

Children & Young People's Mental Health & Wellbeing.

Experiences through COVID-19 Pandemic Report.

May 2022



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Introduction

Healthwatch Warrington acts as the public's voice in delivering health and social care services. We collect feedback from the public about their experiences of using health and social care services and share that information with service providers and commissioners to look for ways to improve services. One of the ways that we collect feedback is by carrying out focused projects that look at a particular service or condition.

In 2020 Healthwatch [undertook research around Children and Young People's mental health](#) services in Warrington and met with children and young people to gather their views and experiences. This priority was chosen due to the Public Health Joint Strategic Needs Assessment (JSNA), which identified a rise in self-harm Accidents and Emergency presentations for young people. As part of our recommendations, Warrington CCG asked us to complete further independent research to identify a larger sample of information and review the support available for children and young people around mental health and wellbeing services and to research how young people were affected during the Covid-19 period.

We recruited a part-time, twelve month post to work with children and young people to gain their experiences with mental health services. Our Children and Young People Lead is a qualified integrated counsellor/psychotherapist and advocate.

What we did



Healthwatch designed online and paper versions of four separate surveys for Children and Young people, Parents, Teachers and school staff, Professionals and GPs. We received a total of **1083** completed surveys.

As another form of consultation, Healthwatch also engaged with children and young people and parent/carer groups in the Warrington community talking to over **259** people and hearing their feedback.



What we did

Survey Data

GPs	21 Surveys
Teachers	87 Surveys
Professionals	11 Surveys
Parents	384 Surveys
Young People (KS3, KS4, KS5)	554 Surveys
Children (KS1, KS2)	26 Surveys

Engagement Interviews

Parent/ Carers	69 1-1 interviews
Young People	132 face to face engagement
Teachers/ Mental health teams	16 1-1 interviews
CYP Practitioners/ Professionals	42 1-1 interviews



1342 people

Fed into our report across outreach work and surveys.

Who took part in our research

Wired Young Carers	St Joseph's Family Centre
Express Children in Care (CICC)	CAMHS
Empower (Ethnic Minority Group)	Warrington Youth Club
WARPAC	Warrington Home-Start
Parents in Mind (PIM)	
Warrington Schools (All stages)	
Kooth	

The organisations above helped to distribute our surveys and were vital in our outreach and face to face sessions.

Young People

Basic analysis of the feedback received through our survey for children in KS3 (11- 14 years), KS4 (14-16 years) and KS5 (16-18). We received a total of **554** responses.



Young People

Overall, **554** respondents completed this survey. Students who completed the questionnaire attended various schools, including Priestley College, Birchwood, Kings Leadership Academy, Beaumont Collegiate Academy, Culcheth High School, Sir Thomas Boteler, Bridgewater High School, and UTC Warrington.

When asked how the pandemic made them feel emotional, students mostly said *"worried"*, followed by *"I remained positive"* and *"sad"*.

Those who selected *'other'* commented that the pandemic made them feel *'bored, lonely, depressed, stressed, anxious, unmotivated, overwhelmed, and mixed emotions'*.

Students were asked what they did to stay happy and well during the lockdown. The popular answers were music, online gaming, social media, walking, and exercise. Of those who answered *'other'*, students said they engaged in activities such as *'reading, baking, playing the piano, watching Netflix, online classes'*, and spending time with their friends and family to stay happy and well. **21%** of students who completed this questionnaire were in Year 11 or Year 13. Of this **21%, 54%** were worried that lockdown may have had a negative impact on their GCSE or A Level results.

For those in Year 11 or Year 13, **58%** said the pandemic has not changed what they want to do after leaving school.

Of those that said the pandemic has changed what they want to do after leaving school, students commented.



"I was set on wanting to go to University to study, but I am not changing my preference to a higher/degree apprenticeship."

and

"I had the chance to do more research into different career prospects."



When asked how they felt about spending more time indoors with their family/carers, students mostly said they enjoyed it or that it was no different from usual. When asked to comment on this, there was a mix of answers from students who enjoyed spending time with family. They became closer to students who did not want it and stated that it caused a lot of tension in their household.

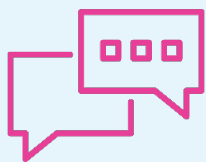
Most students said that after lockdown, they felt both *"ok"* or *"nervous"* about returning to school and other routines.

When asked to comment further on this, students mentioned they felt *'exhausted, 50/50 both nervous and excited, drained, stressed, apprehensive, angry, and terrible'*.

Only **16%** of students said social media was no help to them. Many students commented to say social media allowed them to *'talk to family and friends, it prevented them from being bored, it was entertaining, and helped to keep them occupied.'* In contrast, some students called social media *'toxic'* saying it made them *'unproductive'* and is also a method used for bullying.

Students were asked who they would talk to if they were sad, anxious, or had negative thoughts. Most students said they would speak to a friend or someone at home. This was followed by **30%** of students saying they would not talk to anyone.

For those students who selected *'other'* (6%), they said that they would talk to their:



'teachers, external family, therapists, boyfriend, girlfriend, CAMHs, Counsellors'

and some students said they would "talk it through with themselves".

Most students who took part in this questionnaire said they are aware of what services are available to support them with their mental health and emotional wellbeing. **16%** of students said they were unaware of the services available to help them, and **8%** said they would like more information on this topic.

72% of students said they would feel confident in talking to their friend if their friend was sad, unhappy, or had negative thoughts.

Students were asked what the things that upset them were. Most students said *"worrying about things"* upsets them most, followed by a *"lack of confidence"*.

Of those who said *'other'*, students commented that *'overthinking, bullying, not seeing their friends or family during the lockdown, schoolwork, poor mental health, friendships, and bereavements upset them'*.



28% of students

Considered themselves a Young Carer.

Overview

Out of **554** responses, it was concerning to hear that **33%** of children and young people reported feeling worried, and **27%** reported feeling sad throughout the Covid period. On a plus point, it was good to hear that **28%** of children and young people felt positive, and lockdown had a positive effect. It is good to report that the children and young people were creative in their activities, which appear to have kept them occupied.

58% of year 11/13 remained focused on their career goals, and their choices were unaffected throughout Covid.

There was anxiety for children and young people returning to school, but a most concerning **30%** of children and young people said that they would not talk to anyone if they were feeling sad/anxious or had negative thoughts.

Most students know about children's and young people's mental health services, but **16%** said they were unaware, and **8%** wanted more information.

Children

Basic analysis of the feedback received through our survey for children in KS1 (5-7 years) & KS2 (7-11). We received a total of **26** responses.



Children

Overall, **26** respondents took part in this questionnaire. Restrictions due to Covid did not allow us to fully engage with children at school in a classroom group environment.

62% of respondents attended St Augustine's Catholic Primary School, while the remaining **38%** were students from Broomfields, Bradshaw Community Primary School, Guardian Street, and St Matthews.

We made the online survey interactive and used icon imaging to help engage the children

Q1 What School do you go to?
Although your school is identified your personal identity is confidential and anonymous.

Q2 How did you feel when you were in lockdown?



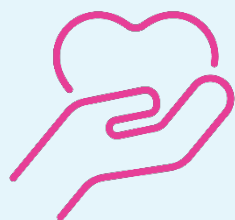
Q3 Did you miss your friends?



Most respondents reported feeling 'ok', with **39%** of respondents and **35%** saying 'sad' during the lockdown, and just 27% of children said they felt 'happy'.

When asked if they missed their friends during the lockdown, most respondents (**85%**) said 'yes'.

The respondents reported they did various activities during lockdown to help them feel happy. **54%** said they enjoyed playing, drawing, walking, and taking care of pets.



Students said they missed Interacting with friends face-to-face suggesting that they did not get the same benefit from online communications.

Over half of the respondents said they **played (54%)** to make themselves feel happy, closely followed with the smallest number of respondents saying they completed homework to make themselves feel happy. For those who said 'other', spending time socialising with friends and family and gaming were the most popular answers.

When asked, "did you enjoy doing your schoolwork at home?", most respondents opted for 'sometimes'.

When asked if they wanted to go back to school after lockdown, most respondents said they wanted to go back to school when lockdown ended (**65%**), with only a small number of students reporting they did not want to, and **12%** stating that they were still at school.

When asked, *"what did you miss doing the most during lockdown?"* students responded with various activities, social occasions, and pastimes.

The most prominent theme from this question was that students missed socialising with friends and family. Students admitted that they *'missed seeing friends and family'* and *'all people that didn't come to school'* as well as their *Teachers, Grandmas and Grandads, School friends, Uncles and Cousins.*

Students also reported missing face-to-face *learning in school* and *going to school in general.* They also said they missed specific lessons, such as *Maths* and *P.E.* Again, suggesting that they did not get the same benefit from, or did not enjoy as much, online teaching and learning during the pandemic.

Another common theme from this question was that respondents missed being able to go out and do the activities they could usually do before the pandemic. They *missed playing football* and *going to the park* and *swimming.*



The majority of respondents were in year 6
32% were not looking forward to going to secondary school and 11% weren't sure.

When asked what their favourite lesson was, the most popular answers were: *Maths, Art, P.E, English, and History.*

When asked what else they like about school, most answers related to seeing their friends and teachers, lessons, and learning.

When asked *"what makes you happy?"*, most respondents answered with *'seeing their friends and family, their pets, going to school, or playing'.*

Overview

Out of the **26** students who responded, it was clear that they struggled with the lack of face-to-face learning and missed the more practical lessons such as P.E.

Whilst **27%** stated they were happy being at home, **74%** claimed they were either ok or sad. Not having social interaction was a struggle, all respondents missed seeing their teachers and friends and families and especially their grandparents.

76% of respondents are in year 6 and due to start secondary school, **32%** were not sure how they felt about this transition, and **11%** were not excited. This is a big transition for the pupils and will be a very different environment to acclimatise to after the previous 2 years.



