Healthwatch Southwark

Young voices on mental health

November 2016

Contents

Background and what we did

What is Healthwatch?

Healthwatch is an independent health and social care champion for local people. This means we represent your views, to ensure services are shaped around your experiences and designed around your needs. We are the 'critical friend' to people who plan, provide and fund care.

We are part of a wider network of local Healthwatch across the country, as well as a national body, Healthwatch England.

Why speak to young people?

We want everyone's voices to count towards improving services. Young people often do not get an opportunity to share their experiences so we wanted to engage specifically with them. We wanted to understand the challenges they face so that we can inform commissioners and providers about how to improve access and the experience of young people using services.

Why talk about mental health?

Mental health care is one of our priorities. We have undertaken a number of engagement activities to hear from adults who access these services. We have also been informed that people experience long waits to access child and adolescent mental health services (CAMHS). We

therefore wanted to understand the experiences of young people when accessing mental health information, education, support, services and advice.

How we reached young people

Workshops

We connected with community and voluntary sector organisations that offer services for young people, and visited groups. This enabled us to reach young people with a variety of backgrounds and ages, and because some of the young people were already familiar with each other they might feel more able to open up.

We ran six workshops where we asked young people to respond to statements by showing cards or moving about in the space. Whilst we noted how many agreed with each statement, our main aim was to provoke discussion and explore themes which were important to the young people in a semi-structured way. We have recorded where views were shared by many young people, or lone voices. It was clear that the makeup and experiences of certain groups created distinct dynamics and we have also tried to reflect this in the report.

Whilst we reached fewer young people through the workshops than via online surveys and a survey at Walworth Academy (see below), we found that the

discussions held in this format yielded much more detailed, qualitative insights.

Online

A parallel survey containing mostly the same questions was put online so that we could promote it via our website, Twitter and e-newsletter. We encouraged partner organisation to distribute the survey through their networks.

Survey

We sent paper copies of the survey to Walworth Academy (a Southwark secondary school), with which we had a relationship. We gave the school one week to distribute the surveys on the last week before summer break.

While findings from the workshops and online survey are grouped together, findings from the Walworth Academy survey are presented **separately in green boxes** because we are aware that a large number of responses from students at a single school might well skew overall findings.

We do not claim that this report fully represents the views and experiences of all Southwark's young people – indeed, no report could.

However, we believe it is important to spend time building a dialogue with young people and hearing their views in depth, rather than simply focusing on large-scale capture of often more simplistic quantitative data.

Every voice counts and even if only a minority of people, or a particular group of people, report a problem in the health and social care system, this should be addressed wherever possible.

The recommendations presented in this report were suggested by young people themselves. They are broad areas and we welcome any opportunities to discuss how they can be translated into concrete actions for different agencies working together, and what resources would be needed to accomplish this.

In total, 114 young people participated in this project:

Workshops (47)   Online survey (7)   Walworth Academy survey (60)

Demographics

Please see Appendix 2 for detailed demographic data.

School

- 77 young people had been or were currently students at 11 Southwark schools and colleges.
- We also spoke to 15 students of 11 other South East London schools.
- 9 were students in 7 North London schools.
- 13 did not state their school.

Borough of residence

- 20/54 of our online and workshop participants and 43/60 Walworth Academy participants were Southwark residents - in total 69% of respondents whose home borough we know.
- 19 participants lived in other South East London boroughs
- 8 lived in in North London.
- 23 did not know or gave no response.

Age

- Ages ranged from 12 to 23 years.
- There were clusters at age 14 (Walworth Academy survey), and age 16 (Healthwatch hosting young volunteers through the HeadStart post-GCSE programme).

Gender

- Ratio of female to male respondents - 53:41.
- 2 participants were gender non-binary or 'other'.

- 18 did not specify their gender.

Gender status

- 4 were transgender and 1 did not know if they were.
- 91 were cisgender (identified with the gender they were given at birth).
- 18 gave no response.

Sexuality

- 85 were straight/ heterosexual.
- 4 were bisexual.
- 1 was asexual.
- 2 gave their sexuality as 'other'
- Only 1 said they were lesbian/gay/homosexual, highlighting a gap for future engagement work.
- 21 people did not state their sexuality.

