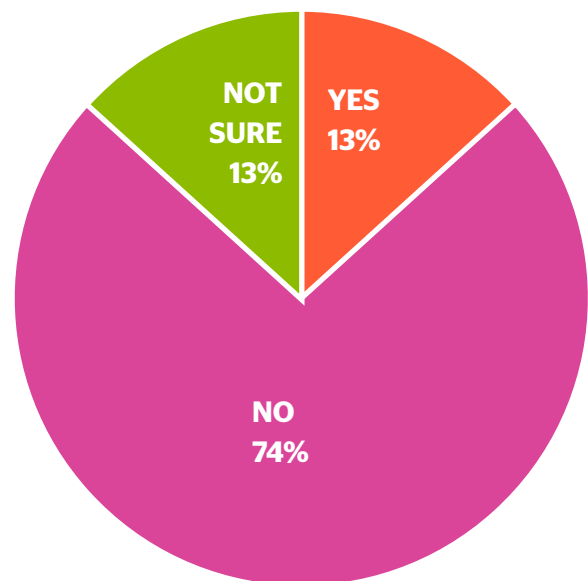
Both males and females were mostly likely to speak to either a friend or family member. After this, they would do nothing or block it out. One female respondent wrote that she blocks it out 'because sometimes I don't feel complete. I know I can trust people but I keep my pain and worries to myself'. Again, CYP may benefit from the offer of alternative coping mechanism. Only 13% of males would do exercise and even fewer females (7%). CYP would benefit from education on the huge benefits of exercise for their health as a whole, and that their mental health is linked to their physical health.

Other comments of who CYP might turn to, or what they may do, included:



One school has a school mentoring scheme in place. It was particularly noticeable that many students at this school knew their designated mentor they could speak to when they needed.

Have you ever used any counselling services? This can include talking to a health professional, a school counsellor, online and/or telephone counselling.



74% of CYP had never used counselling services. 13% were unsure, and 13% had used services.

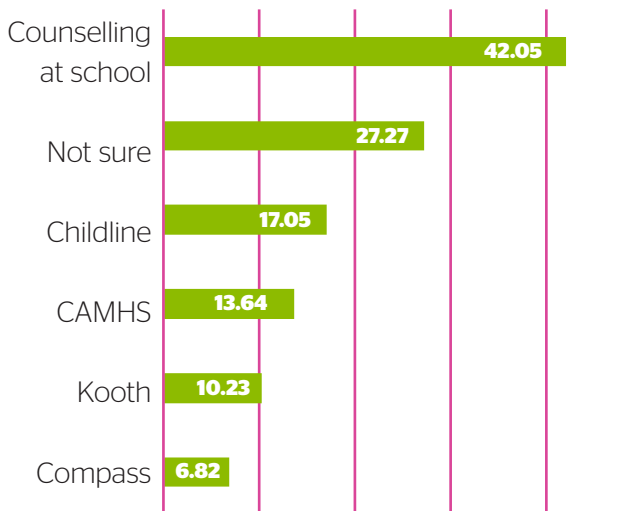
13% of female respondents and 9% of males respondents had used counselling services.

Only 4% of CYP stated that they would turn to a counsellor if they were experiencing difficulties, 4% would use a helpline and 3% would speak to a medical professional. CYP were more likely to look on the internet (10%) or speak to a teacher (17%).



If you circled yes, which service did you use?

Of those who responded yes, or not sure, to using counselling services, 42% had had counselling at school. 27% were unsure which service they had



used. 17% had used Childline. 14% had used Children and Adolescent Mental Health Services. 10% had used Kooth and 7% Compass.

CYP also listed having used:

- Place2Be
- Mentor
- GP
- Art therapy
- Kaleidoscope
- Family social worker
- School mentor
- Bereavement counselling



If you circled yes, how would you rate that service?

	Excellent		Good		OK		Poor		Very Poor		Don't know		Total
Compass	33.33%	2	66.67%	4	0.00%	0	0.00%	0	0.00%	0	0%	0	6
Kooth	12.50%	1	50.00%	4	12.50%	1	0.00%	0	0.00%	0	25%	2	8
CAMHS	33.33%	4	25.00%	3	33.33%	4	8.33%	1	0.00%	0	0%	0	12
Childline	14.29%	2	50.00%	7	21.43%	3	0.00%	0	7.14%	1	7.14%	0	14
Not sure	9.52%	2	0.00%	0	19.05%	4	4.76%	1	4.76%	1	61.90%	13	21
Counselling at school	25.00%	9	30.56%	11	33.33%	12	0.00%	0	2.78%	1	8.33%	3	36

Compass received the highest satisfaction rate, with 33% of respondents rating the service as excellent, and 67% as good. Compass is a service available to young people aged 0-19 (up to 25 with evidenced additional needs) and offers support to CYP in Lewisham needing help or advice with emotional wellbeing, sexual health or substance misuse.