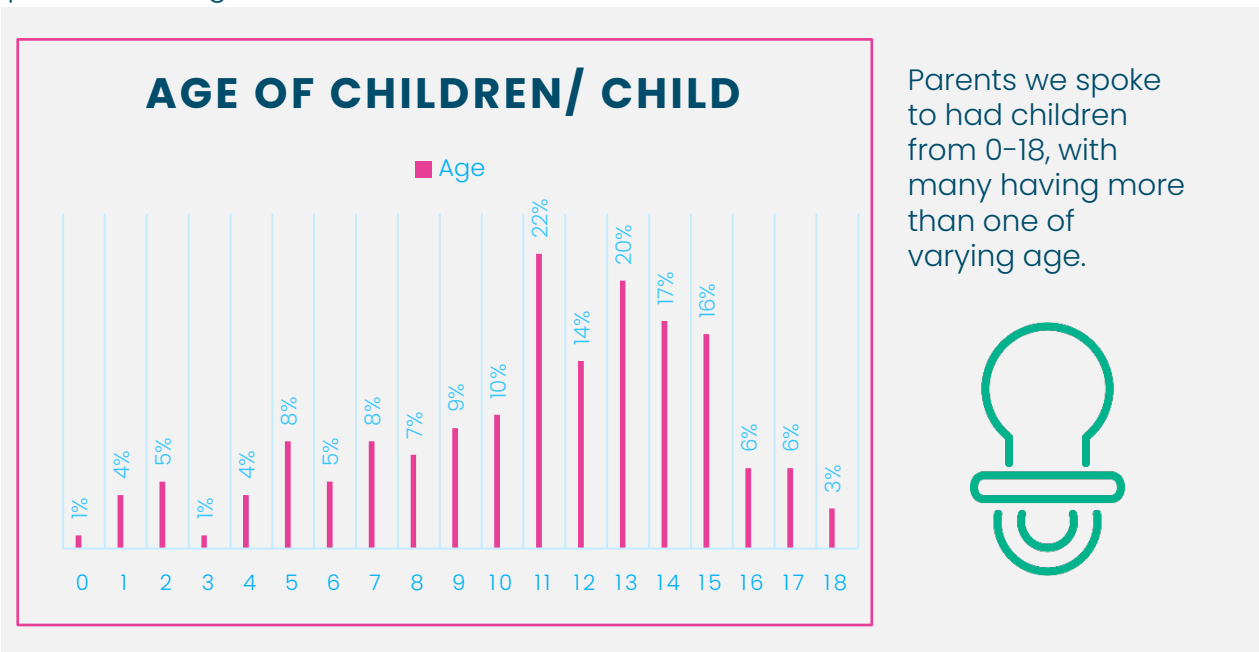
Parents

Analysis of the feedback received through our survey. Overall we had **384** respondents.



Parents

Overall, **384** respondents took part in this survey. Most respondents reported having between 1-5 children between the ages of 0-18 living at home with them, with most parents having 2 children.



60% of parents said *“they think the pandemic has had an impact on their children’s emotional wellbeing or mental health.”* Only **16%** thought the pandemic had no impact.

Many parents said that the pandemic has impacted their children’s mental health by causing them to become *‘more anxious, withdrawn, isolated, very nervous, lonely, stressed, worry more, more cautious, and have deep sadness about the future’*.

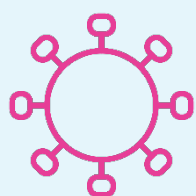
The pandemic has had a



“Major impact on development and social skills” – Comment from parent



Parents also comment that the pandemic has impacted their social skills and ability to socialise with others, saying: *"they are now socially awkward and have a hard time opening up to new relationships"*, *"unable to socialise"* with others, and *"loss of social skills"*, with many saying children have become more *"clingy"* or *"withdrawn"* as a result. Some adults also reported their children developing more serious mental health disorders because of the pandemic, such as *'eating disorders, anxiety, self-harm behaviours, and depression'*.

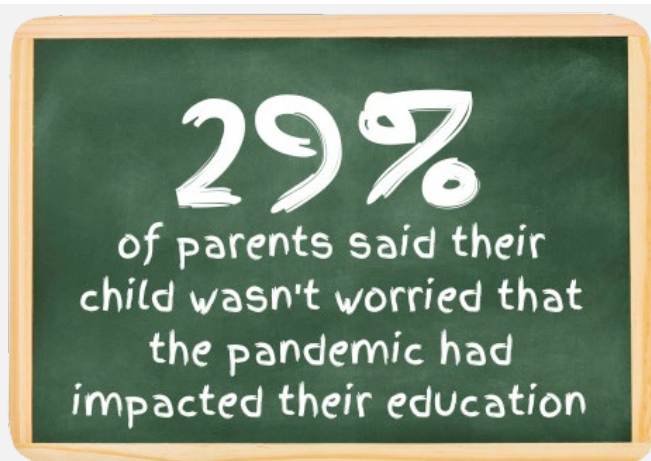


93% of parents

Said that not seeing their peers and family impacted their children

Only **7%** of parents said not being able to see their peers and family did not impact their children. Parents noted that not being able to see their peers and family made them feel *'isolated, worried, anxious, lonely, frustrated, sad, upset, bored, fed up, and angry'*. Many parents explained that they greatly missed seeing family members and friends.

4% of those who took part in the survey said their child is a young carer.



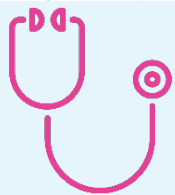
46% of parents said their children's confidence was affected when they moved forward to their new year group, school, university, or job while **37%** of parents said their children's confidence was not impacted.

Those who said their children's confidence **had** been impacted alluded to their children worrying about *'being behind'* in their studies, feeling as though *'they had lost a school year and had not been taught the topics they needed'*. This meant a lot of children are feeling *'worried and anxious'*, especially about upcoming exams such as GCSEs.

85% of parents said their children were home-schooled during the lockdown. When asked further about this experience, only **31%** of parents said their children's home-school experience was 'good' or 'very good'.

Parents were asked what their children did to stay happy during the pandemic. The most common responses were: playing video games/on phones, exercising, socialising with friends and family, arts and crafts, schoolwork, watching tv, social media, and reading.

11% of parents said their children spoke to their GP during the pandemic about their mental health. Responses were split as to whether parents believed this was helpful or



**18% Easy to see a GP
and make an appointment for their child**

16% of parents said that their children accessed services, support groups, or drop-in groups during the pandemic, such as CAMHs, SALT, counselling, and school groups – **61%** said their experience was 'good' or 'very good'.

12% of parents said their child was referred to a counselling service during the pandemic. Some parents are still waiting for sessions; some say that the sessions they received were helpful but would like more, and some say that it has benefited their child. A small number of parents said sessions had not had any benefit on their child.



These parents commented that they chose to do this as waiting lists are too long for NHS funded counselling, with some parents waiting 17 months, and to get a better quality of counselling than NHS funded equivalent.

17% of parents said they had attended services, support groups, or drop-in groups, where they received help to support their children. Most parents say these groups were accessed through school, CAMHs, online, or private counselling. **65%** of these parents said these services were 'good' or 'very good'.

When asked if their children's experiences have affected their emotional wellbeing, **55%** of parents said 'yes'.

Overview

Unsurprisingly, parents have stated that the Covid-19 pandemic has seriously affected their children's behaviour. Unfortunately, some are reporting new serious mental health disorders, including anxiety, eating disorders, self-harm and depression.

12% of parents stated that their child was referred to a counsellor. Some parents are still waiting for sessions. **5%** of parents opted for private counselling, as waiting times for NHS were too long (Some parents stated 17 months+ waiting times).

One of the concerns regarding counselling is that some parents may be able to afford private sessions financially, but in general most families cannot fund private sessions.



There was positive feedback from parents who had attended services themselves (**17%**). They had stated that these groups were accessed through schools, CAMHS online, or private counselling. **65%** said the service was 'good' or 'very good'.

Parents had said that their children's negative mental well-being had affected their mental health and well-being.

Teachers

Analysis of the feedback received through our survey for teachers. A total of **87** teachers took part in this survey including Assistant Head Teachers, Senior leaders, Head of Departments, Teaching Assistants, Head Teachers, Head of year groups, and learning mentors.



Teachers

87 teachers took part in this survey from a range of schools including : Sir Thomas Boteler, Culcheth High School, Woolston Brook School, UTC Warrington, Evelyn Street Primary School, Bradshaw CPS, Padgate Academy, Great Sankey High School, and St Augustine's Primary School. The position of these individuals ranged greatly, including Assistant Head Teachers, Senior leaders, Head of Departments, Teaching Assistants, Head Teachers, Head of year groups, and learning mentors.

When asked what changes they have noticed in the emotional wellbeing and mental health of their pupils since returning to school after lockdown;

Teachers noted



- All forms of anxiety have increased
- Lack of confidence
- Even less emotional resilience than before the pandemic
- Most vulnerable students' issues have increased
- Behaviour and concentration have deteriorated
- Less motivated
- More frustrated
- More aggression
- Struggling with busy social situations
- Friendship difficulties

“Socialisation skills have been significantly affected”

When asked if they have noticed any positives that have emerged for some young people during the lockdown, the majority of respondents (**58%**) said 'no'.



Of those who said they had noticed positives, they noted these as students gaining independence, showing more resilience and confidence, and students being able to spend more time with their family where normally they would not be able to.

When asked if they thought home-schooling had a positive outcome on any of the children, the majority of respondents (**53%**) said *'no'*.

For those who answered *'other'*, most maintained that it is more beneficial to those whose parents were able to spend time engaging their children in learning and not particularly useful to those with additional needs.

71% of respondents said that there had been an increase in school absences since the return to school after lockdown. Of this **71%**, **58%** said that this increase has been significant.

85% of respondents said their school had to implement new measures to support young people's emotional wellbeing and mental health. These included a range of measures such as adapting the timetabling of the school day to accommodate anxieties, wellbeing support sessions, training for staff, increased mental health

s



81% would benefit from a mental health practitioner

However, only **43%** said their school had been allocated a mental health practitioner, but of those who have, the majority said their experience was *'sufficient'* but they would like more time allocated as they feel their students need an increased number of sessions and would like more to have the opportunity to see a practitioner.

46% of respondents said they feel young people are '*unaware*' of what mental health services are available to support them, and **46%** of respondents said there are '*gaps*' in the services being accessed by young people.

Most respondents said they feel '*confident*' in recognising pupils presenting with emotional problems. However, **59%** said they would '*not feel confident*' signposting parents/carers to appropriate services to support their children or would like more information on this.