Ethnicity (self-described)

White British (4), White European/other/unspecified (5), Black British (11), Black African/African British (24), Black Caribbean/Caribbean British (11), Black other (3), Asian, South Asian, Bangladeshi, Bengali, Pakistani or Indian [British] (10), Turkish [British] (3), Mixed (13), Other or insufficient detail (10), not specified (20).

Length of time in UK

- 72 participants said they had lived in the UK all their life.
- 7 had been here over 10 years, 6 between 6 and 10 years, 4 between 2 and 5 years, and 2 less than 18 months.

Demographics

At least 5 were refugees or asylum seekers.

- 23 did not answer this question.

Religion

Christian (45), Muslim (18), Sikh (1), Jewish (1), pagan (1), atheist (2), and no faith (11). 3 had not decided and 23 gave no answer.

Disability

- Only 5 respondents said that they had a disability (including autism and stutter) – this highlights another gap for future engagement work.
- 88 did not have a disability.
- 21 gave no answer.

Looked after

At least 11 respondents were or had been looked after (in care).

Caring for someone

27 people said they 'cared for someone else who had a disability or illness' – it is unclear whether all of these people were carers in the practical sense.

Perceptions and knowledge of mental health

What does the term mental health mean to young people?

We asked young people what the term 'mental health' brought to mind for them. Only one person in the workshops, and two online, offered a positive take on the term - *"strength", "healthy thinking."*

A few people described mental health in a neutral way (e.g. *"state of mind and emotions")* but a majority interpreted the term negatively:

"Mental health is when someone has an illness rooted from how the brain works"

"Instability"

"Being stressed, unwell and needing help"

"Sick"

"People that have difficulty in putting their thoughts together"

One person told us that while they had had education about mental health in school, *"I didn't really listen to her because I don't think that I will be affected by it."* Others in the group disagreed with this view, *"I think everyone is affected by mental health."*

Which is more important – physical health or mental health?

Individuals in four of the workshops, and four online respondents, said that mental and physical health were equally important, with one explaining, *"both can mean you're not looking after yourself."* Some also noted the impact of mental health on physical health. People talked about the seriousness of some mental illness, with one describing family members as *"damaged, never the same again. People really change."*

Two participants from workshops and three people online felt that mental health can be even more important than physical, *"Though it cannot be seen, issues with mental health are sometimes in my opinion even more*

traumatic than physical conditions. I think that it is very important to feel comfortable with your inner self."

Awareness of symptoms of mental illness

We asked two workshops, where people were struggling to describe what mental health meant, to elaborate on what symptoms they associated with poor mental health.

One workshop listed depression, mood swings, being nervous, irritated or angry, and struggling to look after oneself. In one workshop where they had very negative interpretations of the term mental health mentioned suicidal thoughts, *"crazy people in Camberwell shouting on the bus"*, lack of control and awareness, and anger. We prompted participants to think about subtler symptoms, and they listed confusion, 'self-medicating', crying, and isolating oneself away from the world.

In another workshop we discussed how they would know if somebody needed help. This included people being 'closed off' or a change in character, *"If you know someone for a long time, you notice change if they are having problems."* However, one person pointed out that *"it is not always obvious – they can mask their sadness and happiness."*

Getting information

Ease of finding information

> "It's easy for young people to get information and advice about mental health"

What young people told us from workshops and the online survey...

👍 **14 people** agreed with this statement

👎 **24 people** disagreed with this statement

❓ **15 people** weren't sure if they agreed or disagreed

We wanted to find out whether young people are provided with information and education about mental health (which might help them recognise problems, understand others, and know how to seek help).

Some who disagreed that it was easy to get information elaborated on this:
- *"Physical health is much more talked about"*
- *"People aren't open"*
- *"People aren't educated enough. If they have symptoms they might not know what that means"*

Several people agreed that there might be information available but people did not always see it, *"You have to look for it yourself."*

In five of the six workshops, talking about information led naturally into discussions about the internet, with all five groups including people who were sceptical about going online for this purpose (see below).