Childline received mixed but overall high scores, with 64% rating it excellent or good. Kooth also received high satisfaction rate with a 50% score of good and 12.5% excellent. Kooth is an anonymous and free online counselling service in Lewisham for 11-25 year olds. Children and Adolescent Mental Health Services received a slightly more mixed review of its service, but overall had high satisfaction rates with 33% excellent and 25% good. Counselling at school also had a mixed review, with 56% rating it excellent or good.



Why did you choose that rating?

During the Junior Citizens Scheme, workshops were only a maximum of 12 minutes long. Therefore, the decision was made to omit this question from surveys. Of 507 respondents, 102 were not asked this question. 7 of the 102 answered had used counselling services.

Respondents were asked to explain the reasons behind their ratings of the services. CYP highlighted the importance of being listened to when using a service, praising services that 'listen well', did not change the topic and allowed them to let out their feelings. Staff who were 'nice', 'helpful' and respectful were noted at all services, including Place2Be, and valued for their support. Respondents were grateful to services for support overcoming problems such as panic attacks, negativity and anger issues. One respondent was thankful to have a place to relieve 'all the pressure'.

However, long waiting times and issues of access were amongst problems highlighted by CYP. In particular, respondents were critical of long waiting times at CAMHS, stating 'the wait for CAMHS is too long' and that the 'waiting list is 18 months long'. Whilst some respondents praised the accessibility of services at schools, where they could 'drop in at any time', others felt that counsellors were not always available when needed. Being put on hold for a long time or not answering was also an issue for one respondent who contacted Childline.

Privacy and confidentiality was also particularly important to respondents. Services were criticized for breaking confidentiality and not having enough privacy, whereas others were praised for valuing

CYP's privacy and noted as trustworthy.

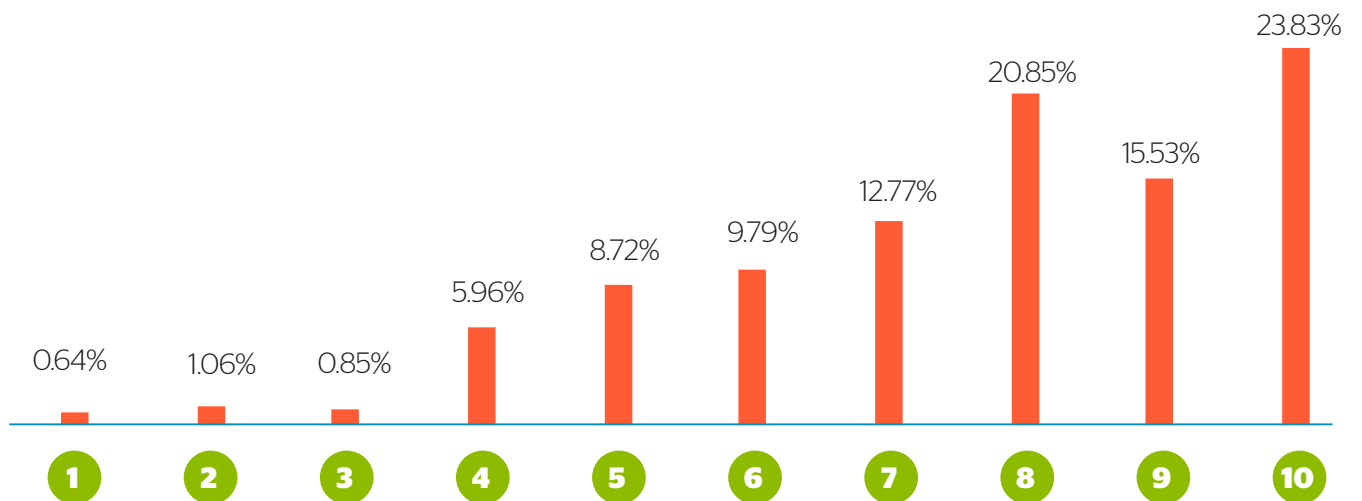
CYP also highlighted the need for a varied service and options when seeking support with their mental health. Some criticisms of services included advice feeling 'repetitive and predictable'. They also mentioned feeling uncomfortable discussing some particular topics and feelings of awkwardness. Others felt that the support they had received had not helped or made a significant difference. Some respondents felt uncomfortable discussing problems in the school environment and stated there is not enough privacy.

Finally, continuity in support was important to CYP. Whilst some respondents felt they had overcome their problems, some felt as though they still struggled. Some CYP felt that they were not able to cover all problems they wanted to discuss when they had used services. One CYP described a service as 'more of a place to go with a friend and speak about problems and not how to deal with mental health', indicating that they would benefit from learning self-help tools to use long-term in daily life.



On a scale of 1-10, how happy do you feel about your life as a whole?

24% of CYP answered that on a scale of 1-10, they felt they were 10 out of 10 happy with their life as a whole. 21% rated themselves an 8 and 16% a 9. 18% rated themselves a 5 or below.





Focus Group Findings

The focus group organised in partnership with Metro

The Metro charity promote health and wellbeing and celebrate difference. We attended their LGBT group for young people in Lewisham.