75% of respondents have had pupils who have self-harmed, and **68%** of respondents have had pupils present with suicidal thoughts. Despite these large numbers, most respondents feel they need extra support in both areas.

Extra support

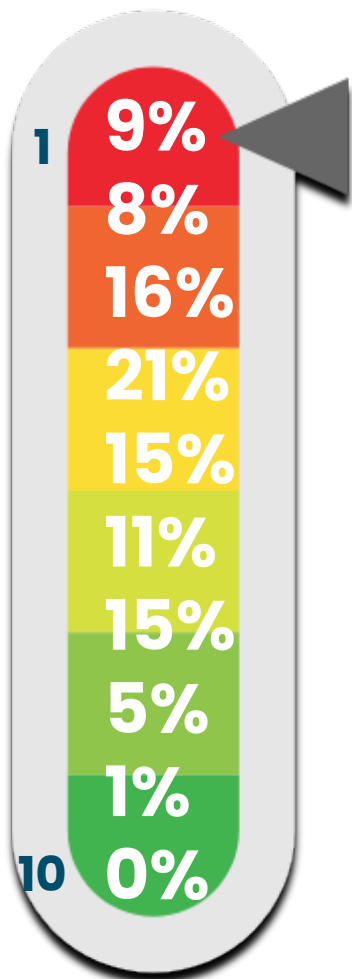
Respondents wanted more support and information on how to deal with students presenting with:

69% Suicide

65% Self-harm

32% Other

Those who chose '*other*' suggested they would like more support with eating disorders, anxiety, OCD, and emotional distress.



Respondents were asked if the changes in the approach to teaching during the pandemic had any impact on their own wellbeing. Respondents were asked to mark from 1-10. 1 being a huge negative impact on their wellbeing and 10 being a huge positive impact on their wellbeing.

28% Respondents said they received no support for this.

80% Have had concerns for their colleagues' wellbeing since the pandemic.

54% Feel confident in supporting a colleague who started to talk to them about their mental health.

Overview

87 Teachers from a variety of schools in Warrington completed the survey.

Teachers had concerns around 'most vulnerable students' as their issues have increased. There will be long-lasting effects on children's behaviour, including their inability to maintain relationships.

Teachers had commented on the positives that had emerged from lockdown and that some students had increased independence and confidence.

43% of teachers had been allocated a mental health practitioner. They stated that they would like more time allocated, as students needed increased sessions and would want other students to have the same opportunity.

46% said they feel that there are 'gaps' in the services being accessed by young people. On a positive note, many teachers stated that they feel confident in recognising students presenting with emotional needs. However, **59%** said they would not be confident signposting parents/carers to appropriate services.

A very concerning result is that **75%** of teachers have said that students have self-harmed, and **68%** said that students had presented with suicidal thoughts. Teachers feel they need extra support with this.

80% of teachers said they had concerns for their colleague's mental health/emotional wellbeing. Only **54%** said that they would feel confident in supporting a colleague.

28% of teachers did not receive support, even though the pandemic had caused a higher negative impact.



Ultimately it is better for the vast majority of our pupils to be in school, however lockdown has given some of our parents more time and greater confidence in addressing challenges and building relationships, with careful staff support and provided resources. Some of our pupils have thrived when they've been able to have constant 1:1 support from a parent, and are completing home learning tasks set by school.



Practitioners/Professionals

Analysis of the feedback received through our survey for Professionals/
Practitioners a total of **12** responses. These include those who work with children
who aren't classed as a teacher/ GP.



Practitioners/ Professionals

12 professionals took part in this survey.

100% of professionals said that since the beginning of the pandemic their service had seen an increase in the number of children and young people presenting with mental health issues. **83%** said this increase had been significant. **0%** of professionals reported this increase to be minor.



100% increase in Anxiety
closely followed by Depression.

Professionals also said that more CYP have been presenting with

- Suicidal Thoughts (50%)
- Eating Disorders (33%)
- Self- Harm (33%)

Other mental health issues reported by the professionals were:

- Intrusive thoughts
- PTSD



70% of respondents said their service refers children and young people for mental health support and assessments. Those who do, said they refer to services such as CAMHS, perinatal mental health services, counselling services and therapies.

88% of respondents reported that their service supports children and young people during the pandemic.

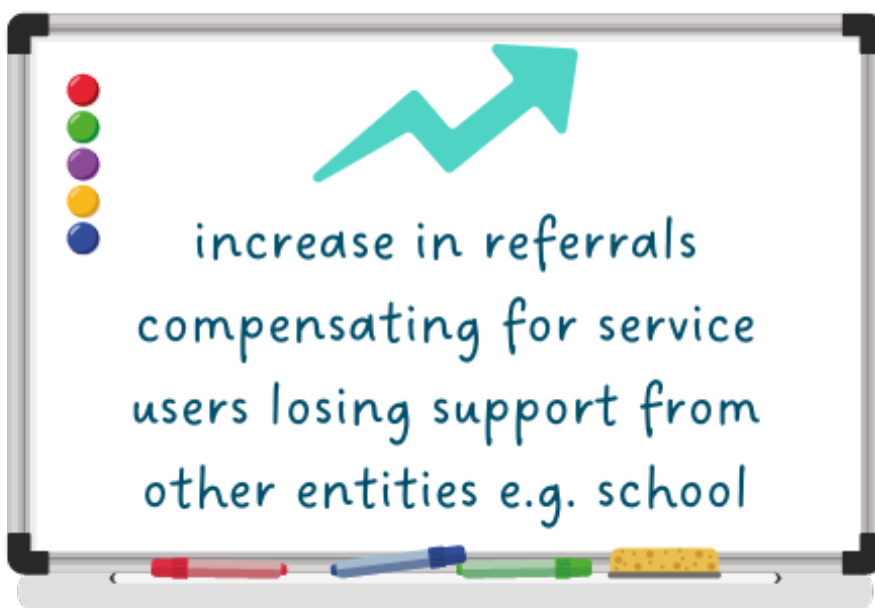
100% of respondents said that the pandemic had made an impact on their service.

These professionals said the impact on their service related to an increase in the number of referrals, people accessing their services and insufficient staffing levels.

86% of respondents said that their service supported families during the pandemic. Again, of those who said their service supported families, **100%** said the pandemic has had an impact on their service.

These professionals said the impact on their service related to an increase in referrals and the number of people accessing their services, increased waiting lists, having to support their service users virtually rather than face-to-face, and funding.

80% of respondents said their service supported parents/carers of CYP during the pandemic. Again, of this, **80%** who supported parents/carers of CYP said that the pandemic has had an impact on their service.



60% of respondents said their service has supported young carers during the pandemic. Again, of those who had supported young carers, **100%** said that the pandemic has had an impact on their service.

When asked if they thought whether their service or themselves could benefit from any training to support them in their role, **56%** of professionals responded 'yes'.

GPs

Analysis of the feedback received through our survey for GPs. A total of **21** responses from various GP practices throughout Warrington.



GP Survey

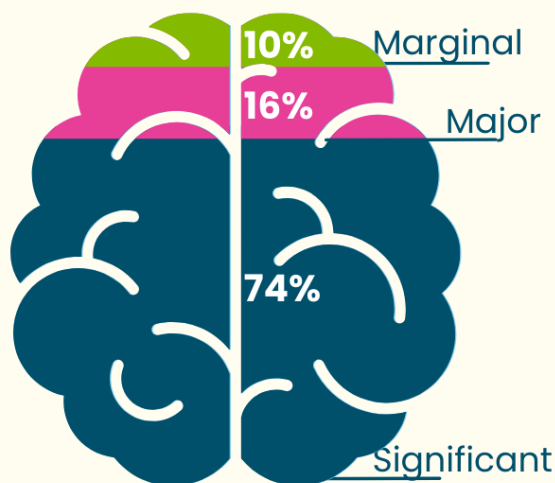
OVERALL, **21** GPs RESPONDED TO THIS SURVEY.



healthwatch
Warrington

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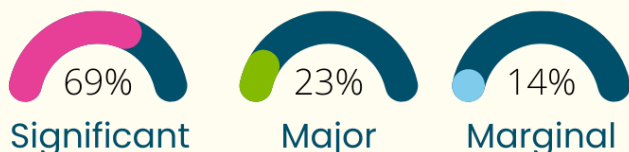
90%
of GPs had seen an increase in appointments presenting with Mental Health issues
5% said they were unsure.



Since the start of the pandemic has there been an increase in referrals to CAMHS?



How significant has the increase been?
Only 13 GPs responded to this question



I know CAMHS are underfunded but do they really need to reject every single referral?

How satisfied are you with the service CAMHS provides?

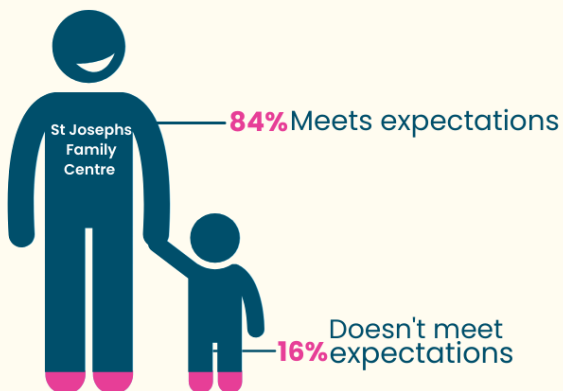


The bar for CAMHS intervention is so high that it makes the referral process frustrating. The other services seem patchy at best.

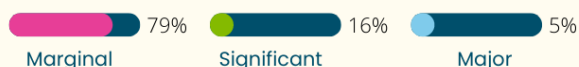
Since the start of the pandemic has there been an increase in referrals to St Josephs?



How significant has the increase been?



During the pandemic have you had an increase in referrals to the private sector for CYP accessing counselling?