People in three of the six workshops raised discussion about provision in schools, though two did so in the context of it being absent or inadequate.

A few people mentioned other sources of information, such as a teacher with responsibility for pastoral care or a key worker. One person said that they would use 'Dummies' guides' to conditions from libraries, although several did not want to use books. Several young people in one workshop said (unusually) that they thought information about mental health was well-publicised on social media, in music and on public advertising around Southwark.

The internet

Some said that to find information they would simply *"Go on Google!"*, and that the internet is helpful because they use it every day.

One person said that they liked to use YouTube as it was easy and quick (preferring it to 'books on prescription' which they had been offered by their GP) – though they accepted that *"you*

Getting information

don't know what you're going to get." Another said that they had seen links to useful articles on Snapchat.

However, many did not feel that the internet was a good source of information and one even said, *"Access to the internet can make it difficult to get information."* Reasons given included:
- not everyone having internet access
- some information not being reliable or accurate (not being able to trust everything)
- some information applying to different areas of the country
- not knowing what to search for
- risk of self-diagnosing (wrongly)
- being put off by scary descriptions of one's illness.

Even some who did not generally trust the internet for information on mental health saw the NHS website as a reliable option. ChildLine was also well known because it was advertised on social media and had been publicised in schools.

What students at Walworth Academy told us...

26 people
agreed with this statement

16 people
disagreed with this statement

14 people
weren't sure if they agreed or disagreed

Three people who agreed said that even though it may be easy to get information, it may be hard for young people to ask for help, *"they might panic and not say anything to anyone."*

One student who said it was not easy for young people to get information about mental health commented, *"this [Healthwatch survey] is the first time I've had information about this."*

Getting information

Education and information in schools

> "My school or college provides (or provided) good information and education about mental health"

What young people told us in workshops and the online survey...

👍 **6 people** agreed with this statement

👎 **38 people** disagreed with this statement

❓ **7 people** weren't sure if they agreed or disagreed

While a couple of people were satisfied with information provided via, for example, assemblies, large numbers of young people in all of the workshops said that they had not received any education in school about mental health, even when PSHE and general health and wellbeing education were provided. Some schools try to provide extra support around exam time such as *"holding a meeting about the importance of sleep"*, but this was not seen as enough.

Where schools did provide information, it was often inadequate. People said that teachers were not trained in the subject and were too vague, *"they talked about sleeping and how we were feeling and then moved onto another topic."* One person said that teachers had only mentioned depression and anxiety, whereas *"there's a lot more to it than that."*

Even when schools had provided support at exam time it was not very effective, *"They do try at difficult times but I feel it is tick-boxing...it's really important stuff and should be discussed. Exams make people really stressed...in a maths exam people were crying. Teachers offered advice but they are not professionals. They are trying but it's not perfect."*

Some noted that information needs to be engaging, saying that PSHE makes the topic *"boring and repetitive"* and *"it's hard to engage 15/16 year olds on this topic."*

In a few schools a potentially more effective approach had been taken, with external educators coming in. Two pupils had found it helpful when people with mental health conditions came to speak about their experience. Another person mentioned organisations like Mind and Rethink giving tailor-made courses (and this person had then found support via those groups).

What students at Walworth Academy told us...

19 people
agreed with this statement

27 people
disagreed with this statement

9 people
weren't sure if they agreed or disagreed

Of those who disagreed, 5 students explicitly said that education on this topic was not given by Walworth Academy, *"In my three years here I have not seen anyone receiving this."*

One person explained their answer by saying, *"I don't know who to go to or where to go."*

Where young people go for support

What would young people do if someone needed help?

To find out about awareness of the seriousness of mental health problems and of sources of support, we asked the young people what they would do if someone told them that they might have a problem with their mental health, or if they noticed that someone was showing worrying symptoms.

Five people in workshops and seven online said that they would ask for or suggest getting the support of an adult, sometimes after talking to their friend to find out more, *"I would encourage someone to go somewhere; if I was really worried I'd try to help more – seek professional advice like from a psychologist or the internet to help them make a choice."*

One of these respondents specified that if the person was in school, they would tell a school mentor or the head of sixth form – *"someone in authority"*. Four specified that if the problem was serious they would advise seeing the GP or other mental health professional. Another said they would tell their friend's parents.