A total of three CYP and one adult participated in this focus group. Several themes emerged from discussions with the group.

First, accessing services was highlighted as one of the most significant challenges to young people seeking support with poor mental health. Again, the length of the CAMHS waiting list was emphasised. It was felt there ought to be more immediacy in access, and that a drop in service should be available, where CYP can speak to professionals and be prescribed medicine if necessary. As it stands, participants felt that the services available to under 18s in Lewisham seeking mental health support is inadequate. Participants felt that their only option if they needed immediate support would be to go to University Hospital Lewisham.

Also, participants emphasised that the continuity of support, in all areas of life, is fundamental to effective mental health support. Those who had received a diagnosis of a disability complained of long waits for their diagnosis, or receiving contrasting diagnoses from different services. Some had also received conflicting advice, or had been passed on to different services and felt unsupported. Participants noted the importance of continued support in schools with mental health challenges. One participant praised their counsellor at college, who had helped them build their confidence and self-worth by 'telling me the good things about me'. Others had

more mixed opinions about their support at school. Participants had experienced extreme difficulties with bullying and felt

unsupported, to the point where one participant began to skip school. One participant who had attended school outside the Lewisham borough felt they had received 'superior' support in comparison to their experiences with Lewisham services. They felt they were asked how they were feeling more frequently, and that they received more substantial support, in particular with their handwriting and bullying.

Moreover, participants underlined the need for mental health support in a comfortable environment. Some wished they could receive counselling in house at the Metro charity, but again were faced by long waits to access the service. On the other hand, one participant had received mental health support at CAMHS and praised the service. They were very happy with their treatment and the medication prescribed. Participants felt comfortable in different environments, demonstrating the need for options amongst CYP seeking support.

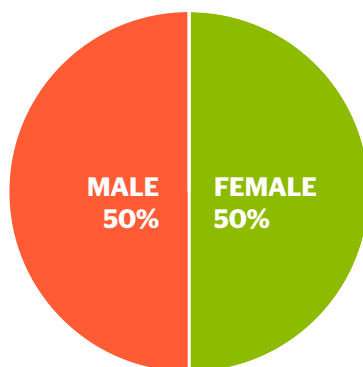
Participants were asked how they cope with ill mental health, and gave the following answers:

'Sleep'
'Do nothing'
'Talk to friends'
'I just cry'
'Boxing'
'Keep busy'

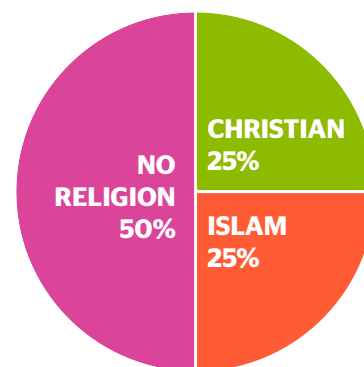


Demographics of participants of the focus group

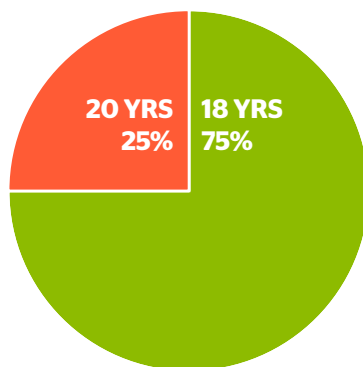
What gender are you?



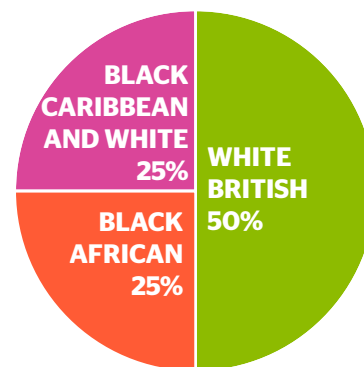
Do you consider yourself to belong to any religion?



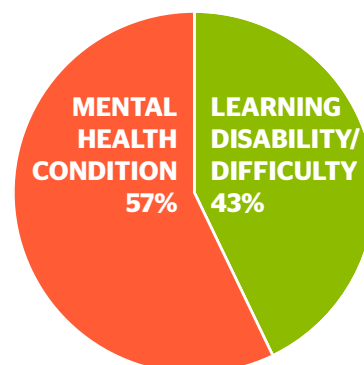
What is your age?



What is your ethnic background?



Do you consider yourself to have a disability?





