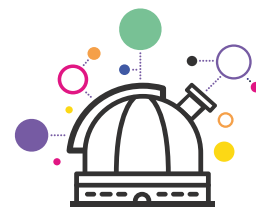


May 2019

Youth Commission on Mental Health Services Report



#YSObservatory 

#YCMHS



Scottish Government
Riaghaltas na h-Alba
gov.scot



Contents

+ Forewords...	4
+ Meet the Commission	6
+ Introduction	10
+ What the Youth Commission have been up to	11
+ The Process	12
+ Themes and Recommendations	16
Services	17
Education	26
Community and Public Opinion	32
Finance, Policy and Rights	36
Training	40
+ Conclusion	42
+ Experiences of being on the Commission: Q&A	44
+ Acknowledgements	46



Forewords...

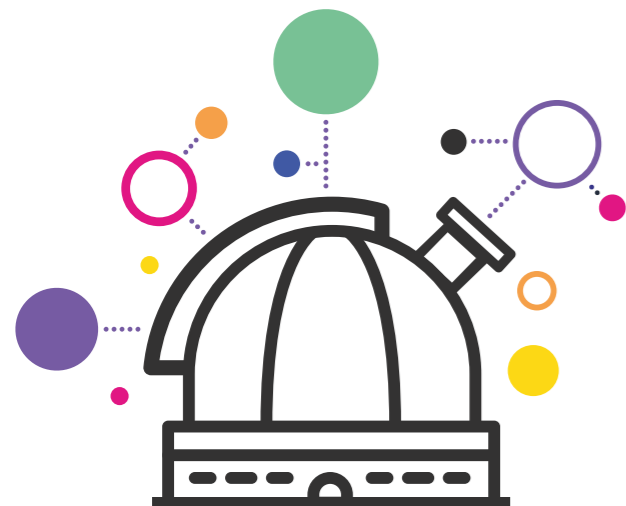


Clare Haughey,
Minister for Mental Health

I would like to thank the Youth Commissioners for their hard work over the last 16 months to produce this insightful and timely report. It highlights just how important it is for young people, and their voices, to be kept at the centre of policy development in Scotland. Hearing directly from the Commissioners, and their individual stories which led them to becoming involved in this project, has been inspiring and I extend my very best wishes to each of them for the future.

Since I became Minister for Mental Health in 2018 the mental health landscape in Scotland has changed and progressed, and I am delighted that young people have been part of this development. The recommendations contained within this report highlight just how important it is to include the views of those who use the services that we develop so that they work for them.

I believe, and hope, that the tide is changing in terms of Scotland recognising the importance of talking about mental health in our society today. And I believe that this report and the recommendations within it will add to that ongoing conversation. It is important that all those who work with, and deliver services for children and young people now work together to enable successful change. We all need to make sure that all children and young people receive the best possible care, support and guidance when they do come forward with mental health concerns and that we listen and act. Ask once, get help fast.



#YCMHS #YSObservatory



Louise Macdonald OBE,
Chief Executive of Young Scot

The Youth Commission on Mental Health Services has been an amazing opportunity for young people to shape the future of mental health services in Scotland. The dedicated Commissioners have demonstrated this through their own personal experience and by representing the views of other young people across the country. The clarity of thought they have displayed is a real reminder of the importance and depth of understanding our young people have in tackling the many challenges we face as a society. This project has given young people the chance to effect positive change in the areas that are most important to them.

Support to develop positive mental health is a key issue for young people and is raised in nearly all of Young Scot's work with young people across Scotland. We have been delighted to work with the Scottish Government and SAMH throughout the Year of Young People 2018 and beyond to look at this important topic. Their recommendations in this report would not only make mental health services more effective but would also ensure that young people are at the heart of decision-making and influencing policy across mental health services in Scotland.



Billy Watson, Chief Executive of SAMH (Scottish Association for Mental Health)

The Youth Commission for Mental Health Services has been a truly ground-breaking project and one that everyone involved should feel proud to have been part of. For possibly the first time we've seen a group of young people given the opportunity to play a significant role in shaping the mental health agenda, creating lasting change for the delivery of mental health services for generations to come.

It's also been a brilliant opportunity for SAMH to work collaboratively with Young Scot, The Scottish Government, and a number of other stakeholders. A creative, collaborative partnership all round.

During the lifetime of the Youth Commission, the landscape of children and young people's mental health has changed and evolved, and I've personally been really impressed to witness first-hand the influence the Youth Commission has had within this space.

These recommendations round off over a year of fantastic work, however, to see this as the end point would do a disservice to their work. This final output is a credit to the young people involved and deserves meaningful response from decision makers. There's been an urgent need for change for some time now, and it's important that this project marks the start of a fundamental shift which places young people at the heart of improving mental health care and services.



Meet the Commission



#YCMHS #YSObservatory

Alexander Thomson, 15, Edinburgh

I have mental health issues that have affected me greatly and wanted more support for people who may not have had as much support as I have had both with CAMHS and family life.

Alice Mackenzie, 15, Edinburgh

More discussions need to be had about mental health because it has an impact on everyone and it should not be stigmatised. A more open society will help people who are struggling with mental health issues come forward into a world that they know will accept them and get the help that they deserve.

Kirsty Watters, 23, Edinburgh

My whole life I have watched the people around me struggle with mental illness. Several members of my family struggle with depression and my mother is Bi-polar. Despite this, we have struggled to be able to talk about our illnesses. Not only that, but they hit walls when trying to seek support from services. My mother has experienced a lot of discrimination and has not been taken seriously because of her illness. I am passionate about challenging the stigma surrounding mental health and making services more accessible. I want to live in a world where mental illnesses are treated on equal footing to physical health.

Emma Keston, 16, Edinburgh

Mental Health is important to me because it needs to be spoken about in order to move forward as a society and become happier and healthier.

Helen Watt, 17, Edinburgh

Mental Health is important to me because It is a hugely taboo subject that affects everybody no matter what age or socio-economic background. I feel that we need to raise awareness about mental wellbeing and that it is just as important as physical health.

Andrew Sturgeon, 18, Midlothian

Mental health is a taboo subject that is often brushed under the carpet but it's something that affects so many people. I also think it is very important to tackle the stiff-upper lip culture as this is what will have the most impact on improving mental wellbeing. It is something that has had a direct impact on my life and I'm passionate about helping others.

Danielle Mutch, 18, North Ayrshire

Mental health is an important topic as it has had a stigma attached to it for a long time. This makes the public view it negatively even though it is a completely natural thing which everyone must have an in-depth experience with at some point in their lives.



Isha Iqbal, 17, Shetland Islands

Mental health is just as important as physical health, and in some ways more important, as it's not possible to keep your physical health without a healthy mind. This is why I think it's important to focus on this lifestyle and healthcare aspect going forward in the future.

Zoe Mason, 20, Fife

Everyone has mental health, therefore, it's really important we all know how to look after it and can access support if we need it. We are shown ways to look after our physical health but the same never happens for our mental health. Young people are often made to feel like their feelings are invalid just because they are young, this negatively impacts an individual's mental health and needs to change.

Madeleine Brown, 22, Fife

I chose to become involved with the Commission because I am passionate about improving the quality of, and access to mental health services for young people in Scotland.

Arianne King, 15, Dundee

People I'm close to and in my family have problems and I have seen them struggle to get the stuff they need. So, I am happy I could help; it means a lot to me to be able to help people.

Alannah Fox, 20, Scottish Borders

I've struggled with my own mental health for a while but the area in which I grew up was never particularly good at raising awareness, so I dealt with it alone until I moved to uni. So many young people are in similar positions and often don't know who they can turn to. Mental health can affect everyday life so it's important for someone to know who they can turn to.

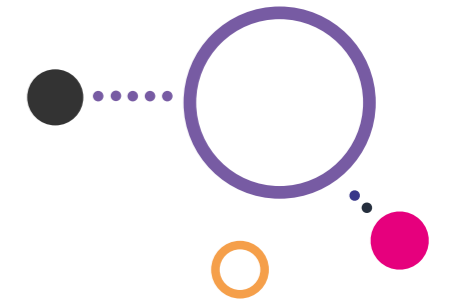
Millie Carter, 19, Scottish Borders

I believe mental health is an important topic because we all have mental health, and 1 in 4 of us will experience mental illness. However currently the stigma surrounding mental health, and problems with some of the mental health services, make receiving support extremely difficult. So, by talking openly about mental health and striving to make support accessible I hope more people will recognise and be able to look after their mental health.



Meet the Commission

#YCMHS #YSObservatory



Emma Hewitt, 23, Renfrewshire

Where do I start?! EVERYONE has mental health. Me, you, and every other person on this Earth. That could be positive at times, and it could be poor. You might never experience a mental health issue yourself, but there's a high chance that someone you know could be affected; whether that's through themselves or someone they know. Therefore, why aren't we talking about it? Mental health illnesses/problems can ruin people's lives, it can and does kill just like physical illnesses, therefore we should be treating it just as seriously.

Vicky Archer, 20, Glasgow

It affects absolutely everyone and should be given the same type of importance given to physical health.

John Snoddy, 25, North Ayrshire

The service failed one of my closest friends who unfortunately took her own life and I want to make sure that when people ask for help, they actually get it.

Holly Kinsella, 21, North Lanarkshire

Mental health is something that everyone has, and this is a fact that needs to be normalised so we know what to do when our mental health might not be so great. I've experienced issues with my mental health, and I've witnessed family members and close friends try to cope with their issues. I want people to feel confident enough to ask for help so that we can have a generation of people after us who are able to openly ask for help when they need it without fear of being shamed for something that is so commonplace.

Maaria Aziz, 17, North Lanarkshire

Mental health is something that everyone has and the fact that mental health problems for young people are increasing is a serious and urgent matter. The more we address these issues and improve on services, the more we are setting up a better life for many future generations of young people in Scotland.