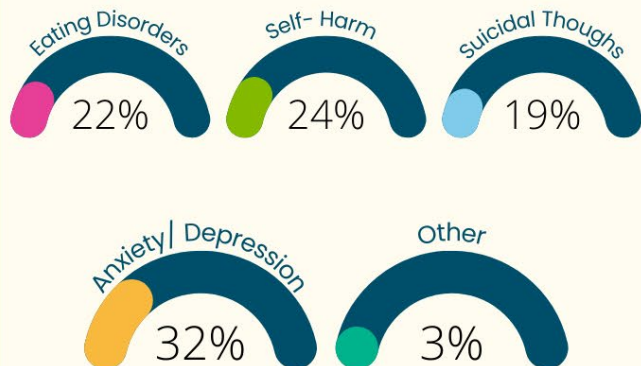
GP Survey

OVERALL, **21** GPs RESPONDED TO THIS SURVEY.



Children & Young People's Wellbeing Report 2022

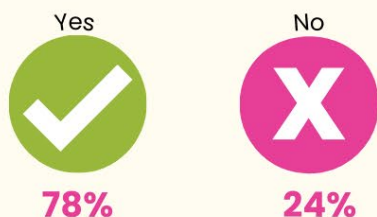
Have you had an increase in CYP presenting with any of the following?



Other: ADHD, Autism, Social Phobia, Agoraphobia

Timely access to CBT and condition specific support eg for eating disorders. Dedicated counselling service for young people not available - aware of Kooth and happy ok sad online resource but not substitute for personal contact. Also not much available for parents / carers of these young people.

In your experience are there any issues/gaps in any of the commissioned services that support CYPs mental health?



Absolutely no help for primary care if referrals are rejected even before an assessment! There is no provision for counselling or support.

In your experience are there adequate services for you to refer/signpost parents/carers to who require support, advice, and information to help them support their children with their mental health issues?



The service is very confusing for those transitioning to Adult services . 16 and 17 year olds tend to be in ' limbo' when it comes to their care. As a GP I'm often unsure how to proceed with such patients

What services do you refer to?



Increase in Young Carers since the pandemic?



When asked if they had referred anyone to WIRED Young Carers four said "yes."

GP

Overall, GPs find the referral process difficult to navigate; there are *'Not enough psychiatrists. Not enough support. Patients tend to get bounced back to the GP.'* They feel that *'current services are not fit for purpose.'*



"I feel helpless as a GP because there is no one helping us with these young people. Parents are in despair."



CAMHS Comments

"CAMHS are overwhelmed by crisis presentations and there is no leeway to assess/support families before that stage is reached."

"I know CAMHS are underfunded but do they really need to reject every single referral. Could we have a community service for young people"

"The bar for CAHMS intervention is so high that it makes the referral process frustrating. The other services seem patchy at best"

"Timely access to CBT and condition specific support e.g. eating disorders. Dedicated counselling service for young people not available - aware of Kooth and Happy- Ok- Sad online resource but not substitute for personal contact. Also, not much available for parents / carers of these young people."

"A lot of patients and families unfortunately don't find CAMHS particularly useful. They did not find that the 'exercises/ strategies/tools' they were given were very helpful. I'm often told that once a risk assessment was done there was no further input. The service is also very confusing for those transitioning to adult services. 16 and 17 year olds tend to be in 'limbo' when it comes to their care. As a GP I'm often unsure how to proceed with such patients"



One GP mentioned that they found “Kooth.com have really been very accessible and helpful”

CAMHS, Young Minds, Mood Juice, Kooth, Anxiety UK, BEAT (Whiston ED service), Mindfulness Activities (Alder Hey), Advanced Solutions.

Other Comments

“At the moment there is a bizarre arrangement that for an adolescent to access mental health services they are required to humbly present their problems in front of a usually middle-aged GP to ‘get a referral’ to get help. When they do attend, we have to proceed with a technically challenging form filling exercise more suited to the puzzle pages of a newspaper and submit it in the hope the poor child and family gets some sort of help. However’ commonly we get letters back telling us we did it wrong and to try something else. A system needs commissioning which is family centred and manages all issues across the spectrum. This could still be based in primary care, but we need resources not to deal with the ‘too complex’ , but really to manage the ‘routine’ effectively.”

“Absolutely no help for primary care if referrals are rejected even before an assessment! There is no provision for counselling or support.”

“I think if I was an adolescent with mental health problems then the most influential people to me would be other adolescents. Not sure how you build that into the primary care offer!”



90% Increase in Mental Health issues
There isn't enough support available and GPs feel 'helpless'.

Response from Primary Care Network leads

"The increase in children seen with mental health issues has become significantly higher than pre-pandemic, and we have been trying to address this prior to the onset of Covid. At this point in time, the demand has escalated quite significantly and we are really struggling to accommodate not just the demand but support ongoing needs. There is a definitive lack of integration across the systems, which makes the journey much more difficult. As a PCN, we are looking at various options with mental health providers to provide a collaborative solution and improve access for children and young people. For the East PCN, mental health is a top priority, and we are committed to ensuring that young people get the support they need at the right time. What the report has highlighted is difficulties experienced by the users of the service as well as primary care who are working with the patients."-**Dr.Rakhi Raj -Clinical director Warrington East PCN**



"It is very clear that the events of the last few years have only worsened the Mental Health of our population nationally. An already greatly stretched health service has now had to cope with an unprecedented escalation in demand that it was not fit to accommodate. The experience of the patients and my fellow colleagues detailed in this report is very distressing to read. We are committed as a PCN to work with our system partners, including the specialist providers, commissioners, and NHS England, to look at ways of working together to improve this situation."-**Dr.Laura Mount – Clinical Director Central and West PCN**

CYP Outreach Work

In addition to the surveys, our Children & Young People Outreach Lead visited schools, support groups and set up one-to-one meetings with parents and young people and professionals.



CYP Outreach Overview

IN CONJUNCTION WITH THE SURVEY WE ENGAGED WITH CYP AND PARENT AND CARER GROUPS IN THE COMMUNITY AS WELL AS SEVERAL SCHOOLS TO GAIN FEEDBACK



Children & Young People's Wellbeing Report 2022

259

peoples voice heard

- 69 Parent / carers interviewed on a 1:1
- 132 YP face-to-face engagement
- 16 Teachers/ School mental health team
- 42 CYP Practitioners / professionals

GROUPS

- WIRED Young Carers
- Children in Care Connect
- EMPOWER
- Parents In Mind (PIM)
- WARPAC
- Home-Start
- Kooth
- St Joseph's
- CAMHS
- WYC



Trends

Extremely isolated, low mood, anxious, exhaustion, lack of support due to lockdown, frustration, guilt towards children and partners

Home-Start had a positive impact on wellbeing and mental health of all mums that fed back, resulting in a more confident relationship with baby/ children and in some cases partners.

"Being referred to Home-Start has been a lifeline"

27 service users feedback

17 had a good experience 10 Online support not for them

3 YP stated they held back on their issues as they didn't feel 100% relaxed
"Wasn't sure if our conversation was confidential, always warned about internet safety"

Out of 17 who had a good experience:

- 8 Happy with online counselling
- 9 glad accessed but prefer face to face



Kooth had a significant increase in referrals since the start of the pandemic.

33 Young People aged 13-19 who have accessed CAMHS

- 27 Young people said they had waited 10 months or over for support.
- 7 YP said when they eventually had an appointment the session went well and they talked a lot.
- 19 Said they had a telephone or online appointment and after the conversation were told they would not be seen again for several months.



20 Teacher / Support Staff 26 Parent / Carers 14 Professionals

- 5 Parents said once their children did receive support, it was good.
- 20 School staff all stated they do not have faith in the service.
- 50 Said CAMHS waiting list is unacceptable and far too long, and shared concerns there are NO appointments for under 8s.



- 6 Groups TAGS, EMPOWER, Children in Care Council (CICC) Warrington Youth Voice, Young Carers, WYC & The Girls Group
- 9 Children in Care Council all struggled with their emotions during lockdown and dreaded one another.
- 7 Empower Lockdown had been particularly difficult and the group provided them much needed support. Since joining the group, their mental health and outlook on life had improved.
- 4 The Girls Group Missed Youth Club during pandemic, but group "helped us how to improve our mental health when on social media."

6 Young carers All said caring roles increased significantly during the pandemic. Increased feelings of loneliness, sadness and isolation.

Referrals to service have increased significantly during pandemic.



During the Pandemic Warrington Parents and Carers were able to work much more closely with the Local Authority supporting over 70 families in crisis helping with issues arising across education, health and social care.

2 Parents spoke to us about how invaluable WARPACs support was during the pandemic.

Parents in Mind offer mental health support both 1-1 and in groups to pregnant women and to parent/carers with an infant under two, experiencing mild-moderate difficulties with their mental health, or feeling socially isolated.

2 Parents spoke about how understanding and lack of judgement.



Case studies



Home-Start Warrington works with children and young families in Warrington to be healthy, stay safe, be happy, make a positive contribution to society and achieve economic wellbeing.

Being a parent has never been easy. It can be lonely, frustrating, heart-breaking and overwhelming. Life-changing events can happen to anyone. That is why Home-Start is ready to support families through their toughest times. Every Home-Start volunteer is trained to help them work alongside you to overcome the challenges you are facing. We work with you to build on your strengths and give you the support that you tell us that you need.

Families need our support for a variety of reasons. Families can be; isolated, suffering from mental health issues or post-natal depression, single parents, victims of domestic violence, alcohol/drug users etc.

Healthwatch attended several Home-Start drop-ins. Engaging with mothers who had given birth during the pandemic.

Trends: feeling extremely isolated, having low mood, constantly feeling anxious, exhausted, not being supported by friends and family due to lockdown, frustrated at not being able to access support groups. Feel guilt towards their babies, older children and often partners feeling it.

Home-Start positively impacted the wellbeing and mental health of all the mum's who fed back, resulting in a more confident relationship with baby/children and, in some cases, partners.

Four mothers said:



“being referred to Home-Start had been a lifeline.”



Comments from Parents : Home-Start

2020 was a very dark time for me. I valued the calls and *non-judgemental support* I have received from Home-Start. It made an enormous difference to my life. Leading to a better relationship with my partner and baby and gave me confidence and reassurance that I am doing a decent job with my baby. *'Home-Start have given me my future back'* I cannot thank them enough.

I do not want to sound over dramatic, but *'Home-Start saved me.'* I was so very desperate. Giving birth should have been an incredibly happy time for me and my family, instead it was a traumatic and a very difficult leading to anxiety and depression for me.