Summary of Findings

- Overall, CYP were confident on how to look after their physical health, but much less assured on how to look after their mental health.
- Two of the top five mental health concerns amongst CYP were school related (exam stress and school pressure). The others were stress, not being listened to, and trouble sleeping.
- Female CYP experienced much higher levels of anxiety than males, at 42% and 22% respectively.
- Overall, females were more likely to experience an indicator of poor mental health than males.
- Female CYPs were twice more likely to have experienced self-harm than males.
- Stress was a top concern amongst all age groups and genders.
- One in four CYP believed they had experienced depression, and 31% with anxiety.
- The highest rates of depression were felt by 12 year olds, at just over one third.
- The highest rates of anxiety were felt by 15 year olds, at two in five.
- When experiencing an indicator of poor mental health, CYP were most likely to speak to a family member or a friend.
- Of those who stated they had experienced poor mental health, one in five CYP would do nothing, or block it out.
- CYP were four times more likely to speak to a teacher than a counsellor if they were experiencing an indicator of poor mental health.
- Males were more likely to do exercise when experiencing an indicator of poor mental health than females, at 13% and 7% respectively.
- Only 13% of CYP had used counselling services.
- CYP valued services who they felt had listened well, respected their privacy and were available readily.
- CYP were critical of long waiting lists at services such as CAMHS. They also criticised a lack of continuity in support offered generally, and expressed a wish to learn how to “deal with” mental health in the long term.
- Consistency was also highlighted as fundamental to effective mental health support across services, including diagnosis and advice offered.
- Support with mental health should be extended to schools and colleges, in particular to CYP with disabilities.
- There must be a variety in the environment on offer at mental health services.



Conclusions and Recommendations

Commissioners, Providers and Schools

1. The Children and Young People's Partnership has committed to ensuring all new and existing mental health services are available to all CYPs 0-18 years (up to 25 for children with disabilities). In light of data showing that CYP share the same top five concerns (exam stress, stress, not being listened to, trouble sleeping and school pressure), we agree with this recommendation for the ages surveyed (10-15 years). However, further study would be needed to comment whether this is appropriate for 0-9 year olds and 16-18 year olds. Also, particular difficulties experienced by particular groups ought to be recognised when designing services, for example that female CYP more frequently suffered with poor mental health, in particular self-harm. Also, CYP of 10-11 years may struggle with the transition from primary to secondary school.
2. CYP would benefit from a campaign promoting resilience and tackling stigma in Lewisham schools and community groups. In Lewisham's Mental Health and Emotion Well-Being Strategy a campaign in line with the national campaign "Time to Change" is suggested. A "Time to Change" day could be held in schools and community groups across the borough.
3. CYP value honesty, privacy, being listened to and trust in their mental health support system. These values should be embedded in conversations surrounding mental health, including setting expectations for services available.

Commissioners and Schools

CYP have stated they are more likely to turn to their teachers than counsellors when experiencing poor mental health. Also, exam stress and school pressure were cited as top concerns amongst Lewisham CYP. 89% of respondents admitted to having experienced an indicator of poor mental health. However, when asked, only 16% of CYP felt they had suffered with poor mental health. This suggests that CYP associate experiencing poor mental health with being seriously ill, rather than something everyone can experience.

Where they are not already receiving it, CYP need school-based support for mental health. CYP would benefit from the following provisions, where they are not already in place.

4. CYP would benefit from general education on mental health and wellbeing, through their teachers. This should include:
 - a. Resilience techniques/coping mechanisms (for example, the Five Ways to Wellbeing framework).
 - b. The value of exercise and sport for health as a whole. In the Lewisham CAHMS Transformation Plan, it is stated that 'we want to stop treating the mind and body separately', in relation to health and care services. This should also extend to exercise and sport. Currently, only 11% of CYPs state they would do exercise or sport when experiencing poor mental health.
5. With appropriate training and support, CYP would benefit from a designated teacher to speak to regarding their wellbeing.
6. Teachers should be trained in the importance of the following areas when supporting CYP mental health:



- a. Asking young people how they are feeling.
 - b. Early identification of ill mental health symptoms.
 - c. Signposting services, including the pathways to services. This should include appropriate online services. For example, teachers should make students aware of Kooth, the free, safe and anonymous online support available for all young people in Lewisham.
7. Also, a forum between schools, parents and mental health services seems necessary. CYP expressed dissatisfaction at receiving mixed messages between services, and not enough support within school. It is suggested that schools could be encouraged to have a Mental Health and Wellbeing Representative at PTA meetings. Schools may vary in the way they use this Representative, but ideas may include:
- a. Liaising with other specialists in the school, such as the designated teacher for looked after and previously looked-after children.
 - b. Signposting parents to services.
 - c. Attending CAMHS service user forums and updating schools and parents.
 - d. Promotion of free self-care and resilience techniques such as the Five Ways to Wellbeing, perhaps through school newsletters. CYP are most likely to speak to their family when facing mental health problems, and schools are a channel through which information to help families can be passed.
 - e. Support for parents with CYP who struggle with mental health issues.
 - f. Training e.g. Mental Health First Aid Training. The Representative may then share practice and ideas with the PTA.

These recommendations would help build 'parenting and peer support in the community', as promised by the Lewisham CAHMS Transformation Plan. Within the plan, a commitment has been made to 'strengthening our work in schools'. We agreed with this commitment, and highly recommend the need for strong working relationships between all schools and mental health services.

Schools

8. CYP may also benefit from an elected Representative in their peer group at schools to represent their mental health needs. CYP participation is vital for effective support.