Hannah Mimiec, 18, Angus

A person's mental health is a really important part of their overall health, however, it has not always been treated with the importance that it deserves, even though it can impact all areas of someone's life. The conversation around mental health is changing, and new policies are coming in to make it more of a priority, it is becoming more of an important topic means that now is a crucial time to be listening to young people who will be directly affected by the way that their society chooses to treat mental health.

Rhiannon Lister, 18, Clackmannanshire

Every single person has mental health and it's important to promote different strategies and practices to help maintain good mental health while also supporting and recognising poor mental health. It's very difficult and scary to be fighting your own head and it impacts on every aspect of life, because every person's experience of their own mental health is individual and unique it makes it critical to make the support right for each and every person. No matter how poor anybody's mental health may be, we are all valuable, creative and gifted people who manage to get through and contribute greatly to life in every way.

Neva Brown, 16, Falkirk

Mental health is important because everyone has it but very few people actually know a lot about it. So, it's important that everyone learns more about mental health.

Robbie Suttie, 18, North Lanarkshire

I've have had personal experience using CAMHS in the past and I know several people who use it currently. In the constantly shifting environments of teenagers and children many different factors can affect how efficient the service is from, knowledge of the service, to the experts involved and the ability of the persons to come forward. I believe that I have a responsibility to help those who aren't in a position to help themselves and, right now. I want to be able to work with others to provide a service that cannot fail the people who need it.





Introduction

We are the Youth Commission on Mental Health Services. Our main aim as a group is to ensure that young people have a voice and can share their perspectives when it comes to improving mental health services in Scotland.

The Scottish Government published its Mental Health Strategy 2017-27 in March 2017, highlighting a vision of a shared ambition for people to ask once, get help fast, expect recovery and fully enjoy their rights, free from discrimination and stigma.

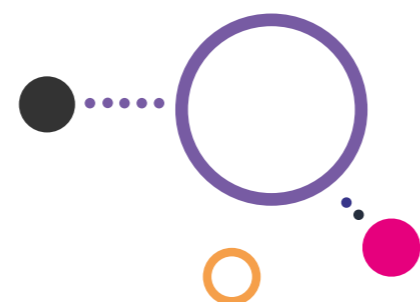
The Scottish Government, Young Scot and SAMH (Scottish Association for Mental Health) worked in partnership to deliver a 16-month Youth Commission on Mental Health Services. This involved discussions, encouraged debate and gathered evidence towards developing recommendations and actions to improve the experiences of young people when accessing mental services in Scotland. The Youth Commission is made up of young people aged 15 to 25, from different backgrounds and with a variety of experiences from across Scotland.

Over the course of the 16 months, we have developed a set of solutions and recommendations, with and by young people, for the Scottish Government, other service providers and multiple sectors to consider. These recommendations focus on how child and adolescent mental health services can be developed and improved for young people in Scotland both now and in the future, as well as ensuring young people receive the best care possible around their mental health and wellbeing. By using Young Scot's innovative co-design approach, we were supported to develop informed insights, ideas, recommendations and solutions for policy and practice in relation to child and adolescent mental health services. Being able to lead throughout this process has meant that young people were at the heart of influencing the development and improvement of mental health services in Scotland.

+ Over the course of the 16 months, we have developed a set of solutions and recommendations, with and by young people, for the Scottish Government, other service providers and multiple sectors to consider.

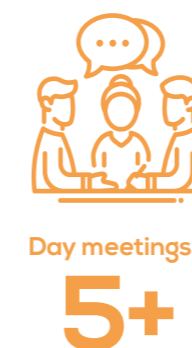
At the beginning of the Commission there was a real need for more work to be done surrounding children and young people's mental health. Since then, there has been a clear focus on the topic of mental health and involving children and young people in the changes being implemented. It has been amazing to see how the landscape has begun to improve already, and we hope that it continues to do so. It has been a great learning experience and has shown us that if young people put their minds to it, we can make a real change.

The Youth Commission and the recommendations we are putting forward are part of this fundamental shift in the mental health landscape, ensuring children and young people are involved innovative change in Scotland's mental health.



What the Youth Commission have been up to

#YSObservatory





The Process

#YCMHS #YSObservatory

Young Scot has extensive expertise in co-designing with Scotland's young people to seek their views and input in the development of the services they use. Along with SAMH's vast knowledge of mental health, this provided the right support and expertise for a young people led project to make an informed and invaluable impact on young people's mental health in Scotland.

Young people have a significant role to play in encouraging organisations and communities to adopt a more collaborative culture while focusing resources to effectively meet the needs of individuals and communities. Supporting people to co-design ideas has been shown to have a radical impact on service innovation, enabling a more distributed, decentralised approach to innovation that supports Scotland's ambitions to cede power and responsibility directly to young people.

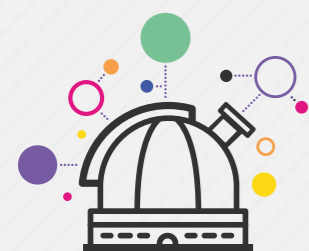
The Youth Commission on Mental Health Services worked through Young Scot's co-design process, systematically creating, designing and delivering solutions in collaboration with a wide variety of organisations; key experts; and other young people. By working through this process, we have been able to develop informed insights, ideas, recommendations and solutions for policy and practice across sectors that can improve the mental health support young people receive in Scotland.

Explore

The Youth Commission gathered the insights and experiences of other young people, as well as organisations from across the sector and service providers to better understand the challenges and success in the delivery of mental health services currently. This process involved both building a clear understanding of the landscape of mental health services through desk research; in addition to uncovering the issues faced through engagement directly with young people and service providers at a variety of events, service visits and workshops. Whilst fully immersing ourselves in the research, we explored our own perceptions and experiences of mental health services, however, it was also crucial to hear from experts in the field.

A key method we made use of through our research phase was the delivery of a symposium event. This involved over 40 stakeholders from mental health organisations; services providers; youth organisations; emergency services; NHS Scotland and many more. The symposium event consisted of the Youth Commission developing and delivering four exploration workshops and holding one to one interviews with each stakeholder who attended on the day. This was a vital research tool, ensuring we understood the current state of services in Scotland; what needed to be improved; and provided the space to explore how changes might be implemented with young people in both policy and practice.

By attending a variety of events, from local roundtables, to national mental health conferences, and visiting mental health services currently being delivered, we were able to develop a vast knowledge of the sector and the barriers young people are facing when trying to access support for their mental health.



Create

From extensive research and engagement, we generated ideas and co-produced solutions for testing. We held creative sessions with young people to gather their experiences of mental health services; the support they had received and to develop ideas for change. By understanding the variety of barriers there are for young people attempting to access mental health services, and the impact this can have on young people, we developed solutions that are appropriate for young people.

In a continually iterative process, alternating between creating and reflecting, we evaluated and refined our ideas with young people to create sustainable ideas that will have a long-term impact on service delivery in Scotland. We delivered over ten workshops ensuring a wide variety of representative young people were involved in our co-design process. These workshops included delivering fun, engaging sessions with schools; third sector organisations working directly with young people, and many

more to better understand the mental health landscape and how young people fit into this landscape.

In this phase we worked with organisations such as Barnardo's Scotland, Strathclyde University, Glasgow Clyde college, The Junction, Stirling Council and numerous others, allowing us to engage directly with over 120 young people. Within these workshops we explored the experiences of young people, as well as where they hope to see services in the future.

This allowed us to understand the opportunities within mental health services to be more supportive and appropriate for young people, along with young people's expectations of what good practice might look like. These engagement sessions also allowed us the opportunity to test our own ideas with young people, developing them through many iterations before finalising any recommendations that have a lasting impact.

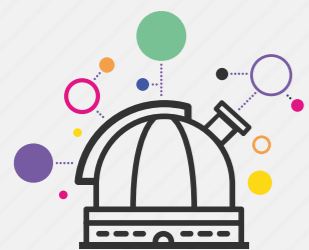


Reflect

Through reflecting on the insights, experiences and solutions developed with and by young people, we can consider the future impact and sustainability of the ideas produced. By working collaboratively with sector partners and stakeholders, including through an Advisory Panel of experts; one to one interviews; and a wide variety of events; we have iteratively developed our recommendations and ideas to ensure they will have long term impacts and be appropriate for young people throughout Scotland.

By establishing an Advisory Panel of stakeholders and experts, we were guided and supported throughout the process, providing a sounding board to help us ensure the ideas being developed were going to have lasting sustainability. Working with individuals across the sector allowed us to better understand the options available; existing service provision and the opportunities for change, as well as expert advice on how to tackle the challenges set to the Youth Commission.

Using what we learned from our research, engagement sessions and expert advice, we were able to reflect on the current barriers and issues young people are facing. Attending conferences, events, and engaging with a wide variety of people allowed us to reflect on our approach to addressing these barriers and how we feel they can be improved. These events not only showed us what must improve, but also some examples of good practice to be emulated throughout Scotland.