I never felt judged, I was listened to. You will never know how good that felt. Someone to talk to that could support me and let me know I am not alone and would be supported with my baby.

I get emotional thinking about how Home-Start helped me. They helped me *find the courage and strength* when I was low to carry on being a good mum to my baby.



**“I never felt judged, I was listened to.
You will never know how good that
felt.”**





Parents in Mind offer mental health support both 1-1 and in groups to pregnant women/birthing people with an infant under two, experiencing mild-moderate difficulties with their mental health, or feeling socially isolated.

Healthwatch attended the Warrington meetings on a Monday and spoke to parents about their experiences and the support received from the group.

“Excellent service. Has helped me lots throughout the last 6 months. This has made a big positive difference to my life.”

Parent Comments

“PiMs has made a *massive difference to me*, my peer support worker has helped show me that a lot of the anxiety I have over parenting is completely normal and I’m actually doing ok.”

“I am talking to people who understand exactly how I feel, *there is no judgement*, I have made friends, my peer support worker is always there when I need her, it’s a relaxed atmosphere.”

“The check-ins with the support co-ordinator and making connections with other mum’s is great. *I have a reason to get out* when we can go for walks. I’ve also made a new, really good friend and now I don’t feel so alone or that I’m the one going crazy.”

“Knowing there is *someone impartial to talk to* if I’m struggling really helps. An amazing team, will be sad to leave when my baby is older.”

1 in 5 children and young people suffer from mental health illness in any given year. At Kooth, we believe every young person has the right to thrive and to access high quality mental health care.



Kooth.com is commissioned by the NHS, Local Authorities, charities and businesses to provide anonymous and personalised mental health support for Children and Young People. With over 4000 logins per day, we provide end to end support whatever the need.

Kooth had a significant increase in referrals since the start of the pandemic.

Feedback from **27** YP who had accessed Kooth.

17 YP stated they had a good experience.

10 YP decided online support was not for them.

Out of the **17** who had a good experience:



8 had a good experience with Kooth

Preferred online to face-to-face



9 YP glad they accessed Kooth

But would've preferred face-to-face, they felt they held back being online and didn't feel 100% relaxed



"Wasn't sure if our conversation was confidential as always warned about online safety. Can't see who else is in the room."



Comments from YP accessing Kooth

"Engaging with a counsellor face to face would be more like talking with a nice teacher, it is easier face to face."

"These are my most inner thoughts. I want to talk to someone I can trust and get to know in person."

"I had to wait for too long to see someone, my mood got very low. She was lovely but I wish I could have seen her in person not online."

"I hate on-line support; I can't focus and get anxious"



"St Joseph's provides a range of services to support families and individuals in Warrington. The Family Centre delivers Counselling for Children and Adults, Family Mediation, Emergency Material Welfare Support for local families and is an accredited Child Contact Centre."

Two families who had been supported by St Joseph's said their experiences of the service had been very good.

Response from Provider

"It is great to see such a positive response from our local GP's with regards to their expectations of us, though I am interested to see if we can find out more about the feedback received from the 16% that said our service did not meet their expectations, what does this mean or entail? We strive to continually improve our service offer and this feedback may help us to identify where improvements can be made."

Rosanna Kyme-Wright- Centre manager

CAMHS WARRINGTON

Child and Adolescent Mental Health Services – also known as CAMHS – support children and young people up to age 18 with their emotional and mental health and wellbeing.

When we talk about your mental health, we mean how you feel and how you cope with the things going on in your life. This could be connected to anything from school, your friends or even your family life. If you feel you aren't coping too well with the ups and downs of life, it may be that you need some support to help you manage them better.

If you do need help, CAMHS will work together with you and your family to decide what support you need to have good mental health and wellbeing. Our aim is to help young people get the support they need to tackle any problems early on before they get worse and to act quickly if they do.

Mersey Care NHS Foundation Trust, Warrington Council, local schools, school nurses, social services and other local organisations including Kooth and St Joseph's Family Centre, all work closely together to provide CAMHS services across Warrington, to make sure you can access the right support, in the right place and at the right time.



33 YP between the ages of 13 and 19 provided feedback about their experiences with CAMHS.



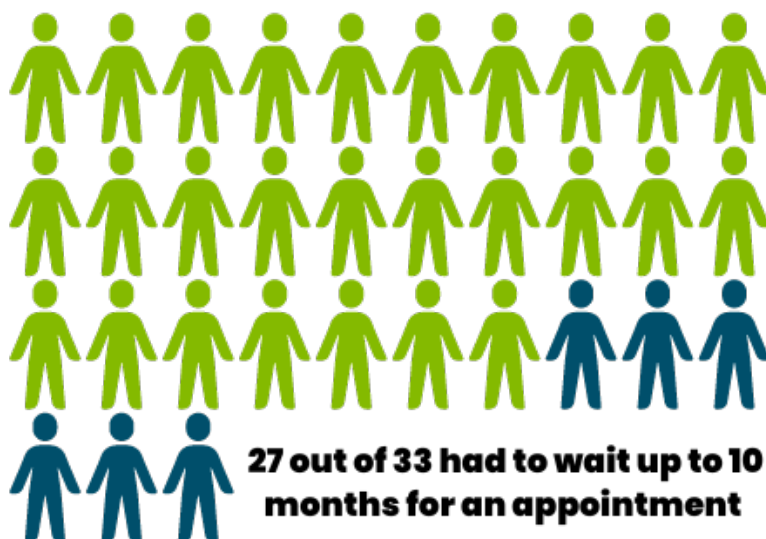
Young People's Comments on CAMHS

"My counsellor really helped me through a dark period in my life, very understanding, felt extremely listened to."

"What is the point? You have to wait months and months for support. I often feel really guilty on my parents because I know much, they worry about me."



"My counsellor really helped me through a dark period in my life, very understanding, felt extremely listened to."



7 YP said when they eventually had an appointment with a counsellor at CAMHS, the session went well, and they talked a lot which they enjoyed.

19 said they had had a telephone or online appointment, and at the end of the session they were informed that they would not be seen again for several months. All CYP were disappointed with this.

Feedback from Professionals, Teachers, Parents on CAMHS

20 Teaching/ support staff

26 Parent carers

14 Professionals .

All said CAMHS waiting list is unacceptable, far too long.

- Concerns that there are no appointments available for under 8s.
- The service is so stretched that unless CYP being referred is suicidal, they don't get an appointment soon enough.
- **20** school staff stated they do not have any faith in the service.
- **26** parents stated that after having a conversation with either their GP, school or a professional, it was clear there is no confidence or trust in the service CAMHS delivers.
- **5** of the parents said the support their CYP eventually received was good.

Teaching/ support staff/ Professionals comments

"Service needs more time to see if it is having a significant impact; more advice than targeted."

"Could just do with shorter waiting times."

"The service is oversubscribed."

"Due to the increase in demand on mental health services such as CAMHS, waiting lists increased dramatically for their support."

"CAMHS need more staff to reduce massive waiting lists for suffering young people."

"Lack of funding and lack of staffing is the main issue , e.g. CAMHS and closures and staff cutbacks, other counselling organisations."

Parents comments on CAMHS

There were a number of comments about what service had been used that said 'CAMHS', but they had not gone on to feedback about their experience of using it. This was perhaps because they were being asked two questions in one. As these were all open text questions, it was not possible to then cross-tabulate from the open text answers to other question responses to be able to confidently attribute further comments in subsequent questions as being about the CAMHS service.

Parents Comments

"Given CAMHS but did not meet their threshold."

"Anxiety that led to CAMHS, although this was unsuccessful due to staffing issues. Lack of confidence with both children combined with alarming impacts upon education."

"Eldest was at CAMHS in first lockdown but discharged. Then referred to CEDS. CEDS doctors were really good and recognised that [their] anxiety was stopping [them] from functioning in everyday situations."

"There is a distinct lack of support. Even if your child is suicidal, they are not considered critical by CAMHS. The waiting lists are ridiculous."

"CAMHS are shocking, and the hospital should be ashamed of the way one their staff conducted themselves."

"I did a 10-week course with CAMHS which was completely irrelevant for the issues my [child] is having."

"Because CAMHS was a waste of time. They postponed the appointment four times. Then when we eventually got there the person we saw admitted they had no idea about Tics and thought we were there for something completely different. My complaint to [their] manager during the meeting fell on deaf ears and the manager was no support to the [person] whatsoever."

Overall themes

CAMHS WARRINGTON

- Long waiting times/lists- lack of staff resource
- Criteria for accessing high/lack of priority even when in crisis
- Quick to discharge

Response from Provider

Statement on behalf of Mersey Care NHS Foundation Trust



A spokesman for Mersey Care NHS Foundation Trust said: "Mersey Care recognises there is a need to improve our response and offer to children, young people and families to support and improve their emotional and mental health wellbeing."

We recognise the importance of providing a timely and effective service and have recently embarked on a transformation programme to make sure appropriate support is available when and where children and young people need it most. As part of this transformation, we will use the feedback in this report from children, young people, families, schools and GPs to inform changes to our services.

The COVID-19 pandemic had a significant impact on the emotional health, wellbeing and mental health of children and young people, and we have seen a substantial increase in the volume of referrals being made. In response to the increased demand, we introduced a 24-hour mental health and urgent mental health support phone line in April 2020 for children and young people in crisis.

As a Trust, we are committed to providing perfect care, and our children's and young people's mental health services have adopted the iThrive model of care. This allows us to triage and work closely with other partners and providers to support early identification and intervention for our children, young people and families. We will continue to work with our partners to provide the highest standards of care to help our population live happier, healthier lives."



We believe in 'Inspiring young people to achieve'.

We exist to support young people's development, offering opportunities to gain, increase and develop skills, knowledge, self-awareness and confidence, and enabling them to make positive and healthy life choices through our wide range of programmes aimed at different age groups.

Healthwatch attended the **WYC Youth Conference (WYC)** at The Peace Centre. This allowed Healthwatch to engage with **6** different Young People (YP) groups: **TAGS, EMPOWER, CICC, WARRINGTON YOUTH VOICE, YOUNG CARERS, WYC** and **THE GIRLS GROUP**.