Commissioners

9. In Lewisham's Mental Health and Emotional Well-Being Strategy, a commitment to meeting waiting time standards for CAMHS has been made. We agree that this commitment must be met as a priority.
10. Further qualitative research on CYP mental health experiences in Lewisham would be incredibly valuable. Whilst quantitative research is extremely useful for surveying the experiences of large groups of CYP, some CYP share more honest opinions during one to one conversations. Also, the opportunity to ask follow up questions is presented.

Finally, it is important to note that local services, such as Compass, were highly valued by CYP.



Acknowledgements

We would like to say thank you to all schools, organisations, volunteers and individuals who supported this project and committed time to gathering CYP feedback, including the students and staff at Bonus Pastor Catholic College, Trinity Secondary School, Lucas Vale Primary School, Coopers Lane Primary School, Forster Park Primary School, Launcelot Primary School, PC Wendy Lillie and all staff at the Lewisham Junior Citizens Scheme, the Lewisham Parent and Carer's Forum, the Lewisham Young Advisors and the Young Lewisham Project.

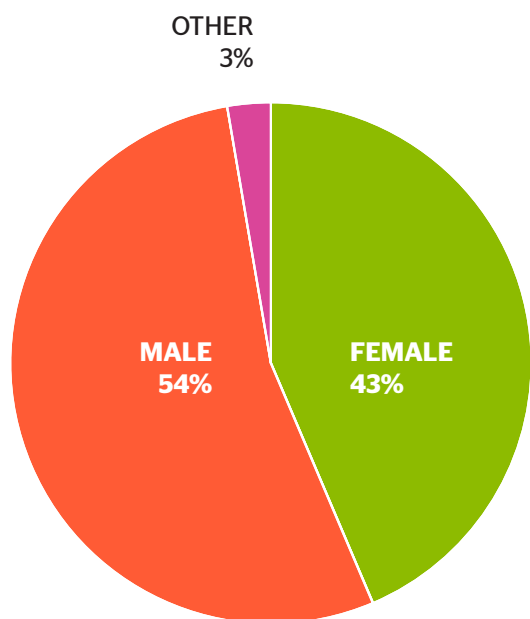
We are also extremely grateful to the Metro Charity for their support in organising and facilitating a focus group.

We would also like to say a special thank you to all the children and young people who took part in the workshops and focus groups, and shared their views with us.