Recommend

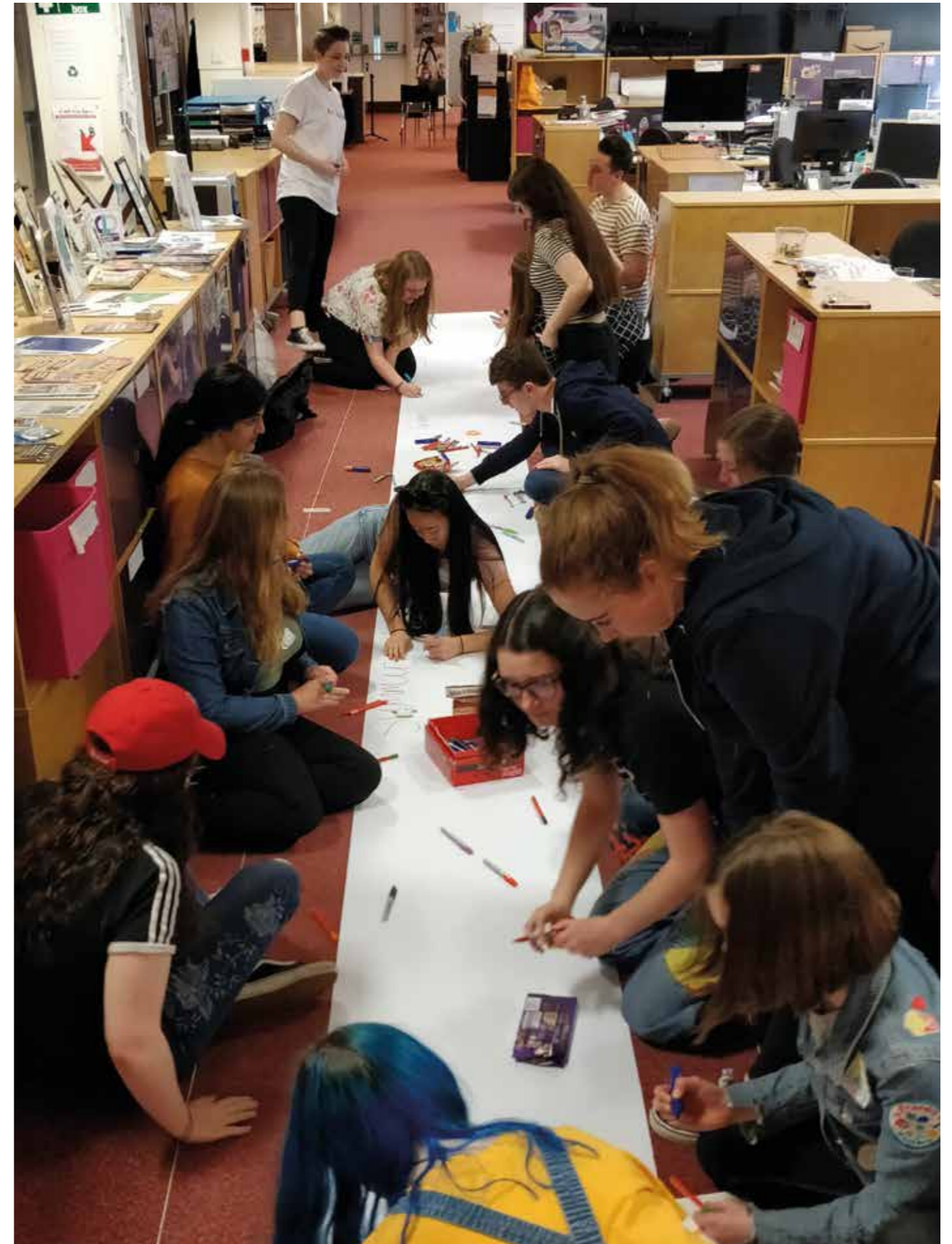
By working collaboratively with young people and stakeholders throughout the sector, collating and refining the insights and ideas collected and explored, we have produced influential ideas and solutions that can support young people in accessing mental health services according to their needs and the issues they are facing individually.

One of the biggest opportunities we received as part of the Youth Commission was being asked to co-chair the Children and Young People's Mental Health Taskforce. This has been extremely important to us as it has demonstrated the importance of young people's voices in the issues concerning children and young people. As co-chairs, we had the opportunity to share our work, encouraging our ideas and the ideas of others to be challenged. This helped us improve our ideas in the final phase of the project to ensure we produced influential solutions that could stand up to robust testing.

Through continual evaluation, investigation and development, we refined our final recommendations to be taken forward and implemented, by and with young people.

Implement

It is vital that the needs of young people are central to the delivery of mental services in Scotland, but it is equally important that young people have a say in how these are delivered and developed. The implementation of ideas and solutions with young people ensures that the ideas being developed are not only appropriate and have lasting, sustainable impact, but they are implemented sensitively and in a way that meets the needs of young people.



Themes and Recommendations



Throughout the Youth Commission, our focus was primarily on understanding the services that are currently being delivered in order to better understand how to improve them or replicate success. However, it became increasingly apparent to us that in order to make a difference our focus had to be on more than just the services. There are many layers that make up a service: the people delivering it; how they are trained and supported; the funding that holds it all together and so much more.



Through this we identified five key priority areas that our recommendations for change address. These are Services; Education; Community and Public Opinion; Training; and Finance, Policy and Rights. By addressing each of these areas we can begin to make changes not only to mental health services in Scotland but to the entire system.

These recommendations are not just the responsibility of the Scottish Government. Every individual and organisation in Scotland needs to take responsibility in order to make a change for mental health services and for young people in Scotland.

Services

#YCMHS #YSObservatory

Services is the largest of our five theme groups. It covers anything and everything to do with current mental health services, from how easy they are to access, to the gaps within them.

As expected, services were the central part of the discussions we have had as part of the Commission, as our aim was to focus on improving current mental health services with our recommendations, along with our personal experiences that demonstrate the many gaps in the services that are currently provided.

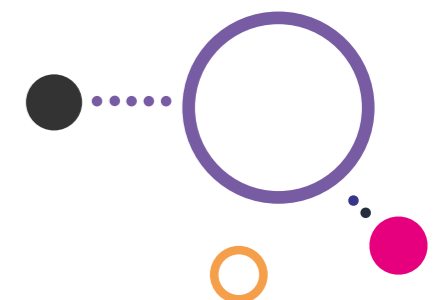
Mental Health services are extremely important for all young people and therefore need to be able to provide adequate support when accessed. We need to make sure that anyone looking for support can get the right access, at the right time, no matter where they are from.

One of the key barriers identified by young people through our engagement was that they often do not receive person-centred support. They said that mental health services need to be “more understanding of how the issues may impact the individual and not ranking or comparing one person’s situation to another’s.” As a result of this they do not feel in control of their treatment, and the treatment does not always meet their needs. One aspect of this is getting various treatment options in order to select what would work best for you. One young person told us “there was only one option of therapy available to me - not enough choice”. Another said, “there should be more art, play and music therapy available tailored to the young person”. An additional aspect of this is having control over how long treatment sessions last. We were told by one young person “it was really not helpful at all - appointment times are not long enough”, whereas another said, “meetings with disability service take one hour and a half, which is too long”. All these experiences clearly did not meet the needs of the young people.

Several young people who we engaged with through workshops sessions identified that they had been refused treatment from different practitioners, or were bounced between several services without actually receiving support, “I went to my GP for help and was told to read the website, then I’d be fine. But I’m not exactly fine.”



This is an example of young people having the courage to open up about their mental health and not receiving sufficient support. One young person told us that “the best help is not always given. Getting sent home when you are not okay is bad”, while another shared, “a girl that has recently passed away was shuttled around groups. She ended up committing suicide even though she went for help, they didn’t really help”, which shows the severity of this barrier and the issues young people are facing. A young person expressed that being taken seriously is often a challenge, “GP’s sometimes undermine how serious problems can be due to your age and blame other things like hormones. They say it is a phase and you’ll grow out of it”. Crisis support was also identified as an issue that young people faced, in getting the support they need in a crisis or before they reach this point, “they dismiss people’s urgency and prioritise other issues, which makes you feel less important. For example, a family friend’s son is suicidal but was denied professional help because he didn’t have a ‘plan’ [to carry this out].”



Through our research we welcomed the discussion of mental health in Scotland with over 40 stakeholders at various symposium workshops. The need for improvement of waiting times became one of our biggest priorities as it was mentioned in all four workshops consistently.

As well as this being identified by stakeholders, one of the key barriers identified by young people in every engagement session delivered was extensive waiting times and the issues this could cause, "CAMHS is too clinical and the waiting lists are so long that you literally have to be dying." Young people feel waiting times are too long and detrimental to a service user's mental health. People do not end up getting the care they need when they need it. A young person clearly pinpointed the issue when they told us "sometimes you feel you're not important if you have been waiting for too long, could be life or death". This exemplifies how big a barrier waiting times can be, and how detrimental this experience can be for young people. They expressed it often made them feel like no one cares or that their struggle is unimportant. By putting other measures in place to support young people with their mental health, including education; prevention support; a variety of care options; and local specialist support would allow young people to feel comfortable and safe, this will all help to reduce the demand on waiting times for Child and Adolescent Mental Health Services (CAMHS).

Another important topic acknowledged was crisis support. We found that it is often not available out of hours and in rural areas. There needs to be support for those at their most vulnerable point.



16/18-25 services were consistently identified as important to young people. On delivering the same workshop to five different groups of young people, it was identified that young people strongly believe there is currently a distinct lack of services for those in that age group, resulting in young people being put in adult services. We found that the current approach is difficult for young people as they are going through already dealing with a variety of transitions and putting them in adult services makes this process even more challenging for them.

Care options and accessibility were other important issues recognised when it comes to service delivery. Having a larger variety of treatments allows you to choose and be in the correct service ensuring this choice is person-centred. People respond differently to services, so we therefore need services to be more accessible, making sure everyone has the same level of care no matter age, location, or the time they are able to access them.

Our final priority identified with young people is General Practitioners' (GP) contact with mental health services. Young people felt that currently not all GPs are well equipped to deal with people's mental health issues directly. A young person shared their experience of GP services within one of the workshops delivered, stating that support was "really not helpful at all as appointments were not long enough and I felt rushed". This can lead to a young person not gaining the best information and support possible.