Two participants also emphasised the importance of being sensitive when talking to a friend about their problems, *"Try not to be judgemental - it might stop them telling you the truth."*

Two people said that they would not know what to do for a person with a possible mental health issue:
- *"I would try and talk to them but not sure what sure of what to do next or where to go."*
- *"I'm not sure where I would go, if we were to seek something out like that people might think we were weak or crazy."*

Finally, two people said they would not do anything – *"everyone has their own problems"* – though one would intervene by taking the person to hospital if they were cutting themselves.

What would young people do if they were concerned about their own mental health?

We also asked young people what they would do if they were worried about their own mental health.

Seven people in workshops and seven online said that they would talk to someone if they had a mental health problem, with suggestions including *"the person I am closest with"*, parents, the school counsellor, friends, a doctor, social worker, and Mind.

One explained, *"sometimes while you're talking you realise the solution and the logic behind it and it makes more sense; you get epiphanies; speaking helps you be rational."*

Where young people go for support

One online respondent said they would *'Go on Google'*.

However, five people said they would not talk to anyone:
- *"'I wouldn't go to a doctor; I wouldn't take it seriously."*
- *"In the situation I am not actually sure you would speak to someone even though you say now you would, but would you actually? You'd worry what people thought - if you were weak - or they might judge."*
- A person with experience of depression said they would not do much – *"I'd just withdraw and accept that I will be like that for a while, and then I will get better naturally."*

Talking to friends

> "I would feel able to talk to my friends about my emotional wellbeing or mental health if I needed support"

What young people told us in the workshops and the online survey...

27 people agreed with this statement

9 people disagreed with this statement

9 people weren't sure if they agreed or disagreed

To find out about levels of openness and whether young people feel they have somewhere to turn, we asked first about whether people can talk to their friends about their mental wellbeing.

Naturally, many people stressed that who they would talk to depended on their individual relationship. Some were confident that close friends would *'offer me support and advice'*. Some noted that sometimes it is difficult to know who to trust, which makes it harder to talk to anyone.

Two people also said that while they would talk to friends about minor issues, if something was *"really bad"* they might not, *"I'd just go and get help."*

Some people shared why they would be unable to talk to their friends:
- not having a time or place to talk about private issues while at school
- wanting to talk only about positive topics when with friends, feeling that *"everyone has their own problems"*
- fearing that something serious might get *"brushed off as no big deal"*
- fear of being judged
- thinking the other person might feel awkward *"because they don't know what to say, so they stop talking to you."*
- not having many friends due to being a recent immigrant.

In one workshop made up almost entirely of young men, there was an interesting discussion about gender. Most present felt that young women are much more likely to open up to their friends, *"Guys don't lie on the bed together chatting like girls do with their best friends"*. Many males in the group were initially surprised to hear that the suicide rate for men is higher than for women, but then exclaimed, *"That figures, because men don't talk."*

Support from those close to a young person

What students at Walworth Academy told us...

32 people agreed with this statement

12 people disagreed with this statement

7 people weren't sure if they agreed or disagreed

Some mentioned they do not like to talk to people about anything personal or that they didn't have any friends to talk to.

Talking to parents

> "I would be able to talk to my parents about my emotional wellbeing or mental health if I needed support"

What young people told us in workshops and the online survey...

20 people agreed with this statement

17 people disagreed with this statement

15 people weren't sure if they agreed or disagreed

Several of the young people we spoke to felt close to at least one of their parents, and were confident that they would support them with mental health issues, for example saying, *"My family have been there from the beginning and can offer 24/7 support."*

However, many people felt that their parents would not understand issues around mental health, with several saying this had a cultural component, though it manifested in different ways:

- *"My family would joke about, they laugh it off, they think it will help but it doesn't help - it's a Jamaican thing. So I'd be too embarrassed – no wonder men commit suicide!"*
- *"African parents overreact – they want to take me to the hospital if I get angry!"*