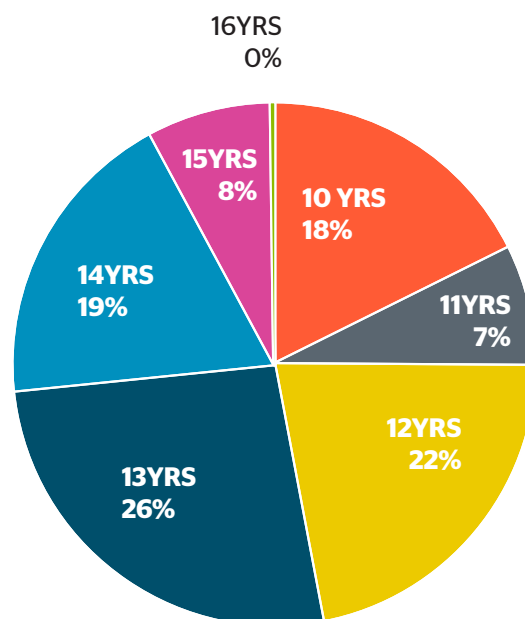


Appendix 1 Demographics of Survey Respondents

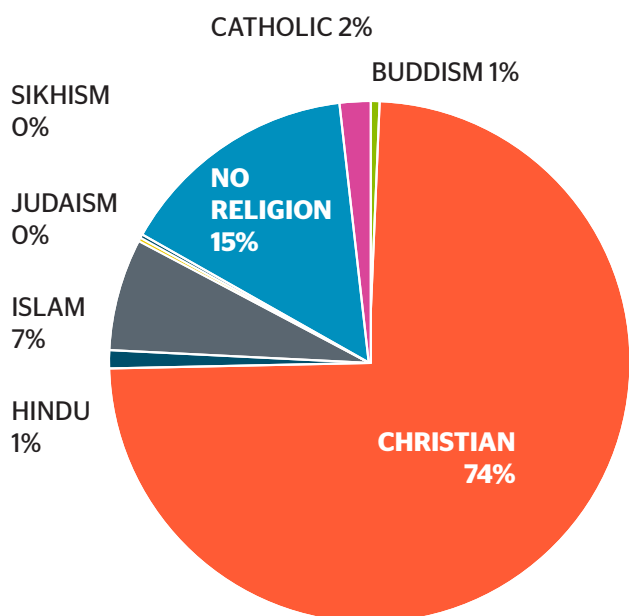
Gender



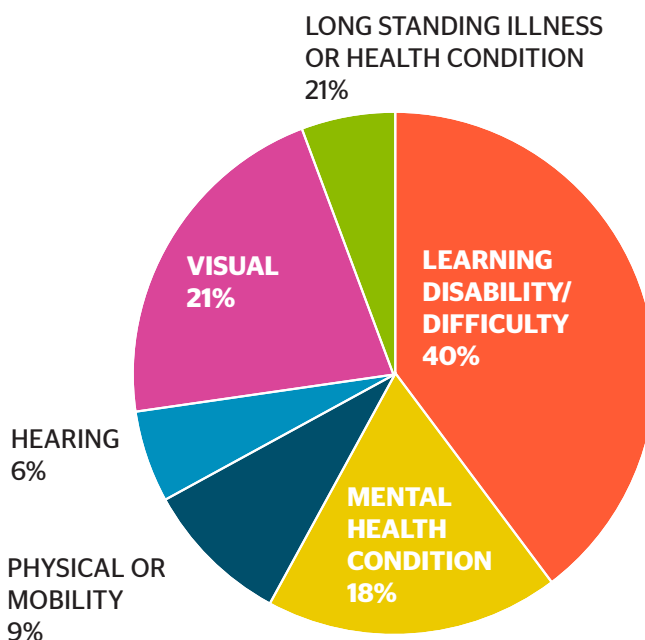
Age



Do you consider yourself to belong to any religion?

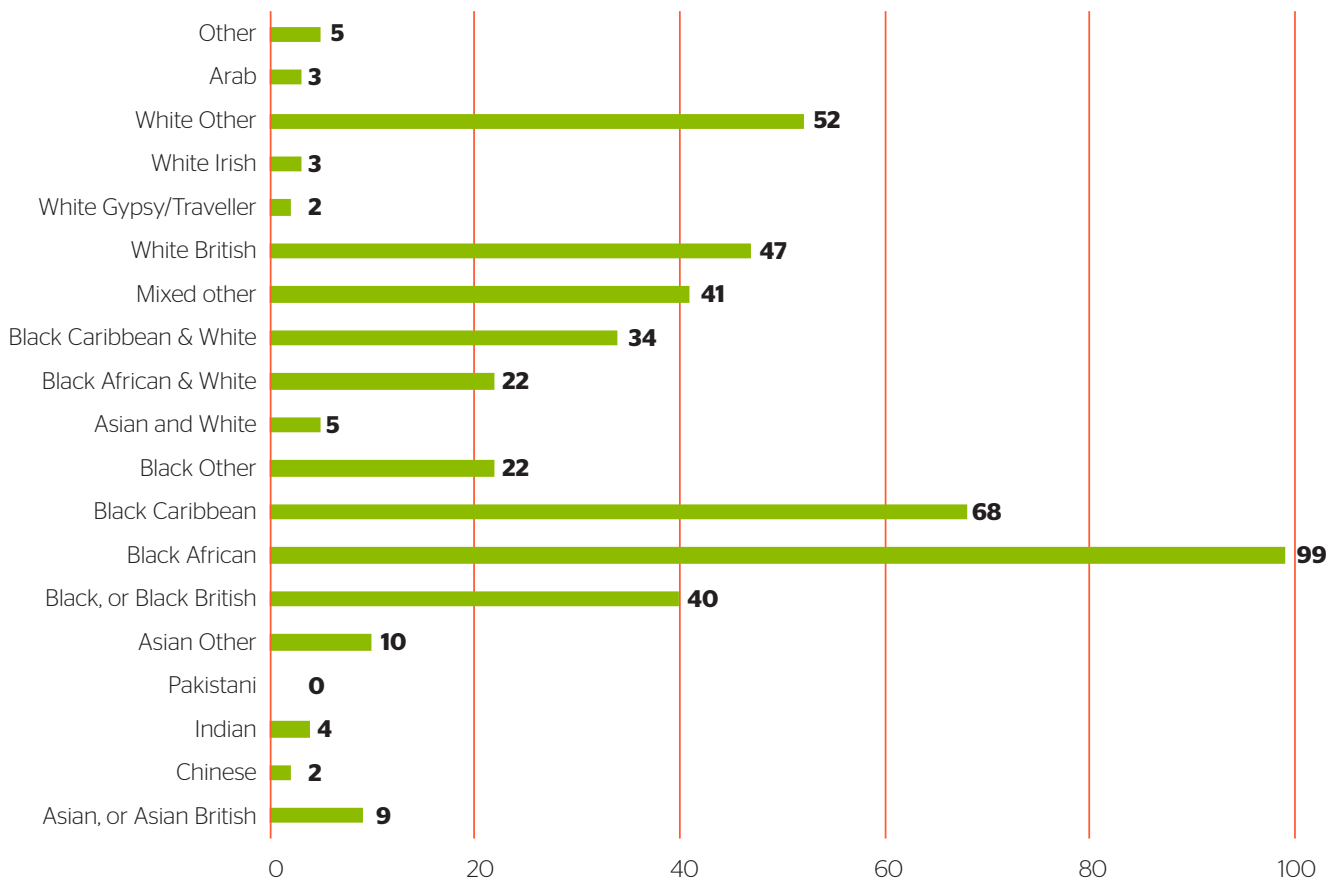


Do you consider yourself to have a disability?