Recommendations

1. **There should be a standardised framework to measure the success of mental health services for young people.**
2. **There must be a person-centred approach to mental health services.**
 - i. Young people should have control over the length, regularity and location of appointments, to ensure they feel comfortable and secure with the care they receive and to aid their recovery. This is not to undermine clinical support but to give the young people the choice of the best options available to them.
 - ii. When assessing young people's mental health, the questions used need to identify more than if they are at a crisis point but understand how they are feeling both in the moment and generally.
 - iii. There should be transitional support to address the gaps in services to allow young people to choose what their care looks like. This means there needs to be an overlap in services to allow for a more seamless transition. Young people should have a choice and have effective support throughout the process on when to transition to adult or young adults' services. CAMHS services for young people should include:
 - Youth services available up to 18-year olds
 - 'Young adult' services made available from 16-25
 - Adult services available from 21
 - iv. There should be a service for 16 to 25-year olds that is focused on stages of life instead of the patients' age. Such as when a person is moving from compulsory education into independence and employment and supporting them through this stage.
 - v. Less clinical language should be used when communicating with young people around their care. The language used while talking to young people should be easy to understand, respectful, and comforting.
 - vi. Initial assessments of young people and their mental health should be face to face until they can identify their care plan. This process should not extend past four weeks.
 - vii. When a young person moves local authority their mental health support and care should not be disrupted or halted. Transitions to new service, no matter the local authority should be supported in a way that is appropriate for the individual.
 - viii. Medication should not be the only or automatic option. There should be a variety of care options available to the young person. Other complimentary therapies should be offered and encouraged where appropriate (e.g. art therapy, group therapy, etc.)
 - ix. Clear monitoring processes should be created and consistently implemented with patients to ensure they are put on the right medication and this is continually reassessed, in line with NICE guidance. Medication may not be suited to the individual even if it 'treats' their mental health. This must be consistently used to ensure they are on the right course of action for each individual patient.
 - x. The workforce of all mental health services for those up to the age of 25 must be increased to meet demands and ensure that young people's needs are being met.

3. There should be services available out with the working hours (9am to 5pm).

- i. Crisis support should always be available to all young people, 24 hours a day, 7 days a week, 365 days a year. Counselling should also be available outside 9am-5pm but not necessarily overnight to suit the need of young people in school. This will ensure that all young people have access to appropriate services and don't have to take time off of education, work etc. to attend appointments.

4. Services should not be centralised but standardised, to allow access for every young person to quality and appropriate mental health services.

- i. A 'basic standard of care' should be developed and monitored continuously across Scotland, specifically for young people accessing services. This should ensure that all young people receive an appropriate level of care.
- ii. Young people should have the same support no matter where they live. A young person's background, culture, ethnicity and location should not limit the amount of care they receive.
- iii. Services within rural areas should be mobile to allow access to all young people when accessing public transportation might be difficult. This would help focus on providing more quality support services within rural areas. (including Highlands and Islands).

5. Waiting times need to be reduced to eight weeks without compromising the care provided to each individual young person. This should be achieved incrementally by 2029.

- i. While on the waiting list for CAMHS young people should be linked to other mental health support services that may not necessarily be clinical services. This may be local community support; speaking to a specialist mental health nurse; peer-to-peer support or other resources. This will ensure they are immediately beginning to address their mental health, and where possible avoiding reaching a crisis point.

- ii. Following their first assessment or referral, young people should be referred not only to CAMHS but to other support services. CAMHS may not provide the appropriate support for all young people, so they should have the choice to be directed to other local and community-based services.
- iii. Young people should not have to wait more than eight weeks to receive regular and appropriate care but by providing support immediately in some form young people can start to address their own mental health. For some young people this might be enough, and they may not need to access CAMHS, or it may stop their mental health from worsening while they wait for support.

6. There needs to be access to a trained mental health professional, not necessarily a GP, available in every health centre or surgery on a full-time basis.

- i. By providing a mental health practitioner, with an appointments system for 20 minutes slots, this will allow young people to either speak about their mental health issues or gain information about other services they may want to access locally, in an environment they feel safe and supported in so young people can access accurate information quickly or even just talk so they might not need to be signposted to another organisation.

7. All mental health referrals should be treated with the same importance as a referral from a medical professional.

- i. Clear referral guidance and a process should be put in place to ensure that anyone with duty of care over a young person (e.g. youth workers, teachers, parents and carers) can make a referral which will result in support for the young person.
- ii. Clear criteria for CAMHS accepted referrals need to be created to help ensure young people are accessing and being referred to appropriate services. This gives also gives clarity to those who aren't accepted to a service.

8. Crisis support needs to be improved to keep young people safe.

- i. Young people should not be turned away from hospitals or other services when at a crisis point for their mental health. All hospitals should have a crisis support team there to support the young person.
- ii. Hospitals should have a 'safe space' within accident and emergency for people going through a crisis. This may be an appropriate area that is quiet and welcoming but monitored by staff with mental health training.
- iii. A Scotland specific text service needs to be provided for those going through a crisis as some people may not be able to talk on a phone. This must be advertised effectively through online, schools, higher and further education, and mental health services etc.

9. Therapeutic spaces should be more welcoming to young people.

- i. Spaces need to be less clinical in order to make young people feel comfortable and safe, allowing them to make better use of the support being offered. These spaces should be co-designed with young people.

10. There needs to be a focus on preventative services not just support services, including education, support, advice and early intervention.

- i. Developing and providing services which prioritise early education and provides support before mental health intervention is required, allowing young people to build resilience and confidence in managing their own mental health.

11. Mental health services need to actively embrace digital tools and technology, but patients should have the option to make use of technology if that suits their needs. This should not be the only choice and should not take priority over all other options available.

- i. The ability to book appointments online should be available to young people accessing mental health services, this should also provide the ability to change or cancel appointments to allow flexibility while maintaining consistency.



12. Mental health support should be immediately offered to young people who are diagnosed with long-term or enduring physical illnesses.

- i. Anyone offering primary care to young people should be equipped to refer to a specialist and specific mental health services where appropriate, this includes the knowledge and understanding of how a long-term condition may affect their mental health and knowledge of the support services available. This may include mental health specific services relating to the long-term condition.
- ii. All young people with a long-term condition should have access to mental health services when needed and are seen within eight weeks of diagnosis.

13. Improvements need to be made to mental health support specifically for young people in care.

- i. If a young person in care must move local authority, they should not be put to the back of a waiting list and their care should be continued, in as similar a way as possible to that which was being provided, in the new local authority.
- ii. Young people in care should have control over how they access mental health services and the information around their mental health, as well as consistency in the support they receive no matter the local authority or care provider.

14. A service should be created to support children and young people with parents and carers who are struggling with their mental health.

- i. A service that can support young people whose parents and carers are struggling with mental health should be created. This should include a source of peer-to-peer support where young people can make friends and meet others with shared experiences and take part in activities such as homework clubs, sports clubs etc.

15. When treating a young person, mental health professionals must take a holistic approach to their treatment, care and diagnosis. There should not be a reliance on a single policy or procedure, such as the use of Adverse Childhood Experiences (ACEs). Policies should adapt to reflect the needs of young people as they change and develop.

Addressing the barriers and challenges in mental health services was our key priority and largest theme area. Young people felt passionate about making a change and ensuring everyone has the right level of support. We found from our research that young people feel that they are being treated as a statistic rather than an individual. It is important that we prevent young people from being rejected from support. The focus needs to be on the young person seeking help and providing the best possible care.

Young people should be able to access a service at a time that suits them rather than when it suits the service. This should also mean that the services are easily accessible no matter where the young person lives. From our research we found that young people should feel comfortable enough to talk openly. Technology is growing at a fast rate and we should be using this to make accessing services easier for young people. The information and resources that people are receiving must be accurate and tailored to their needs, whether this is online or offline.

We hope that these recommendations will be taken into consideration by all sectors, but specifically Scottish Government, CAMHS, Local Authorities and Third Sector.



Case Study 1

Dr Carey Lunan, Chair RCGP Scotland

Royal College of General Practitioners Scotland
 As a GP in Craigmillar Medical Group, which serves one of the highest areas of socio-economic deprivation in Scotland, we care for around 9000 patients on our practice list. We operate as a GP practice, and offer all the usual healthcare associated with this through a wide multidisciplinary team.



Case Study 1

#YCMHS #YSObservatory

Around 18 months ago, we did not have a practice-based mental health team, and almost all mental health workload was managed by the GPs – or referred on to local voluntary/third sector organisations or specialist services, with varying levels of engagement. As GPs working in an area of high deprivation, the prevalence of mental health issues is very high, across all ages. We estimate that mental health issues were discussed in around one third to one half of all our GP consultations.

Over this time, we have recruited a team of three primary care mental health nurses, (one lead nurse – band seven; two nurses in training and development posts – band five). These are new roles within the NHS.

The team see many young people, from the age of 12, referred internally from the GPs team. They are contacted quickly by telephone and offered an appointment after school.

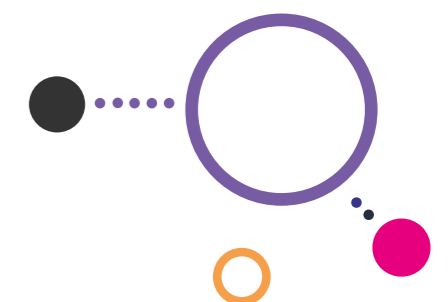
The most common issues discussed are:

- ⊙ Gender identity issues
- ⊙ Social anxiety
- ⊙ Peer pressures issues – sex, alcohol, drugs
- ⊙ Self-harming
- ⊙ Social media issues (gaming - addiction, pressures; cyber-bullying)
- ⊙ Family difficulties (joint appointments are also offered with family members)

Their interventions consist largely of crisis management, general psychological support, signposting to local services (e.g. HOT, the Rock Trust, LGBT, online resources). A very small percentage of patients are referred on to CAMHS.

The mental health team feel their ingredients to success are:

- ⊙ They are based within a trusted environment (the GP practice) so access is less intimidating
- ⊙ They offer a primary care model of mental health provision; no formal internal referral system, rapid access to appointments, shorter and more frequent appointments, no “discharge” from the service
- ⊙ They are often already known as health care professionals to patients’ families (often parents and carers) therefore less stigma, more trust
- ⊙ They are proactively establishing relationships with the local school to gain a good understanding of the support there – and also to support the staff, which allows a consistent approach, builds interfaces and improves staff wellbeing
- ⊙ They focus on de-medicalising social issues (estimated 99% of referrals are for mental distress and not a mental illness)
- ⊙ They offer positive and consistent role-modelling (often absent for these young people)
- ⊙ Quality assurance is maintained through regular case discussion, joint consulting and good access to specialist decision support





Education

#YCMHS #YSObservatory

The theme of education is extensive, covering everything from support for students at college and university too early education within primary school. We maintained a focus on ensuring mental health education is embedded within the school curriculum and that there are suitable types of support for young people in all forms of education.