YP said they had missed WYC during lockdown as it is a good place to socialise, meet new friends, learn new skills, and talk to staff or other young people if you have a problem.

Response from Provider

"We have really enjoyed working with Healthwatch Warrington and supporting the compilation of this report through the consultation events we co-ordinated with young people; this report has focused the attention of agencies and organisations to take action on addressing some of the major issues highlighted. As a result, Warrington Youth Club has developed partnerships with some of the agencies included in the report, and we hope to see an improvement in many of the areas." – **Dave McNichols, Chief Exec Warrington Youth Club.**

Express Children in Care Council: CICC

9 YP completed the survey and provided feedback. All enjoyed the group and said the staff gave them a lot of support. The venue provided a safe place and the opportunity to offload and talk to someone they trust. It enabled them to meet new friends who have similar life experiences.

All **9** YP said they had **struggled with their emotions during the lockdown** and dreaded another one.

Comments

"The group has a lot of energy; I have a lot of friends here."

"Helpful and fun to attend."

"Can speak to people that are important"

"I make new friends"

"Brightens up my week"

Empower: (Ethnic minority group)

7 YP from empower. All YP felt very supported. Lockdown had been difficult, and the group had provided them with some much needed support. The young people spoke about how the group helped them gain confidence, encouraged them to embrace their ethnic background and individuality, and offered opportunities to meet other CYP who have similar life experiences. YP who attended the group were clear that their mental health and outlook on life had improved since they had started attending.

Comments from Young people

<p>YP 1</p>	<p>“Empower has given me the opportunity to meet new people of other ethnic backgrounds and helped me realise that other people face the similar issues, especially in school. When I started high school the pandemic happened, and I had to do online learning. It didn’t allow me to meet my friends or meet new ones. School, since the pandemic has stressed me out. Empower has taught me that racism in school isn’t okay and how serious it should be taken. Teachers don’t do anything about it, so having someone to talk is very important.”</p>
<p>YP 2</p>	<p>“I really like Empower, I was invited during a time when I was feeling very unmotivated during the pandemic. Coming to Empower made me feel a lot more confident talking to people. Everyone here is kind and open with each other. Tuesdays are always a day to look forward to. School days can feel long, but on a Tuesday, knowing I am going to Empower makes the day go quicker.”</p>
<p>YP3</p>	<p>“This is such an important group. I like being able to communicate in a safe place to talk about my culture and any issues I face. It has brought confidence out in me around my individuality. Being able to relate to other young people’s situations helps. It helped me so much during the pandemic.”</p>

Other comments:

- Meet new people. Helps forget negative thoughts. Funny time whilst here.
- Can talk about problems confidentially. I get a lot out of coming to the group.
- Empower helped me during the pandemic.
- Socialise and meet people.
- Learn new things, e.g. religion, racism, and history, share ideas.
- Talk about improvement and making the world a better place.
- I really enjoy going to Empower because it is a medium for me to communicate with like-minded people of ethnic minorities.
- I don't know anyone from my school from ethnic minorities.
- It is nice to find other Muslim girls to talk to who I do not need to hide my religion from.
- I enjoy going to school, but there is barely any opportunity to learn about other cultures.
- It would be nice if there were opportunities to learn and spread cultural awareness.
- Racism can be quite high in some communities where awareness is not spread.
- Youth worker at Empower gave me one-to-one support when the school said they would and didn't.
- It was just an amazing experience. I really enjoyed the girl's group.

Response from Provider

"It's great to see how fab all of the young people have expressed their views across the borough. Can I also pass on my thanks to Julie, she was brilliant with my group and they really enjoyed meeting her" **Anthea Islam - Youth Worker**

The Girls Group @WYC

- Helped me to stay safe. Learnt about dangers I was not aware of. Met new people.
- It's great to be with girls and talk about our issues without boys being around.
- Residential were the best times of my life. Going to this group, I was at my happiest.
- I learnt about the downsides of social media, models, and magazines.
- We learnt how to improve our mental health when on social media.



WIRED Young Carers is a service jointly commissioned by Warrington Council and formally known as Warrington Clinical Commissioning Group to ensure that Young Carers (YC) and young adult carers up to the age of 25 are identified and receive appropriate support to help them in their caring role.

Healthwatch Warrington engaged with 6 Young Carers supported by Wired (engagement was in the community, not at YC drop-in).

All felt supported by Wired. YCs spoke of support at school and college being very important and spoke of missing **face-to-face drop-ins** during the lockdown. Online and telephone support and crafts had been good alternatives during the pandemic. YCs said Wired had stayed in contact and supported them throughout



100% caring roles increased significantly during the pandemic

4 YC spoke of feeling sad and lonely due to isolation and missing the interaction of other young carers.

Young Carers drop-ins are now bi-weekly at the time of the interviews and split into age groups. 2 YC said they missed the weekly drop-ins.

Wired staff said “referrals had gone up significantly during the pandemic.”

Young Carer: Mike had previously not realised he was classed as a young carer for his mum. Mike is 17, he is sole carer for his mum who has a Bi-polar diagnosis. They live together in a 2-bedroom flat.

“I felt overwhelmed during lockdown having to care for my mum, she has Bi-polar. Lockdown triggered her, I felt trapped and unimportant. I had nowhere to escape to and being by myself for so long I felt like I was going mad, and I hated caring for my mum. I started to feel guilty and cried a lot because I was so angry with myself for the way I felt towards my mum. I really missed my part time job and friends. My mum really struggled too, we had loads of rows and our neighbours would bang on the wall so my mum would get worse and start screaming and swearing even more. There was nothing done to help either of us. I rang the crisis team a few times, but it was a waste of time.”



Warrington Parents & Carers Forum is a voluntary group of enthusiastic, dedicated and experienced parents, carers, grandparents and family members of children and young people aged 0-25 years with disabilities and additional needs.

During the pandemic Warrington Parents and Carers worked much more closely with the Local Authority supporting over 70 families in crisis and helping with issues arising across education, health and social care. This is very different from how WarrPAC would usually engage with our parents/carers.



WarrPAC were instrumental in the procurement of Advanced Solutions, we are very pleased to be able to signpost parents/carers for additional training and support, pre or during assessment for Neurodevelopment, as well as post diagnoses regardless of the outcome. There was no service available in this area prior to this intervention. One downfall is it is not an open service, therefore doesn't offer a walk-in opportunity.

As we have been able to open up face to face sessions, we have welcomed attendance from a range of health professionals from the CDC (Child Development Centre),

Response from Provider

"Many of our families who have children and young people with Neurodevelopmental conditions have found it quite challenging to obtain mental health support from CAMHS due to the misconception that their symptoms are part of their diagnosis; families report that children and young people are being bounced between services when they don't fit into the criteria for CAMHS assessment. Parents/carers feel their children deserve to have an equal opportunity to access a CAMHS/counselling service whether their child's mental health is related to their diagnosis or not."


Children & Young Peoples Feedback on GP services

Case studies from Young people's experiences of accessing GPs.




Young Person 1: Accessing GPs

"I needed someone to talk to during the lockdown. I thought I was going to go mad. I needed to talk to someone I could trust about self-harming. After self-harming for months during the first lockdown, my friend, who has experience of mental health herself, noticed what I was doing and talked to me. She encouraged me to talk to my doctor. I waited for another 2 months until I was 16 so I could go to the doctors on my own so it would be confidential from my parents. I don't have supportive parents, and they deny mental health exists and tell me everything that I feel is going wrong is because I'm a teenager. My GP listened really listened to me and referred me to CAMHS, he also told me to look online for support whilst I wait for my appointment. I am still waiting and have now been on the waiting list for CAMHS for 8 months. I am still self-harming; I talk to my friend a lot and have spoken to Papyrus about self-harming; they were really good."




Young Person 2: Accessing GPs

"When the pandemic started, I was 16. I really struggled with anxiety during the lockdowns, and my doctors wanted me to fill out an online form, which I couldn't do because I was not 18, and it wouldn't let me. My mum had to argue with the receptionist to get a face-to-face appointment for me. My doctor really listened to me. I did not feel judged or rushed, and she checked on me to see if I was ok. Some of my friends have said they could not get to see their doctor, and others have said their doctor didn't really listen. I am having counselling through 6th form at Priestley College, which is really good."



Young Person 3: Accessing GPs

"What is the point? I am 14 and when I tell my doctor something he looks at my mum who says I am ok. I don't get the opportunity to really talk to anyone. No one really wants to listen. They ask whether you are ok but don't care what your reply is. My mum said my doctor would refer me to CAMHS, but I haven't heard anything, and that was months ago. I am struggling as my culture doesn't talk about their problems."





Young Person 4: Accessing GPs

"I want to talk to the doctor about how I feel. Because my mum and dad drink too much and start talking about things I shouldn't hear, and then I start worrying. They think they are being ok and deny they get embarrassing. Because we are well off, people think I am lucky. I am 14, so can't go to the doctors on my own; I know my anxiety is getting worse."



Most under 16s want to talk to a GP without their parents present.



Young Person 5: Accessing GPs

"Thank you very much, Dr Cam at Birchwood Medical Centre. You are always so kind and helpful and always smiling. You make it much easier for me to visit the doctors."



"I waited for another 2 months until I was 16 so I could go to the doctors on my own so it would be confidential from my parents. I don't have supportive parents and they deny mental health exists."



Practitioners and teachers Feedback

Feedback from one to ones with school practitioners and teachers.

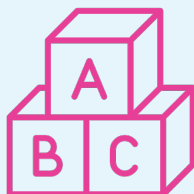


School Nurse/ Practitioners Meeting



“Parents are at a loss as how to access certain services. Practitioners are aware that the waiting lists are so long that they feel informing parents will add to their stress.”

- The same themes are coming up in schools with school nurses. Getting referrals for children with anxiety, but they do not have enough specialist support to help the growing number.
- Health visitors expressed strong concern that the under 6 are being missed by the system, and they feel like they need a service for younger children like play therapy that is more accessible.
- Health visitors also said that parents of under 6's do not have enough support and that they sometimes do not have the emotional tools to support the child. They said that more should be invested in early intervention.