What is your ethnic background?





Appendix 2 - Survey

Please fill out this survey by circling the answers where appropriate. This survey is anonymous.

Do you believe that you have ever suffered with poor mental health?

- Yes
- No
- I don't know

Do you feel any of the following people around you have experienced poor mental health?

- Your Parent/Guardian
- Friend
- Other Relative
- None

Do you feel that you have experienced any of the following?

- Depression
- Stress
- Anxiety
- Trouble Sleeping
- Lack of Interest in Usual Activities
- Peer Pressure
- Eating Disorders
- Family Pressure
- School Pressure
- Alcohol/Drug Misuse
- Self-Harm
- Cyber Bullying
- Not Being Listened To
- Sexual Pressure
- Violence In The Home
- Pressure to Join a Gang
- Exam Stress
- Physical Bullying
- Relationship abuse
- Other(Please state)

When or if you feel that you need support with any of the above, where might you turn to and/or what may you do?

- Friend
- Family Member
- Helpline
- Look on the internet
- Block It Out
- Confront The Issue
- Speak To A Teacher
- Exercise/Do Sport
- Medical Professional
- Do Nothing
- Counsellor
- Other(Please state)

Have you ever used any counselling services? This can include talking to a health professional, a school counsellor, online and/or telephone counselling.

- Yes
- No
- Not Sure

If you circled yes, which service did you use?

- Compass
- Kooth
- Children and Adolescent Mental Health Services
- Counselling at school
- Childline
- Not sure
- Other (please state):



If you circled yes, how would you rate that service?

- Excellent
- Good
- Okay
- Poor
- Very Poor
- Don't Know

Why did you choose that rating?

On a scale of 1-10, how happy do you feel about your life as a whole?

1	2	3	4	5	6	7	8	9	10
---	---	---	---	---	---	---	---	---	----

What gender are you?

- Male
- Female
- Other

What is your age?

Do you consider yourself to belong to any religion?

- Buddhism
- Christianity
- Hinduism
- Islam
- Judaism
- Sikhism
- No religion
- Other (please state):

What is your ethnic background?

Asian, or Asian British

- Chinese
- Indian
- Pakistani
- Asian Other

Black, or Black British

- African
- Caribbean
- Black Other

Mixed/multiple ethnic groups

- Asian and White
- Black African and White
- Black Caribbean and White
- Mixed Other

White

- British
- Gypsy/Traveller
- Irish

Other

- Arab
- Other (please state)



Do you consider yourself to have a disability?

Please circle all that apply

- Learning disability/difficulty
- Mental health condition
- Physical or mobility
- Hearing
- Visual
- Long standing illness or health condition
e.g. diabetes, HIV etc.
- Other (please state):

Many Thanks for completing this survey!

Making Sense of Mental Health 2018-2019

Children and Young People's Wellbeing in the London Borough of Lewisham

First published January 2019

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Healthwatch was established in 2013 in accordance with the Health and Social Care Act 2012.

Within this legislation [Arrangements to be made by relevant bodies in respect of local Healthwatch Organisations Directions 2013] Healthwatch has a right to a reply within 20 working days to Reports and Recommendations submitted by Local Healthwatch to a service provider.

Report & Recommendation Response Form

Report sent to	Ben Travis, Chief Executive of Lewisham and Greenwich NHS Trust
Date sent	04/03/19
Details of report	Making Sense of Mental Health 2018-2019: Children and Young People's Wellbeing in the London Borough of Lewisham A survey of children and young people's mental health knowledge, experiences and opinions on services available to them.
Response	If there is no response please provide an explanation for this within the statutory 20 days
Date of response provided	
General response	
1. Further study into ages 0-9 and 16-18 years. Particular difficulties faced by particular groups should be taken into account when designing services.	<p>Most of the outcomes from this study impact on the South London and Maudsley (SLAM) who provided CAHMS services but we have commented from Lewisham & Greenwich NHS trust Presepective.</p> <p>We will be guided by further research when any services for children in mental health crisis are designed. We will work with CAMHS services when they suggest any changes to ensure that they have thought about different age groups.</p> <p>In addition within the Trust, there is a Transition work stream for 16 - 18, which will capture the recommendation of this report when designing services. We are also looking to apply for funding for a Transition nurse co-ordinator from the Roald Dahl charity.</p> <p>In younger age groups (0 – 9) this is a uncommon presentation however when it does occur particularly in ED e.g. by priotising any young children presenting mental health issues to be seen by a clinician as soon as possible. We also have daily access to the Crisis team from (CAHMS) to enhance the service.</p>

For office use only	
Date response received	
Within 20 days?	