When exploring our initial thoughts and perceptions around mental health, questions surrounding schools, higher and further education, as well as mental health being embedded within the curriculum, emerged continuously. This was clearly a key priority area for us to focus on. From there, education made a constant appearance throughout the conversations we were having. Education is a very important aspect of mental health for all young people. The majority of us go through some sort of mandatory education. This makes it an accessible area in which all young people can be reached and conversations surrounding mental health can be started.

Education itself can also influence the mental health of a young person, for example: exam stress, bullying and pressure from the people around them to do well. The research that we have conducted and the conversations that we have had with young people have shown us that education on mental health, as well

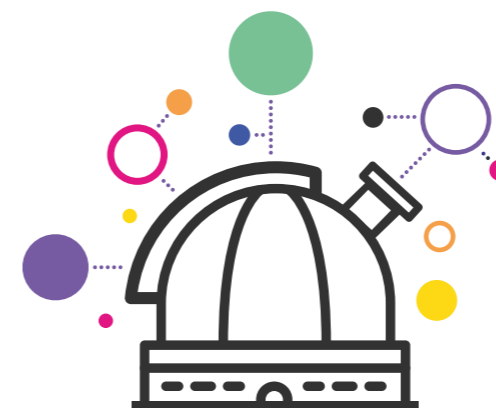
as the support young people receive within school, is very limited. When delivering a workshop to over 40 high school students they only had knowledge of two support services within their school, guidance teachers and the school nurse, neither of which are mental health specific. They concluded that the biggest priority for them was to improve the lack of support and advice available in schools. This was identified clearly as a key barrier, that there is not enough education about mental health and how to express your feelings, nor enough information provided about what support is available to them. Many young people expressed thoughts such as “I don’t know how to access services” and “there is not enough advertisement of where you can go”. One young person told us “it can be hard to express how you are feeling and not know what to say, so counsellors just ignore it”, demonstrating how much of a barrier this can really be. Furthermore, young people recognised that school can cause stress and poor mental health

The young people we engaged with felt that there should be a focus on support and advice within schools. From meeting with a group of 30 student teachers there was a need to address the “gap in student teachers’ knowledge and understanding of how to speak to children and young people, knowing what to do if they are in distress.” Having counsellors and trained youth workers in schools to offer support when it’s needed will help take pressure off services and provide support to teachers too. This method of support also means that provision is offered in a less clinical setting helping students build supportive relationships.

A key barrier identified by the young people in further and higher education we engaged with was a lack of support resulting in failing classes or dropping out of their course. They recognised that more support in higher and further education would mean mental health services are accessible and appropriate for those young people, aiding in the prevention of dropouts.

We also found that young people felt that mental health should be part of conversations from a young age within education. This will help create an open and welcoming atmosphere, allowing young people to thrive and be successful throughout their experiences in the education system.

+ We also found that young people felt that mental health should be part of conversations from a young age within education.



Recommendations

1. Mental health and wellbeing education for pupils in both primary and secondary schools should be standardised across Scotland.

- i. The education sector should work with young people to develop a universal resource on mental health and wellbeing to be used within schools to ensure consistency across Scotland. This will allow teachers to focus on their core tasks while also delivering quality and appropriate education on mental health to young people.

2. Mental Health should continue to be embedded within education from an early age in order to strengthen the knowledge and awareness of mental health.

- i. Emotion and resilience classes should be provided to all students from primary one to teach students how to work through their emotions in a healthy way. This would normalise mental health from a young age; reduce stigma; and prepare them to manage their own mental health.

3. There should be a whole school approach standardised across Scotland when it comes to Mental Health.

- i. The following things should be accessible by every school in Scotland:
 - training for all staff involved in education;
 - counsellors, youth workers and support workers in school environments;
 - staffed safe spaces for young people to deal with their own mental health;
 - A mental health crisis protocol that should be co-designed with young people.

4. There should be a peer-to-peer support service in every secondary school for young people that might want to access it as part of a whole school approach.

- i. There is a lot of pressure on 'mental health ambassadors', so there should be trained young people who can support each other if it is wanted. The training should be focussed on allowing young people to access the relevant support they need.

5. Higher and further education facilities should provide appropriate and ongoing support to all students when needed.

- i. There should be a variety of options available, such as but not limited to counsellors for students who want to talk to someone and peer-to-peer support. Other options should be available depending on the students' needs. By providing support in further and higher education, it can help to reduce waiting times and help ensure students feel less isolated.
- ii. There should be monitoring procedures to ensure higher and further education institutions are reflecting on the reasons why students drop out or change courses.
- iii. Education institutions must have follow-up meetings with students when they move classes or drop out to ensure they are supported and to give them the opportunity to say why they chose to leave a particular class. This should include students who are working on their dissertation. This can be a big part of their university career which can cause a lot of stress for students.
- iv. Students in placement related courses should be offered time and space to debrief between placement and university classes to help students manage their mental health

We hope that these recommendations will be taken into consideration by all sectors, but specifically Education Scotland, Colleges Scotland, Universities Scotland, Scottish Government, Local Authorities.



#YCMHS #YSObservatory

Education plays a part in the majority of young people's lives whether that is primary, secondary, higher or further, so it is important to explore the topic of mental health throughout. Talking about mental health from an early age would help normalise the topic.

We also found from our research and engagement with young people that creating an accepting and supportive environment would allow pupils to speak up when they are feeling low and help to prevent the need for further access to services.

Education can be tough for many young people, especially whilst going through exams and transitions.

This means it is important for students to have someone to talk to who understands what they are going through and can provide the right support.



Case Study 2

Pam Steel, Teacher, Wallace High School

Pam Steel is the PE Teacher and Lead for Mental Health in Wallace High School, currently on secondment with SAMH as the Education Development Officer.

Since 2015 our school has been developing and embedding a whole school approach to support the mental and emotional health of pupils and staff in our school.

Our initial aims:

- 🕒 **TALK** about mental health
- 🕒 **SIGNPOST** to appropriate support
- 🕒 Be a **PILOT** school with See Me

We created a simple, memorable and positive brand for the programme to help open conversations about mental health. It's called "it's all about me". We later changed our brand to include an elephant, to signify the 'elephant in the room'.

We held a launch week of activities to introduce and open up conversations about mental health. Following this, we worked closely with See Me in piloting their 'What's On Your Mind?' resource.

See Me trained around 20 members of our school staff in Scottish Mental Health First Aid. To identify them easily, they all wear red lanyards and posters showing their photographs are displayed throughout the school. We have a group of young people from S1-6, known as Mental Health Champions, who provide signposting, peer support and promote mental health in the school and wider community.

We created a 'Health Hub' in our library with signposting for young people – which included local and national support. There is a similar board in the staff room for all staff. Additional signposting was provided in clip frames in the staff and pupils toilets and on our website.

In 2016 we held our first Mental Health Week, this is now an annual event on our calendar, each year taking on a different focus. The week involves a range of activities, workshops, guest speakers and fun whole school events.

Staff were trained in identifying 'warning signs' and our Mental Health Protocol. Both posters are displayed publicly in all workspaces.

We created an information leaflet to support parents/ carers in identifying potential warning signs for mental health, suggestions on how to open up conversations around mental health and signposting to support services.

Schools could easily adopt a similar whole school approach. It requires the Head Teacher's full support, someone with passion to drive it and a willing staff body.



Case Study 3

#YCMHS #YSObservatory

The Mary Erskine School, Mental Health Ambassador Programme

Mental Health Ambassadors

The work of the Mental Health Ambassador programme stemmed from a small idea at our school student council. It consisted of 16 S5s who were interested in becoming the first Mental Health Ambassadors in the school.

We were given two full days of intensive training from specialists who provided us with the basic skill set and knowledge of mental wellbeing that would enable us to help the other years in school.

During Monday mornings, we had the chance to speak to S2s and present in pairs or small groups to the classes about a wide range of mental health issues from an introduction to the fact that everybody has mental health and the importance of taking care of each of our mental wellbeing. Methods to handle stress in a school and home environment were also points that were brought up, with all sessions having an open and confidential environment for any individual to speak freely.

Poster-making and post-it notes were incorporated throughout a majority of the activities we lead with the classes, which allowed group work and an informal chat between everybody without the divide of difference in ages. It was an invaluable experience for the ambassadors themselves, but also the feedback given from the younger years after the term of sessions was overwhelmingly positive.

Just introducing the conversation into school classes about mental health is important and I believe that this scheme would be beneficial to be introduced to all schools in Scotland. It does require investment of time, but the results are proven here, and I have experienced it first-hand.



Community and Public Opinion



#YCMHS #YSObservatory

We want to ensure the topic of mental health is being spread across the community, not just in dedicated services and educational environments, to help to reduce stigma and ensure people have the right knowledge to support young people in their communities.

We felt it was important for everyone to take responsibility for supporting young people with their mental health, and to have a basic understanding of how to go about this. We feel that resources should be open and easy enough for everyone to be able to use. Throughout our stakeholder symposium event, it was repeatedly highlighted that young people should be at “the front and centre of the work to develop mental health resources.”

We want to ensure young people have the right support locally, no matter where they live, work or study. Not all young people attend school or other forms of education, so it is crucial we have options of other ways for people to receive knowledge and support. It was recognised throughout our engagement with both students and educational institutions that most colleges have some support available throughout the day, however, it was highlighted by one college student who attends night classes that there is no support staff or services to access at this time. There is a lot of information out there, some good and some less useful for young people, but this does not mean it is easily accessible. We need information to be clear and concise allowing everyone to be able to understand how they can support each other and their communities, whatever they may look like. You never know when you will need to offer support so having the right, relevant and appropriate information is important.