One person said that family members would focus on practical issues, and

another added that this was sometimes unhelpful, *"If you go to them saying, 'Mum, I feel really down, I have no job', well she'd just say, 'Get a job then!'"*

People in one workshop noted that even if parents were understanding, they might not know how to help, *"It's hard for parents. They don't always know what to do – parents need training in how to talk about these things with us. And professional services could put themselves out there more."*

Finding support can be particularly difficult for some young people who are already under pressure. Two participants whose parents themselves had health problems (at least one of whom was a young carer) said poignantly that they did not want to burden their family, *"I could talk to them but… I wouldn't want to put them through it, because I know it can be hard to know about someone else's mental health troubles"*; *"I wouldn't want to bother them because they have their own problems."*

Several people added that they were likely to talk to their siblings or cousins about emotional concerns, *"I've spoken to my brother - he said he felt the same sometimes, which helped."*

Finally, some people simply said they would prefer to talk to a professional than to their parents. Two said this was because professionals *"can actually help"* and would not judge; another, *"I*

find it hard to open up to other people. I can tell my therapist everything because she is neutral."

One person commented that some people find it scary to talk to anybody at all.

What students at Walworth Academy told us...

35 people agreed with this statement

12 people disagreed with this statement

5 people weren't sure if they agreed or disagreed

Of those that agreed they'd be able to talk to their parents, some students acknowledged that they might not be able to talk about really personal feelings, *"I think I would be able to talk to my mum but not about everything."*

Of those that disagreed, one student said that they liked to keep things private

Support from professionals

Support in schools for those facing problems

The workshop participants were mainly critical regarding support provided by schools to pupils actually experiencing mental wellbeing difficulties. When asked who they would go to for support, one person stated emphatically, *"Definitely not schools or any teachers!"*

Noone had any particularly positive comments about school nurses:
- *"They will tell you to come at lunchtime, but that's lunchtime! I think we need a full time school nurse."*
- *"I didn't know I had a school nurse until I was in year 9."*

A few of the young people mentioned that being given a lot of leaflets was not helpful, *"I had to talk to someone about my behaviour, they gave me some leaflets; they gave me so much but I didn't get through them."*

Some young people were aware of mentors or counsellors in their school. One said, *"I have a mentor but it's hard to get a counsellor."* One thought there was a counsellor, but had never seen them. Another had been told they would have a chance to talk to someone, but seemed to fall off the radar. One young person said that the school had arranged for someone to take them to activities to address their poor

attendance, *"but they don't talk to you."* However, another participant had drama therapy for anger issues which they found helpful.

Three further issues were raised as obstacles to young people getting support through their schools.

One was the fact, raised in a couple of workshops, that getting support was often predicated on the young person having academic problems or behaving badly, *"If you misbehave, that is when they will come to you to talk about how you are."* There was a strong perception in one workshop (made up entirely of black and mixed black/Asian girls) that racial stereotypes affected how this played out. They felt that if a white pupil was 'acting out' they would get help faster, whereas black pupils had to show more extreme behaviour before being offered support. There was a feeling of distrust towards school authorities among many of this group which made them unlikely to seek support through school.

Another worrying issue was the fact that many young people were keenly aware that there would be serious consequences from discussing certain issues, even in a mental health context, due to safeguarding rules. Discussing a difficult home life might result in interventions, *"I had a teacher that would say to come and speak to her but we heard about people getting taken away so no one would go to her*

after that." In one workshop several described extreme discipline from their parents which many would consider child abuse, but said that it was part of their culture. They were aware that this would concern professionals, and thus felt it would be hard for some young people to engage with support.

Finally, one person said that they felt they lost control when seeking support through school, *"School just refer you. They tell you to go to them but they just pass on your details without telling you and you don't know what's going on"*, with different agencies then turning up to be involved.

Support from GPs

"I would be able to talk to my GP about my emotional wellbeing or mental health if I needed support"

What young people told us in workshops and the online surveys...

11 people
agreed with this statement

38 people
disagreed with this statement

4 people
weren't sure if they agreed or disagreed

We wanted to find out how young people felt about GPs as a potential first port of call for medical help around mental health.