<p>2. CYP would benefit from a campaign tackling stigma in Lewisham schools and community groups.</p>	<p>Outcomes / recommendations from this report will be shared with our community colleagues. However we would happily work with other agencies to deliver a programme to reduce stigma if one was produced. We aim to role model treating physical and mental illness with the same respect and time in our emergency department and wards to help reduce stigma.</p>
<p>3. Honest, privacy, being listened to and trust should be embedded into the mental health support system in Lewisham</p>	<p>We are pleased to see that CYP think that they can come to UHL as a safe place if they cannot access CAMHS and we have worked with SLAM to ensure that CYP can access a Crisis team when they present to our Emergency Department.</p> <p>CYP have opportunities to speak with CAMHS workers in privacy whilst in hospital. We aim to ensure that both CYP and families can speak to the teams separately and together.</p> <p>In addition, staff (multidisciplinary) have undertaken a 1 day training course titled “We can talk” This addressed the key principles in understanding and supporting children & young people’s mental health.</p> <p>The division / Trust is about to sign up to the scheme titled “The Rainbow Project which will help staff support lesbian, gay, bisexual & transgender (LGBT) patients.</p>
<p>Signed</p>	<p>Electronic Signature</p>
<p>Name</p>	<p>Robert Cole</p>
<p>Position</p>	<p>Head of Nursing</p>

For office use only	
Date response received	
Within 20 days?	

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Report & Recommendation Response Form

Report sent to	Lucy Canning, Associate Director of Strategy
Date sent	03/04/19
Details of report	Making Sense of Mental Health 2018-2019: Children and Young People's Wellbeing in the London Borough of Lewisham A survey of children and young people's mental health knowledge, experiences and opinions on services available to them.
Response	If there is no response please provide an explanation for this within the statutory 20 days
Date of response provided	13/05/2019
General response	We think these recommendations deserve support and will be more than happy to incorporate them into our service development plans within our teams.
1. Further study into ages 0-9 and 16-18 years. Particular difficulties faced by particular groups should be taken into account when designing services.	That is an excellent idea - We think that we should do more to incorporate co-production when we are designing teams and services, especially in the commissioning. We don't see many children under 6-7 years old and so some of this could be undertaken by other services. In terms of study, we will take these ideas to our academic colleagues to see if this is something that they could support.
2. CYP would benefit from a campaign tackling stigma in Lewisham schools and community groups.	We used to have a stand at the Lewisham people's day - however this was cancelled this year. I think this is an excellent opportunity to develop links with our local community and reduce stigma. I would welcome any opportunity to work with the young mayors group (or any other) to try to reduce stigma especially using more evidence based methodology
3. Honest, privacy, being listened to and trust should be embedded into the mental health support system in Lewisham	We believe that this is already a part of our Trust commitments and as such all employees would be expected to adhere to these principles. Where there are breakdowns in trust - we would want to know about it and investigate how we could do things better. We can measure improvement through our 'friends and family' test.
Signed	
Name	Dr Omer Moghravby & Brenda Bartlett
Position	Lead Clinician & Service Manager , Lewisham CAMHS

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Date response received	
Within 20 days?	

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Report & Recommendation Response Form

Report sent to	Paul Creech Caroline Hirst Jessica Juon Catherine Bunton <i>Joint Commissioners</i>
Date sent	27/02/19
Details of report	Making Sense of Mental Health 2018-2019: Children and Young People's Wellbeing in the London Borough of Lewisham A survey of children and young people's mental health knowledge, experiences and opinions on services available to them.
Response	If there is no response please provide an explanation for this within the statutory 20 days
Date of response provided	
General response	We think that this is a helpful and wide-reaching report.
1. Further study into ages 0-9 and 16-18 years. Particular difficulties faced by particular groups should be taken into account when designing services.	We thinking that this would be helpful, though we would like to collaborate more closely with future participation work.
2. CYP would benefit from a campaign tackling stigma in Lewisham schools and community groups.	Agreed
3. Honest, privacy, being listened to and trust should be embedded into the mental health support system in Lewisham	Agreed

For office use only	
Date response received	
Within 20 days?	

<p>4. CYP would benefit from general education on mental health and wellbeing through their teachers.</p>	<p>We think that there are some very emotionally literate school staff in Lewisham. There are limits to the direct delivery that school staff should be responsible for. However we find that school staff are very open to learning new skills and working in collaboration.</p> <p>School staff have indicated that they would welcome training around parental mental ill health.</p>
<p>5. CYP would benefit from a designated teacher to speak to regarding their wellbeing.</p>	<p>Agreed, though it doesn't have to be a teacher.</p>
<p>6. Additional training for teachers in schools.</p>	<p>Agreed if evidence based- see above about working with parental mental ill health.</p>
<p>7. A forum between schools, parents and mental health services is necessary, potentially through a Mental Health and Wellbeing Representative.</p>	<p>Agreed</p>
<p>9. CAMHS waiting time standards must be met.</p>	<p>Agreed</p>
<p>10. Further qualitative research on CYP mental health experiences in Lewisham.</p>	<p>I think that this is about joining up the good work that is already happening.</p>
<p>Signed</p>	<p>David McCollum and Jessica Juon</p>
<p>Name</p>	<p>As above</p>
<p>Position</p>	<p>Commissioners</p>

For office use only	
Date response received	
Within 20 days?	