One of the barriers identified by young people is a lack of respect from many adults due to the prejudices they may have. They felt teachers, lecturers and NHS staff can sometimes be dismissive and judgemental when young people express their struggles. One young person told us “When I was sleeping 12 hours a day, I was told I’m just a lazy teenager. I am anaemic and have depression”. Another suggested there should be education for both lecturers and students on “mental health, bullying, discrimination and respect” emphasising that “Students are not naughty school children!”.

Making it obvious that other people are going through similar things is crucial, but also having a safe-place to go to in every community, that’s not a hospital or doctor’s office. Young people expressed that not having local or community-based support is also a barrier to accessing mental health services. One young person expressed; “Services are too inaccessible, needs to be more available in schools, colleges, universities etc.”.

Another told us they must “travel 10-20 miles to services instead of accessing community-based services”. The lack of such services means that if young people are unable to travel this often means they cannot access support. There needs to be more awareness of places specifically for young people to go, who need someone to talk to e.g. a youth organisation or “safe haven”. There is a need for more safe-spaces in communities, specifically for young people.

Another recognised barrier to accessing the right support is the stigma surrounding mental health. The narrative about mental health and young people on both a local and national level can often prevent young people from seeking support - as one young person told us, “You are judged too much, for example about self-harm. Which stops people coming forward”. Another young person expressed “Young people are tarred as ‘generation snowflake’ and are under scrutiny when coming forward with mental health difficulties”. This exemplifies how much of an impact this has on young people struggling with their mental health and their ability to access appropriate and timely support. Many young people also found it was difficult to find or get support when caring for another person with mental health issues, and support from their community could provide vital relief and care when they themselves are struggling.

Throughout our project we felt that we need mental health to be taken as seriously as physical health as a key priority in changing how people think about their own and other’s mental health. When delivering the workshops to both college and university students two thirds of the group highlighted their top priority to be improved upon was stigma and prevention. Early intervention and prevention will help provide support before reaching a crisis point.



+ They felt teachers, lecturers and NHS staff can sometimes be dismissive and judgemental when young people express their struggles.



Recommendations

- 1. More work needs to be done to reduce stigma and educate the general public to ensure young people access services without feeling judged. This work should be co-designed with young people to ensure that it is relevant and meets their needs.**
 - i. More work needs to be done to reduce mental health stigma around anyone who identifies as male. This should include creating more awareness of the organisations who do work around men's mental health, such as SAMH's The Changing Room - this work should target young men up to the age of 25 as well. This would have the goal of reducing the high suicide rates amongst males.
 - 2. Available resources and where to access support needs to be advertised more effectively. If a young person is directed elsewhere, a follow up should be in place to ensure they are receiving the support.**
 - 3. A resource should be created to educate young people on safe self-harm – this is not to encourage young people or glamorise self-harm, as some may see it, but to ensure people are being safe and have safer options, as well as allowing the public to understand the specific support required.**
 - 4. More community-based approaches need to be available nationally to support mental health.**
- i. There should be support that can be accessed in every local community. This will create a community-wide approach which can support young people; combat isolation; and help people deal with their issues in a more personal and effective way. This can help reduce strain on national services.

When working with young people, stakeholders and the public we identified that people wanted to learn and know more about mental health. We feel that if more people understood mental health and the support appropriate for young people, this would help to reduce stigma allowing more young people to speak openly about their emotions.

From the research and our own experiences, we found that when young people are receiving support, they are often given a list of websites, or handed off to another service that may not be right for them at that point in time. By ensuring that everyone in the community has a basic understanding of mental health, as well as reducing stigma this would also allow them to support others more effectively.

We hope that these recommendations will be taken into consideration by all sectors, but specifically Third Sector, Local Authorities, Scottish Government.



Case Study 4

Sam Anderson, Director, The Junction

The Junction evolved out of the personal and professional experiences of the founding Director, of services which were meant to help often actually compounding difficulties and the expressed desire of local young people for a confidential young people only space in which to access support on any health and wellbeing issue. Identified in Action Research project - 'Safe & Sorted? Not in Leith'

The Junction offers a range of relationship based, integrated health and wellbeing support services and experiences from our purpose designed space in Leith. We also go out and about, engaging with young people where they are.

Young people are able to tailor their engagement with the Junction to best meet their needs. Service experience is planned together through discussion of what is going to work best. Young people have a range of different ways of engaging with services including street work, outreach, drop in, walk in, appointment, regular group and can engage in this range of possibilities depending on what is right for them. The Junction has a team of workers skilled in relational working available to support young people with their mental health in a range of ways including therapeutic counselling, developing healthier coping strategies, exploring life circumstances which may be impacting on mental health and embodied work. Young people can base how they do their work on their interests and talents thus there are talking, singing, art and body options. Young People can connect with peers through the Junction Youth Advisors and other group opportunities.

The Junction has a co-produced Theory for Change validated by the University of Edinburgh's Scottish Collaboration Public Health, Research and Policy department. We have worked hard at understanding and capturing our learning from offering Junction services over the past 14 years and are very open to sharing this. We also have some capacity to support others in developing what might be the right response for them locally. Like the Junction itself endeavours to honour the uniqueness of every young person, any 'replication' needs to honour the uniqueness of that community.

Key components of our success are: partnership working, strengths-based approach, treating young people as contributors not consumers, no set pathways, rather responsive to individuals, integrated and relationship based - no silos or multiple engagements or unnecessary telling of story.

www.the-junction.org





Finance, Policy and Rights

#YCMHS #YSObservatory

It is vital that young people know their rights around mental health, in order to make sure they receive the right support. While it is key that young people received the right support when they need it, we also recognised just how important funding and policies are when it comes to young people accessing and receiving support from services.

From the initial conversations and exploration and throughout the work of the Youth Commission, funding, along with policy and rights, has been identified as a key priority to address. It is clear that funding for mental health services is limited and many struggle to provide the best support to young people. We also identified through our engagement with young people, that very few knew their rights surrounding their mental health, or understood what policies are in place to protect them. Finance is just as important to young people as it is anyone else. If services and organisations don't have the funding to deliver the services, this limits the young person's opportunity for care.

We found through our research, the importance of funding in creating and sustaining mental health services. Having consistent funding for mental health would allow services to be more sustainable, in turn, ensuring more organisations remain in place to support young people. One young person recognised there needs to be "more funding to help young people now before it's too late. This would end up costing more in the long run." Funding is a key issue for services and organisations, a lack of money means services can't operate to the best of their ability or even at all. This could result in someone not getting the support they need because their local service is no longer open.

While many young people thought there should be a general increase in funding across all mental health services, there was also a focus in ensuring equality in funding across national and local levels as well as third sector organisations. We found throughout our research there is a need for funding not just to be increased but to remain consistent as several young people noted that some successful services come to an end due to funding being no longer being available, leaving them unsupported. Furthermore, young people recognised that if local authority services are going to continue to signpost onto third sector organisations then stable funding must be identified.

If young people know their rights and what they are entitled to, this means they can get the right level of support when experiencing poor mental health. Young people identified throughout all of the sessions, that there was a need for clarity on their rights in general as well as their rights regarding mental health. If young people had the knowledge about their rights around mental health, they would be more likely to actively seek support. For example, knowing that they have a right to confidentiality allows young people to share experience more easily. Young people suggested that health professionals should take a greater role in making patients' rights clear. Throughout the co-design sessions we gained feedback that rights around mental health need to be more accessible. As well as whilst receiving support, young people felt their rights were sometimes not respected.

+ If services and organisations don't have the funding to deliver the services, this limits the young person's opportunity for care.

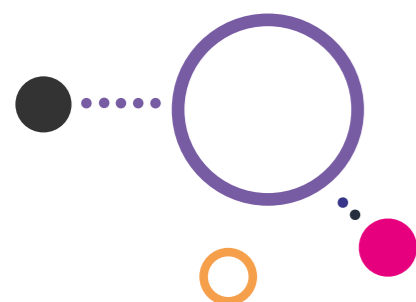


One of the young people we engaged with shared an experience of having to disclose the specifics of a disability in order to be taken seriously, providing a difficult barrier to overcome when trying to access support. This demonstrated, along with the stories shared by other young people, that there is a demand for clarity on what they are entitled to surrounding their mental health care.

The vast majority of young people within all the workshops we delivered identified being concerned that no one will listen to them or take them seriously. This can prevent you from accessing services, as well as the worry that confidentiality will be breached and there is no one you can trust or talk to. One young person told us they were "scared that no one will listen to me" and that they "don't really trust anyone to tell them". With another expressing "fear that professionals might tell my mum" as a reason they have not accessed support.

Young people found that signposting was another key issue to be addressed, as this is often how they found the right support, but it may also stop them from having access to support when care providers feel this is enough. It is vital that the right information is being distributed, signposting is not a person-centred approach. Young people feel they have a right to more direct support than leaflets or online links.

+ The rights of children and young people should be embedded into all practices. Young people should not only have their rights respected but also be aware of their rights to ensure they understand before undergoing treatment.