Under 6's need more support
Play therapy needs to be accessible and early intervention

Teachers



"Staff are pleased, school is offering free training in L2 child mental health and L2 counselling." -**Bridgewater**

Staff member



Comments

"Fortunately, the primary school where I teach finances a Play Therapist who receives excellent feedback from staff and parents."

"Several head teachers said, 'head supervision would be valuable'."

"Daily briefs during the pandemic from the local authority were a great lifeline for a lot of leads."

"Teachers and leads are struggling with anxiety, stress and un-achievable long-term demands."

"There are not enough qualified MH staff to support the increasing number of CYP and teachers who need emotional wellbeing and mental health support. Although we have a care of duty to look out for the wellbeing of our pupils, teachers are not counsellors. We take our pupils problems home with us, trying to find a way to help them."

"I am a secondary school teacher doing my best to support the schools pupils. I don't always know what to say or where to refer to for adequate mental health support. Sometimes pupils just want to talk to someone who will listen unconditionally. I have real concerns for all the children who are 'falling through the net' especially those with an undiagnosed neurodiverse disorder."

"I'll be honest with you, teaching staff at my school do not have any faith in the mental health support commissioned for our children, including CAMHS. We are genuinely concerned about this and the negative impact it is having"

"Staff want early mental health preventative measures in place."

"Too many children are having unnecessary high anxiety issues about SATs, GCSEs and A levels."

"It is as simple as this. I have had a successful and rewarding teaching career for over 30 years and now I cannot wait to retire. Our young people need to be invested in. Schools need qualified counsellors. Parents need advice. School staff are crumbling, including the mental health team. There is a second pandemic out there, one that is going to have a far greater consequence for the young. A mental health pandemic."

Parent Case Studies

Our Young People's Outreach lead met with 60 parents who wanted to share more feedback on services and their experiences. Here are 10 case studies from parents.



Parent 1: Lisa has 3 teenage children, all at secondary school. Two of her children have ASD diagnoses.

"I have two sons and a daughter, all at secondary school. My daughter and one of my sons both have ASD diagnosis. My son is severely struggling; we are sure he has other undiagnosed disorders. All 3 lockdowns were hell for all the family as the kids were climbing the walls, especially our autistic son. At times he became both verbally and physically aggressive towards us. I never thought we would get through the pandemic ok; I would go to sleep crying and wake up, and it would all start again; I often felt I could end it all.

Since schools re-opened, the school has been as helpful as it can be. But they have not got a big enough mental health support network.

I am desperate to give my nerves a break without constantly being anxious and worrying all the time about my children's mental health. Sometimes I just don't know what to say to them or how to help them and end up screaming at them. I need support and training around ASD. I often feel like my head will explode. Our GP does not have the time to listen, and I appreciate it is not the job of a GP to provide that kind of support. He referred my kids to CAMHS, but they do not hit the criteria."

Parent 2: Mother of two children, one in Y8 with diagnoses of ADHD, dyspraxia and ASD and a 17-year-old. Mum was very emotional during our 1-2-1

"My husband and I are desperately struggling to understand and engage with our son, who has multiple neurodiverse diagnoses, including ADHA, dyspraxia and ASD. He is in Y8 and, when triggered, becomes verbally and physically abusive to his 17 year old sibling and us. He is on medication for ADHD; however, I am not sure it is working as his outbursts are still very much out of control. Our family needs support to understand how we can help him. We are deeply concerned for his future. The situation causes tension in the family home as we are all treading on eggshells. His brother says he can't wait to leave home as it is not a happy place to be. School have been very supportive (Boteler), and our GP is supportive as she can be. But I don't feel as though I can take any more. There is nothing out there to support us."

Parent 3: Lucy was 15 years old at the start of the pandemic ,she developed an eating disorder during the first lockdown.

"My daughter was 17 when lockdown started. During the pandemic, she developed an eating disorder. Lockdown and isolation were torture for her. I had to work, and so did her dad, so she was on her own a lot of the time. On two occasions, she took some tablets because she didn't want to be here any longer; she said she hated herself and her life. We went to A&E, which was a complete waste of time. She is still not ok; we argue all the time because she says I don't understand her, which is true. She thinks she is ugly, fat and not a nice person, none of which are true. She is a beautiful young lady. She spoke to someone on the phone from CAMHS, and although they were very nice, it was a complete waste of time. Now they say she does not need their support."



Parent 4: Toby was in Y11 when the pandemic started, he has a 21-year-old sister.

"When the pandemic started, my son Toby was in Y11. The first lockdown was very hard for him; he missed the routine of life, school, his friends, sports, and extended family. We were all home together during the pandemic. Toby appeared to open up during our family chats, saying he was managing ok but fed up with being in lockdown but so were his friends, and he never alluded to anything more. Nothing was revealed about his internal torture.

Two months into the 1st lockdown, I noticed what looked like scratches on Toby's arm; I asked him about them, he dismissed the marks as scratches from playing with our cat. This could easily have been the case. However, it later turned out this was the 2nd time he had self-harmed.

Not long after the first lockdown had finished, I received a phone call from one of Toby's friends parents to say her son was very worried about Toby as he was having suicidal thoughts.

Toby confirmed he had a suicide plan. Everything was in place for him to take his life that day. A search of his laptop history showed he had researched 'how to make a noose' early that morning. Toby's dad found a home-made noose in Toby's bedroom.

Toby has had a stable and secure upbringing, friends, is academic and has never been in trouble. To the outside world, he appeared a regular, fortunate young man. But on the inside, Toby was hiding dark thoughts with a fear of being socially unaccepted amongst his peers, social anxiety, not fitting in. This feeling had grown out of control due to being isolated from peers and the world during the lockdown.

I had recently completed Suicide Prevention training at work. This helped know what to say to Toby when I approached him. I dread to think how I would have reacted without this training. It was hard enough with it.

Our GP was very good. Papyrus was also amazing, taking the time to talk confidentially to me. Toby also spoke to them (on a separate phone call). They supported him and helped him to make a suicide prevention plan.

Fortunately, we have private medical insurance and were able to quickly get support for Toby. I had no intention of going through CAMHS; I don't have any faith in the service, as it turned out, neither did our GP. Over the years, CAMHS has been discussed regularly amongst parents; I am aware of the bad reputation they have. Toby's dad and I are aware this may not be over for Toby; we live in fear that something may trigger him in the future."

Parental social media concerns:



- **42** concerned with the effects social media is having on their CYPs outlook on life.
- **26** concerned their CYP watching horrific pornography on the internet.
- **18** concerned around pressures to achieve the 'perfect body image'. Causing low self-esteem, body dysmorphia, eating disorders.
- **9** concerned with pressure around sexuality and gender.
- **23** concerned with general online bullying made worse due to pandemic.



Parent 5: Jane was in Y9 at the start of the pandemic. She developed an eating disorder (anorexia) during the pandemic.

"Our daughter was in Y9 when the pandemic started. During the lockdowns, she severely missed her friends and extended family; she is an only child. When her dad and I went back to work after the first lockdown, Jane had already started showing signs of depression. Jane had two more lockdowns on her own. Pre lockdown, she had a wonderful balanced life. She became isolated; she started getting obsessed with certain social media apps which contained powerful contents on how you should look. Jane became anorexic. This illness is a torture on the whole family; it's absolutely heart breaking to see your beautiful daughter brainwashed into believing she is ugly and fat.

When contacting our GP, I had to be really assertive with the receptionists at the surgery to get a face-to-face appointment; that alone was a horrible experience. Fortunately, our GP was helpful when we got to see him. Jane was referred to Children and Adolescent Eating Disorder Service (CEDs), she was hospitalised, they were good on the medical side, but not on the emotional side during her illness. Within a couple of months after being discharged, Jane became vulnerable again. Neither her dad nor I knew what to say to support her correctly. She was offered online support from CAMHS, she tried this and it was helpful, but at the time she said she really just wanted to sit and talk to someone. Jane doesn't want to go online at the moment for anything as this is where her ordeal started.

She is hoping to attend, the Girls Group at Warrington Youth Club, she has heard about it through school."



Parent 6: Susan has two children who were 17 and 3 years when the pandemic started. Susan's eldest Simon has a diagnosis of ADHD and depression

"During the lockdown, Simon was so bored at having to stay in the house, it caused him to get angry over the slightest thing.

I became fearful when I had to stand up to him; he is easily triggered and can fly off the handle with aggression. I still don't know how to handle his outbursts or what to say to him. During each lockdown, I've become more anxious and struggled to cope. This anxiety has had a knock-on effect on my youngest child, and I struggle to occupy and stimulate her. I feel guilty on her because she knows I'm still struggling.

My son is nearly 20 now, and I can't see a time when he will be able to live independently. But I don't feel I can cope with his outbursts any longer. My home is not a home any longer.

I am also a carer for my mum, who is in her 80s, I used to go to a carers drop-in, but this closed during the pandemic. Because there has not been anywhere to go for support since my own mental health has deteriorated, and I am now on anti-depressants that have increased to the maximum strength during the past 20 months. As soon as I heard about the CYP project through my daughter's school, I wanted to provide feedback and look for support."



"I used to go to a carers drop-in, but this closed during the pandemic. Because there has not been anywhere to go for support since my own mental health has deteriorated."



Parent 7: Amy's son Karl is now 17, he suffers with depression and self-harms."

"Karl was in Y11 when the pandemic started and is now in 6th form, which has been a total disaster for him. Since the start of the pandemic, Karl has gradually become a hermit. He has always been quiet but would enjoy his small group of friends, hobbies and would chat with us and his siblings. Now he has lost all confidence, is withdrawn, has a very low opinion of himself and has started self-harming. His siblings have all tried to help cheer him up, but he has no interest in anything apart from his computer. His grades also dropped when he was home schooling; although me and his dad were ok with this, it played on Karl's mind. He had decided he is no longer going to university, as he has social phobia and believes he won't make any new friends there.

Karl waited for over 12 months for online CBT through CAMHS, which he couldn't really engage with. He spoke with a male counsellor over the phone once from CAMHS who he got on with and liked. Karl hoped he would have him for therapy, but he said he couldn't offer him anything and would put him on the waiting list for support. The whole CAMHS process has been very confusing.