Whilst most of the young people in all workshops said they were unlikely to feel able to talk to their GP about mental health, a couple were more confident about this. Another said that they had gone but with support from a youth worker to explain their problem. Several online respondents were confident that the GP could help, saying *"They're professional"*, *"They have the knowledge"*, *"They know the stuff"*.

Individuals in three different workshops were surprised to hear that they could approach their GP about mental health issues at all, *"I really didn't know GPs were anything to do with mental health. They need to promote this."*

Individuals in two groups said it was hard to get GP appointments. Another two people mentioned lack of continuity as they see a different GP each time; two did not know who their GP was.

For several people, their personal relationship with their GP was not good enough to allow them to open up, *"There's a lack of relationship – all my doctor says when I get in the room is, 'What's the problem?' in a grumpy voice and then writes a prescription. They're not interested in you as a person and it doesn't make you want to talk about your problems – how are*

you supposed to get the help you need like this?"

One person felt they might be judged by the GP, *"they'd look at me differently and treat me differently"*. Trust issues were connected to fears about confidentiality, particularly for one person whose mother was friends with their GP - *"I don't have faith that they would keep to patient confidentiality."* On a related note, one person did not want mental health issues to be on their notes as they felt it might damage their future career in the health sector.

One young person felt that because their depression was not as serious as their parent's mental illness, they did not need to see a GP. They were also afraid of being *"stuck with"* a diagnosis.

Do young people have confidence that GPs can help in the right way?

Some expressed scepticism that GPs would be expert enough to help with mental health, *"GPs don't know what they are talking about."* One online respondent feared that a GP might give the wrong diagnosis. A young person with mental illness in their family said, *"I've lost trust in GPs because of seeing people suffer around me."*

However, one young person had had a good experience with their GP, despite having heard off-putting stories – *"When*

I went to my GP about my gender, I told her I feel ashamed and anxious and she referred me to CAMHS… [The letter] came in a week and I had the appointment in the following week."

There were contrasting ideas about what a GP would do for a mental health problem. Some young people in two workshops said that GPs would only give drugs, which they did not like, *"they just give pills, they don't want to talk. Pills have side effects and don't work."* An online respondent felt that *"they can offer advice and help, but could give me medication that could enhance the mental issues or make me rely on it."* Some had an extreme impression, saying that the GP would *"try to give me drugs, injections, or lock me up in the Maudsley!"*

In contrast, a couple of young people in one workshop were not sure they would be able to access mental health medication, *"medicine is less accessible for mental health than it is for physical health - you can't get antidepressants in this country."* Others contradicted this, but all in the workshop agreed that they would rather talk to somebody than be given medicines, and were not sure the GP would offer this. Some people felt the GP might not do anything, or *"would just refer you on so what's the point."* One person told, us, *"the GP referred me to someone and that messed me up even more."*

Support from professionals

What students at Walworth Academy told us...

24 people
agreed with this statement

20 people
disagreed with this statement

9 people
weren't sure if they agreed or disagreed

Students indicated that it depended on whether they felt comfortable or trusted their GP, *"I don't feel close to them so I wouldn't talk about it."*

Some students felt that they could get help from their GP about anything, but others disagreed, *"not everything you can explain to your GP."*

Embarrassment and stigma

> "If people knew I had asked for support around my emotional wellbeing or mental health, I would feel embarrassed"

What young people told us in workshops and the online surveys...

👍 **8 people** agreed with this statement

👎 **24 people** disagreed with this statement

❓ **5 people** weren't sure if they agreed or disagreed

Interestingly, several people said that they would not feel embarrassed about seeking support with their mental health – it was simply that this was not the type of conversation they had had. Many said that people knowing would feel like an invasion of privacy, *"It's a personal emotion; I don't need everyone to be in my business."*

A few were however put off by stigma surrounding mental ill-health, *"In my mind I know I shouldn't be [embarrassed], but the way it's seen in society, I would."* Some said that if people judged them, they were not real friends – but equally that being judged by a supposed friend would hurt more. Discussions about societal attitudes ensued: *"Society thinks that people with mental health [problems] are crazy people. They won't trust you."* One person also referred to stigma as a barrier to seeking information.