Recommendations

1. **More funding needs to be available and sustainable across all sectors, including public sector, private sector and third sector, at both national and local levels to increase the capacity of services and ensure that young people have access to quality support.**
 - i. Scottish Government should invest more funding to mental health services, covering all of the following; prevention, clinical, education and community. Funding should cut across multiple policy areas because Mental Health affects more than health and wellbeing (e.g. education or employment).
2. **Funding needs to be monitored and documented across all mental health services to ensure services are held accountable and stop young people from potentially falling through the cracks.**
 - i. Review of funding and spending of all mental health services to better understand how funds are distributed. Ensure that this information is accessible to public.
3. **Policies around Mental Health should address young people's rights, be clear and accessible, and have consistency across all sectors, to ensure young people have access to the support they are entitled to.**
 - i. The Scottish Government should develop guidance for all employers of young people up to the age of 25, to outline the young person's rights and how their mental health can be supported. Young people should also have access to this guidance to ensure that their rights are being met and they are being supported appropriately. This should be applicable across all sectors. The guidance should be co-designed young people.
 - ii. UK Government should clarify and provide guidance how mental illness fits under the equality act and what young people with mental illnesses are entitled to.
 - iii. Accessible guidance on Scottish benefits for young people struggling with their mental health should be produced to clearly outline what benefits are available, who is eligible and how to make a claim.
4. **Young people must be at the centre of the decision-making process regarding their care and supported to understand their rights.**
 - i. Young people should have the option to choose what information remains confidential unless there is a risk of harm to themselves or others
 - ii. Young people need clear accessible guidance on what information is confidential and how this will be shared and with whom.
 - iii. Young people need clear and accessible information on what care options are available for them and are able to choose what is best for them.
 - iv. Before any changes to care, conversations must be had with the young person in question to ensure that all appropriate care options are explored.
 - v. There should be regular conversations to ensure young people are capable of making the best decisions for their care.
 - vi. Young people should be able to bring a trusted person into discussions around their care and be made aware that this person can be a friend as opposed to a parent or guardian.
 - vii. Young people should be educated about their rights around their mental health. Young people's rights surrounding mental health should be brought together into a simplified, accessible document.

This document should be distributed to schools, GP's, colleges, all mental health services and online to start conversations surrounding young people's rights. This information should be co-designed with young people.



#YCMHS #YSObservatory

5. **Mental health care should not be refused. Signposting does not equal mental health care.**
 - i. All young people who request support must be directly linked to a service, whether this is clinical or not, therefore ensuring the young person is supported appropriately.
 - ii. NHS policies should be updated to state that young people in mental health crisis cannot be turned away. These policies should be clear and easily accessible to young people.
6. **Young people should be supported to understand their rights through the Mental Health Act, including;**
 - Clarity on what care you can receive;
 - What your rights surrounding treatment are;
 - Your rights when receiving any and all mental health care not just when receiving in-patient or compulsory care.
7. **An accessible and young person friendly version of the act should be created.**
Our hope is that every young person that tries to receive support, can. It is important that this process is made as easy, comfortable and as accessible as possible, reducing levels of confusion, for the young person seeking support.

Funding is just as important to young people as it is to stakeholders. We hope to see funding allocated to mental health services equitably, across communities, education and services.

From our research we found that young people felt they should be allowed to be referred to mental health services by someone that sees them regularly and knows what the young person is going through, not just their primary care provider. Young people need to be at the heart of the decision-making process allowing them to choose the care they feel is best for them.

Most importantly if a young person doesn't know what they are entitled to when it comes to receiving help, are they really getting the right support?

We hope that these recommendations will be taken into consideration by all sectors, but specifically Scottish Government, Local Authorities, UK Government, NHS Scotland





Training

#YCMHS #YSObservatory

By ensuring everyone has the right level of training to deal with mental health and the issues young people may face, this is where support begins. If people are trained, then this means they will be in the right position to support a young person.

From our discussions around how we can improve current support for young people's mental health with both young people and stakeholders, we recognised many gaps in the training that people who are in contact with young people receive. As part of our research we explored who training may benefit and why they needed it, by considering in what situations young people may need support from the people around them. We recognised a need for training in general, not only to mental health professionals but also to emergency services, teachers, dinner staff – anyone in a position to support a young person experiencing poor mental health. Training is an important aspect of mental health services as it focuses on ensuring that the people who are delivering help are qualified and know what to do. There are many situations in which poor mental health may come in to play for a young person and therefore the people around them should know how to help them appropriately without diminishing how they are feeling.

Currently there are very few opportunities for people to receive mental health first aid training because of barriers such as funding and accessibility. From the experiences of the Commission and young people we engaged with, we all felt there was little awareness and knowledge around mental health for educators, first responders and staff within the NHS (that are not specifically specialised within mental health) and training was not consistently received by all staff. This is important for all staff to be trained in mental health support as they are the people who would be in direct contact with young people who may be struggling with their mental health on a daily basis. This can make it very difficult for them to help the young person to cope with what they are going through and therefore, potentially worsen the situation.

One young person told us of a barrier they had faced in their mental health recovery; "there is a massive gap where no help was offered - going home after a hospital admission there was no support to integrate with family – so my family was not equipped". This can cause huge issues for young people in this situation. Transitioning

from hospital to home can be extremely challenging for all involved. And if the young person begins to severely struggle again and their family is not equipped to support them it can often lead to a re-admission to hospital.

From our engagement with young people and stakeholders, we discovered there is a gap in the training of mental health programmes such as Suicide Prevention, ASIST, and Mental Health First Aid for members of the public. This is crucial because it allows young people to offer peer support which can help reduce stigma and open up conversations. The Youth Commission, although not the initial purpose of the project, is a great example of how peer support can be successful with young people supporting one another. This will also help take pressure off services as people will have adequate training to those around them.

As well as the public being trained, it is a priority for all emergency services and the NHS to have the appropriate knowledge and training on mental health and how they can specifically support young people. These people are often the people who may come into contact with someone struggling with mental health, so they need to be able to understand the appropriate care in any given situation.

Recommendations

1. **All training should be taught by a qualified trainer or be in line with a licensed course or standardised curriculum.**
2. **As times change, training needs to move with it. Anyone delivering mental health support should ensure their procedures and tools are up to date and relevant to young people.**

3. **Basic mental health training should be accessible and encouraged for everyone working with young people. This should include all current training as well as any refreshed or updated training.**
 - i. Training should involve some type of sensitivity or communication training so young people feel like they are being listened to, respected and taken seriously.
 - ii. Within Scottish Mental Health First Aid Training, a section needs to be added to highlight both the positive and negative effects that social media can have on mental health and how young people can be supported through both.
 - iii. There should be mandatory mental health training for all people working in emergency services – this may include but is not limited to fire service, police, paramedics and other first responders. As well as Suicide Prevention (ASIST), Scottish Mental Health First Aid training must be provided to all first responders consistently.
 - iv. Mental health training should be mandatory across the board for all NHS and primary care staff, primarily those who are public facing.
 - v. There should be mandatory mental health training for all people working in education who have direct contact with young people.
 - vi. There should be an increase in the number of Scottish Mental Health First Aid (SMHFA) trainers across Scotland to meet this demand to ensure there is a waiting time of less than four weeks from requesting this training to receiving it.
 - vii. There should be regular training updates available to everyone who needs it. Refresher courses should take place at least once every three years.
 - viii. Mental health modules should be integrated within higher, further and secondary education for courses involving public facing professions. This must be included in higher education courses which will lead to working with young people between 11 and 26; and holding responsibility of the health and wellbeing of young people under their care.
4. **Mental health services need more training in order to be more inclusive to minority groups – this will include but not is limited to ethnic minorities, LGBT+ and disabled people.**
 - i. Mental Health services should link up with specialised services to request training or gain further insight into working with these groups to address gaps in staff knowledge to ensure that young people are receiving appropriate care for their needs.
5. **Young people should have access to mental health first aid training, if they want it.**
 - i. Scottish Mental Health First Aid should be as readily available as first aid training is for young people.
6. **Mental Health First Aid should be a standard requirement for all organisations working with young people in line with the laws on first aid training.**

Making sure people have the right training is one of the most important things, if they are not trained how can they provide the right level of support? We want to ensure that everyone who receives training, especially those who want it, receive relevant, up-to-date and high-quality training.

Having the general public be more aware and trained in supporting young people with their mental health would result in everyone having a better understanding of the issues they face, helping to reduce stigma around the topic.

We feel that it is important for those young people to engage with directly to be trained, young people should receive help when they need it without specialists always having to be consulted. From our engagement with other young people we found that they felt a lack of respect when seeking support which is often as a result of the lack of training around mental health.

We hope that when a young person seeks support, they feel understood, listened too and respected.

We hope that these recommendations will be taken into consideration by all sectors, but specifically Third Sector, Local Authorities, NHS Scotland, Scottish Government, Education Scotland, Colleges Scotland, Universities Scotland



Conclusion

#YCMHS #YSObservatory

By taking forward the ideas and recommendations we have designed, developed and considered, it will help to ensure that young people have the best opportunities to access mental health support in Scotland.



The focus of this project was to engage with young people on the topic of mental health and how young people in Scotland can receive the help and support they need. It was clear from our research and exploration that our recommendations are focused on services, but we have found that there are many things to consider in order to ensure young people in Scotland are supported and have access to good quality mental health support. Engaging with other young people has allowed us to understand mental health services from more than just our own experiences and perspectives, as well as understanding that policies and procedures that are in place are not always meeting the needs of young people or being utilised at all. We hope our recommendations help improve current mental health services in Scotland for now and in the future.

Services and providers need to be treating young people as individuals rather than a statistic. Young people agreed a person-centred approach would help to address this. A shared experience from various young people was that they felt there was 'no choice'. Young people believed they should be able to, within reason, access a service at a time that suits them rather than when it suits the service. As a Youth Commission we recommend that no one should be rejected from support, yet we recognise that every individual and organisation in Scotland need to take responsibility in order to make a change in mental health services.

+ As a Youth Commission we recommend that no one should be rejected from support, yet we recognise that every individual and organisation in Scotland need to take responsibility in order to make a change in mental health services.