If Karl could have had some counselling earlier, I am sure this would have prevented the depression becoming so deep and may have prevented him from feeling so low that he no longer has the confidence to socialise and consider a positive future."

Parent 8: My daughter Charlotte was diagnosed at 14 years old with OCD in November 2019.

"School have been very supportive throughout, after an uncoordinated referral that did not help and complicated matters. Home-schooling was perfect for her; no worrying about overcrowded corridors and scary teenagers for her. However, trying to get her back to school is still proving to be very difficult, and her attendance is very low. Charlotte was eventually offered CBT. She said that it did help, but no sooner had it started and the course was over, she didn't feel it was long enough. Charlotte said she liked CBT, it made sense to her, but it was a shame she could not talk in detail to the counsellor. She has been waiting for more CBT; we haven't heard from CAMHS for months. I would also like to mention that all the way through this, even at times when Charlotte said she no longer wanted to be alive, there has never been support or advice offered to me or her dad. This is the first time I have been listened to all the way through without being told time is up before I have finished. Thank you, Healthwatch."



Neurodiverse awareness

Parents at schools who have already implemented support for neurodiverse children are benefiting from the support.

Parent 9: Kelly's son Aiden is 14 and struggling with dark thoughts

"Aiden is really struggling with life, with school, he was definitely more confident with his studies during home-schooling, and he concentrated a lot more. He has dark thoughts, so he got an appointment with a counsellor at CAMHS. He didn't feel listened to due to some of the counsellors' responses, so he clammed up; then, they said he wasn't engaging, so they couldn't do anything to help him. One glove doesn't fit all, because he is growing up and constantly developing and changing his mind as teenagers do. Me and his dad feel he needs further counselling and ongoing support, not with a trainee counsellor! However, 12 months on, we are still waiting, and we know there is a long waiting list.

We have been in a living hell trying to co-ordinate the correct support for our son. It has left the family feeling really low as our GP told us to go online and get some support. I want to scream at him to get out of bed and get to school, for him to go out with his mates, and on the other hand, we are frightened of saying the wrong thing and setting him in a downwards spiral of negative thoughts. You go to the doctors, and they make a referral to CAMHS, which is going to be months. You walk out of the doctors and are left to deal with the most precious thing in the world, your child. Frightened of saying the wrong thing, of going to bed in case they do something to hurt themselves. It is a living nightmare."

Parent 10: Hayley has a 13-year-old daughter who was having trauma related issues at school.

"My daughter was having a lot of trouble at school who were calling me almost on a daily basis. She would take no responsibility for actions, would do random things, shout out in class, say racist remarks, and laugh at inappropriate things. She would be very upset after and mentally beat herself up. She never knew why she said these things or acted in this way. She was confused and upset at hurting people's feelings but would return to school the next day and do the same thing. School was very supportive, myself and my husband had a meeting with the parochial Head of Year. They thought our daughter may have a form of ADHD called avoidance disorder which is very common in adopted children (which she is). They assured us that there were interventions that they could do.

The whole process has been so amazing; my daughter has intervention twice a week with a counsellor. They talk about feelings, consequences of their words and the reason we shouldn't always say what is in their head and how they feel that it could impact others.

This was 5 weeks ago; she is now like a different child. Therapy has helped her to think, and her behaviour in school has improved so much. Early intervention and understanding are key. Cardinal Newman have worked so closely with us and kept us updated. A child is not always just a 'naughty child'. They come with feelings, baggage, and fears, so the more that we all work together to understand and support them, the better."

Parent Comments

Other comments from 69 1-1 interviews



23 parents were pleased that certain schools/colleges had employed a qualified counsellor and had started to improve provisions within the school mental health team for **autism** and other **neurodiverse disorders** and that they are offering staff mental health first aid training and mental health training.



- All **69** parents have concerns about their child's mental health.
- All **69** parents believed that their CYP would benefit from some form of counselling.
- **48** parents said they feel as though they themselves need therapy.
- **29** said their CYP showed no signs of mental health before lockdown.
- **59** were struggling with what to say or how to support their CYP long-term to keep them emotionally safe.
- **51** parents felt guilty and inadequate.
- **32** parents said they had serious concerns that their YP had experienced very dark thoughts around suicide.
- **8** parents CYP who have had suicide plans since the start of the pandemic.
- **32** parents said they feel their YP is drinking too much alcohol.
- **29** parents said they believe their YP is or has smoked cannabis.
- **49** had fears their YP has an undiagnosed mental health disorder.
- **32** said they were aware the YP had self-harmed at some time.
- **16** parents have previously or are currently paying privately for counselling for their CYP.
- **45** parents said they were concerned that schools and GPs are under so much pressure and do not have anywhere else but CAMHS to refer CYP to.

Recommendations:

Recommendations made from findings

1

52% of children and young people will talk to their friends if they are feeling low; we recommend that mental health awareness training should be available for young people to access.

2

49% of children and young people will speak to their parents or family members if they are feeling low; we recommend that mental health awareness training and information be available for parents and family members to access.

3

30% of children and young people have said that they would talk to **'nobody'** about their feelings which is very concerning and only **10%** would talk to their school or a teacher. We would recommend training for teachers to spot early signs of negative mental health. We recommend that all schools continue sharing appropriate information about positive mental health.

4

6% of children and young people didn't know what services were available. Our recommendation is for organisations to ensure full ongoing marketing of current services.

5

45% of young people stated that they used gaming and social media to keep them distracted during the lockdown, making them happy. We recommend that, if possible, this platform could be used to further communicate positive mental health messages and information to young people.

6

We recommend that commissioners consider the option of recruiting qualified integrated counsellors who have suitably qualified within schools and colleges' mental health teams, where children can access them.

7

First response support workers in schools, who are suitably qualified in counselling skills certificate, within school MH teams as early intervention. This level still needs a minimum level of awareness of counselling skills with an understanding of the Core conditions, the counselling ethical framework, boundaries and working within own limitations.

Recommendations made from findings

8

Hospital Paediatric Mental Health liaison. From our research, several families had arrived at A&E with young people presenting with mental health issues. They found that they were not offered intermediate support and were asked to go onto excessive waiting lists. Some said they opted to go privately, as their situations were desperate. This is at the time of our report; we recommend that support is widely communicated between partners where young people can go.

9

Ongoing suicide prevention awareness training throughout Warrington.

10

Training for parents to gain an understanding of how to understand and support CYP who have a neurodiverse disorder or are suspected.

11

Active listening courses for parents and schools. (Previously provided at St Werburghs).

12

Mindfulness classes throughout schools.

13

Support for teachers/ teaching staff around mental health for CYP/ and adults around support and referral.

14

Support for under 6's. This has been raised in our research as a gap within mental health services.

15

When we asked 554 young people (KS3 plus age) what are the things that upset you? Their responses were 75% said worry/anxiety, 49% said lack of confidence, 22% lack of friends and 21% my identity. We recommend that it would be extremely beneficial to young people if these areas could be acknowledged in general within secondary schools and colleges. Information available for support services for young people.

Summary

There is currently a lot of positive work from professionals working with children and young people, and the Commissioners of services are providing future services to address most of these needs.

Healthwatch Warrington is reporting back from data received from our research and has considered recommendations accordingly. Healthwatch Warrington works in partnership with all local partners. Still, we do act as an independent agency, and we do not alter any respondent's feedback (only if we anonymise to protect the identity of the respondent).

Covid-19 lockdown has affected most of our population, adults as well as children and young people. We appreciate that this has been a worldwide pandemic; findings will mirror other areas nationally. We are, however, reporting on Warrington's children and young people's, professionals' and parents' experiences. We aim to inform and assist with solutions moving forward in partnership with commissioners and providers.

The data has highlighted how, particularly the education sector (Teachers/Staff) have struggled with the pressure and stress of the pandemic, balancing the needs of their students whilst balancing their own mental wellbeing.

The pandemic has highlighted how important local groups are for people's wellbeing and mental health. Many people have found organisations like Home-Start, Parents in Mind, Youth Clubs (EMPOWER, Girls Group), and Carers groups a lifeline and having a safe space for people to talk and not be judged. More investment in local support groups could help the strain on services like CAMHS.

An area of particular concern is the rise in suicidal thoughts and self-harm in young people who have taken part in our research, the 30% of young people who stated that they would not 'talk to anyone if they were feeling low.'

We would like to give special thanks to the young people, parents, professionals, agencies and partners who participated in our research. Thank you to Warrington and Halton CCG for funding the project.

We look forward to working with partners to address the recommendations in the report. Healthwatch Warrington will share this report with all stakeholders and will present at Health and Wellbeing Board and all other relevant Boards.

Official Response

On 1 July, Integrated Care Systems (ICS) replaced Clinical Commissioning Groups and have been tasked with improving health and care by working much closer with partners to make our local health system work for local communities. NHS Cheshire and Merseyside ICS replaced the current CCG infrastructure with nine boroughs 'places'.

Carl Marsh, NHS Cheshire and Merseyside's Place Director for Warrington.

"We welcome the findings of the report and would like to thank our Healthwatch colleagues for compiling the report on our behalf and all those who gave up their time to share their experiences.

"We are aware of the unprecedented challenges brought on by the COVID-19 pandemic and the effect it's had on children and young people. The report's findings show the scale of its impact.

"While we are already in the process of addressing many of the challenges, we're committed to working with partners across the system to do more and the feedback and recommendations in this report will help us to improve the mental health support offer across Warrington.

"The creation of NHS Cheshire and Merseyside on 1 July this year means we can work much more closely in partnership with our colleagues in both health and care across Warrington.

"As one team underneath the Warrington Together umbrella, NHS organisations, Warrington Borough Council, GP practices and voluntary organisations are working together to join up services, support the health and care of our community, share ideas and resources and improve how we access health and care in Warrington."



healthwatch

Healthwatch Warrington
The Gateway Warrington
85-101 Sankey Street
Warrington
WA1 1SR

www.healthwatchwarrington.co.uk

t: 01925 246 893

e: contact@healthwatchwarrington.co.uk

 [@HWWarrington](https://twitter.com/HWWarrington)

 [Facebook.com/HWWarrington](https://www.facebook.com/HWWarrington)

 [Instagram.com/HealthwatchWarrington](https://www.instagram.com/HealthwatchWarrington)

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