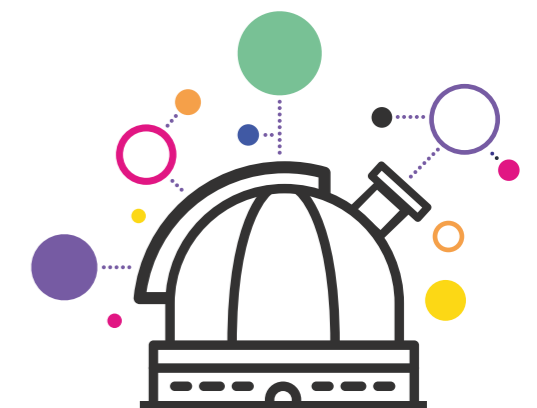
We want to see mental health education embedded within the school curriculum, and that there are suitable types of support available for young people to access throughout education. Collectively, we recognised that higher and further education can be used as a platform for mental health awareness, however, this time period for young people can cause stress and as a result poor mental health. Creating an accepting and supportive environment would allow pupils to speak up when they feel low. However, we have identified a need for relevant educational professionals to be trained in mental health support.

Throughout the project we felt that mental health needs to be taken as seriously as physical health. It is important that more people understand what their mental health means and how this can affect those around them. In turn this would reduce stigma allowing more young people to speak openly about their emotions and access the support they need.

Our recommendations highlight that funding is a key issue for services and organisations. A lack of money impacts on services not being able to operate to the best of their ability, and to meet the needs of young people requiring mental health support. It is clear through our research that funding is as important to young people as it is to stakeholders. We hope to see funding allocated to mental health services fairly. However, more importantly, young people need to know what support they are entitled to within these services.

A change in thinking is required for Scotland to better address mental health. Mental health needs to be taken seriously and we believe our work and these recommendations can help to provide a clear world-leading mental health services for young people.

The work that we have completed as part of the Youth Commission has shown that the voices of young people are vital in improving the situation of current mental health services. We have shown that we can make a difference and that although we may be young people, we are still the experts of our own experiences. It's important that young people's voices continue to be heard and that our opinions are taken into consideration when decisions are being made regarding children and young people's mental health services. There is no knowledge better than those with experiences



Experiences of being on the Commission Q&A



#YCMHS #YSObservatory

Q: How has being involved in the Youth Commission impacted you / What have you gained?

A: Being involved in the Youth Commission has had a huge impact on me. It has provided me with so many amazing opportunities such as: talking to young people about their experiences of the mental health services, attending official meetings with people who are in positions to enforce change, and even meeting royalty! All of which has greatly grown my confidence, especially in giving presentations and talking in front of people. I have also developed great relationships with my fellow Commissioners. And I am very grateful to have had the chance to meet and work with all these wonderful people!

A: Not only has joining the Commission been a fun experience, but also a very educational one too. I have learnt more knowledge coming from personal experiences, than I would have reading it in an article or on the news. It has truly been an inspiring and fulfilling time working with many people, all with the same goal of helping to improve mental health for young people in Scotland.

A: Being in the Youth Commission has been a fantastic opportunity to meet people that are just as passionate about mental health as I am and to work towards something that will hopefully make a difference to people's lives. It has been a great example of the fact that young people are listened to and that our thoughts and ideas will be taken on board. This has been a huge confidence boost in my ability to engage in discussions with others.

Q: Why did you get involved in the Youth Commission?

A: I got involved in the Youth Commission because of my personal experiences of mental illness and accessing services. I had both positive and negative experiences of the mental health services, so I have an idea of what worked for me and what was not so helpful. I am now a youth worker in my local high school and work closely with young people who are struggling with their emotional health and wellbeing. So, I really wanted to elevate their voices and experiences as well when joining the Commission.

A: I have a lot of experience being in mental health services, and this has not all been a great experience. I am a Community Champion and volunteer for See Me; which has increased my view that decreasing the stigma and encouraging people to talk about mental health IS important, it's equally as important to make sure that if someone does open up about a negative experience, there is someone there to listen.

A: When I was younger I had really poor experiences with mental health services and I didn't get any better with the help of services. I had to work really hard to better myself with the help of an amazing set of parents and friends. I want young people to be able to find a service which works for them and allows them to cope with their mental illness a lot better than I did for several years.



Q: What has been your favourite part of the Youth Commission?

A: There have been so many amazing highlights and experiences I have had from my time on the Commission. However, I think if I had to choose one it would be getting to know my fellow Commissioners. Everyone has been so open about their unique experiences and we have had some great discussions about mental health. But we have also just become good friends. We were brought together to work on a serious and personal subject, so I could never have predicted how much we would laugh and how much fun we would have together!

A: My favourite part of being on the Youth Commission has been the opportunities to speak to such a wide range of people who are invested in improving mental health. Hearing the work that other people are doing has given me a lot of hope for the future of mental health care in Scotland.

A: My favourite part of the Commission has been working on the report and coming up with solutions to the problems which exist within some services. I have also loved making friends who have made me feel more comfortable talking about mental health.

Q: What do you hope comes from the work of the Youth Commission?

A: I hope that these recommendations and actions will be listened to and acted upon, and that in the near future we see the quality of mental health services for young people in Scotland be as good as it can be. I also hope that the bad stigma surrounding mental health gets addressed and people feel more open to talk freely with no fear of judgement, to ensure all young people in Scotland get the help they require.

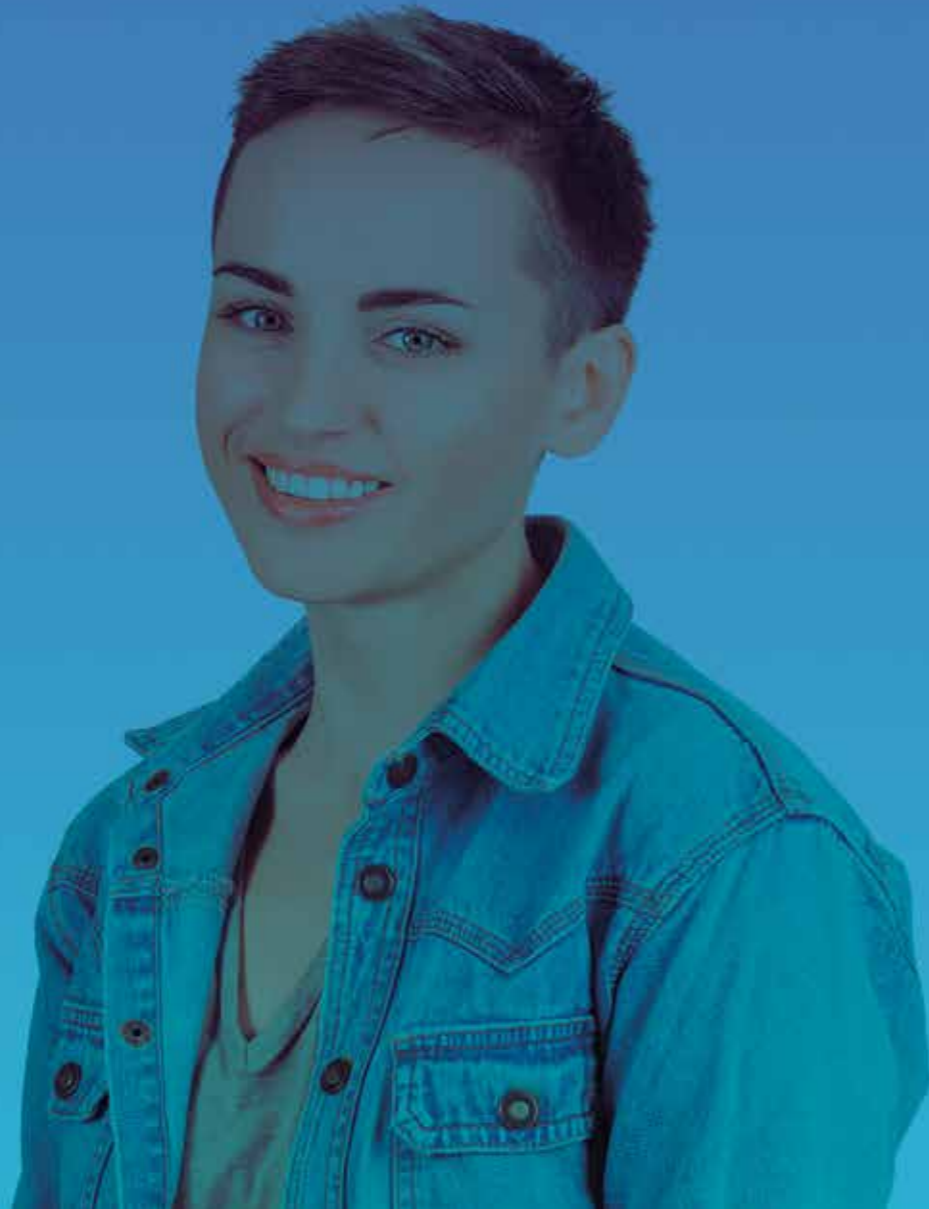
A: I hope that the Scottish government and others will not just listen, but also act on what we have suggested. I am aware that things aren't going to change overnight, but I am hopeful that eventually we will get to a place where there have been improvements made.

A: I hope we can create a system of services which help young people to deal with so many issues which might come up in their lives. I hope the government and the people listen to us young people and accept what we are saying. I'd also like to see changes implemented so that young kids don't feel like they are powerless to their mental health because of services not working for them.



Acknowledgements

The Youth Commission on Mental Health Services would like to thank all the individuals, organisations and participants who provided support and an invaluable contribution to our work.



A special thank you to:

The Youth Commission on Mental Health Services Advisory Panel

Dr Dame Denise Coia

The Children and Young People's Mental Health Taskforce

Those who provided case studies

Young people who took part in workshops, events and activities

Stakeholders, organisations and partners who supported,
inputted and shared their knowledge.

SAMH

Young Scot

Scottish Government



Get in touch

youngscot.net
0131 313 2488
info@young.scot



youngscot



facebook/
youngscot



@youngscot



youngscot snaps

We are happy to consider requests for this document in other languages

Young Scot Enterprise is a Scottish registered charity (SC029757) and is a company limited by guarantee (202687) with its registered office at:

Rosebery House,
9 Haymarket Terrace,
Edinburgh, EH12 5EZ