People in two workshops said that television played *"a big part of building stereotypes."* This could also deter people from seeking help, because of extreme depictions of treatment or of illness, *"My friend wants to go to GP to talk about mental health. Our school showed a documentary about obsessions. Now my friend doesn't want to go because she says she is not that crazy!"*

Cultural perceptions also contributed to stigma, *"My home country is very different to the UK. [Mental health] is a taboo. There is some prejudice that only crazy people go to therapy… People I know from immigrant backgrounds - there is stigma. I was raised on the idea that that talking about this is very weak, and if these stereotypes were broken down, people might use services more."*

At one workshop, when discussing the definition of mental health, said that in some cultures mental illness was still seen as being possessed, *"Yes, my mum would say 'you've a devil inside' –*

and… it's the same idea among some older traditional people."

What students at Walworth Academy told us...

23 people
agreed with this statement

15 people
disagreed with this statement

14 people
weren't sure if they agreed or disagreed

Students who agreed said *"it is personal"* and *"I wouldn't want the wrong people to know"*. One who was unsure was concerned *"Because mental health is a worrying thing."*

However, another explained *"There's nothing to be embarrassed about as it's natural in life in my opinion."*

Recommendations

We asked young people what advice they would give to those who plan and run mental health services when they look at improving information and support for young people, and reducing embarrassment about seeking help.

Teach young people about mental health.

There was a large consensus that young people simply need to be taught more about mental health. Suggested methods included workshops, assemblies, discussions, performances and day sessions, and several people suggested having medical professionals or external organisations come in, partly so that young people are more aware of sources of support. Posters in school describing mental illness symptoms were suggested. People wanted to see a range of information formats, from films to leaflets. Social media could also be used, for example through creation of a hashtag or app.

"Get mental health organisations into schools to provide information to young people and promote the services available to young people. This will help to normalise talking about mental health."

Individuals also said that education on related issues like relationships and cyber-bullying would support good mental health.

Based on our discussions, we would recommend that information include:
- positive definitions of 'mental health' as well as discussion of illness
- awareness-raising about less extreme treatment-worthy mental health problems
- types of treatment on offer
- a range of illnesses and symptoms
- signposting to reliable websites organisations and support that are applicable locally.

Be creative and engaging.

Young people want to be educated about mental health, particularly in school, in a way which is sensitive, stimulating and appropriate.

"They should try to adapt the way they give out information to the young people and shouldn't try to scare them with the information given."

"Give preventative advice – for example some people don't realise that smoking cannabis can really affect their mental health. Teach skills and share personal experiences."

Recommendations

> *"Make it more project and group based, to talk in focus groups rather than big groups, [so as not] to intimidate individual feelings."*

Teach teachers about mental health.

Young people felt strongly that schools need to be better at talking about mental health. They felt that teachers aren't equipped to do this, and need training to support young peoples' wellbeing.

> *"Teachers can't help because they don't know how."*

We would also suggest education and awareness-raising for parents to help them support their children and dispel myths.

Reduce stigma; normalise talking about mental health.

Young people felt that the NHS, campaigners, media and schools should help raise awareness and reduce the stigma surrounding mental illness. This was felt to be a barrier for people seeking help. They felt this was a societal, cultural issue that needs to be challenged. Professionals also need to

emphasise to individuals that seeking help is nothing to be embarrassed by.

> *"Mental health being discussed with reassurance & taught at an early stage in life - year 5 & 6. So kids grow up knowing about mental health and they have more of an understanding about it."*

> *"Change or normalise the terms. Talk about emotional wellbeing instead of mental health, to make it less frightening."*

> *"They should teach that people with illness and disabilities can't control them and we shouldn't judge. They are just like us and they should be treated as equals."*

Can GPs help with mental health?

Young people suggested that the NHS needs to promote the fact that young people can see GPs about mental health, as not all were aware of this. Although some didn't feel confident that GPs would offer non-judgemental advice and support. Two people suggested that GPs should *"check up on mental health"* or *"do regular check/catch ups"* to offer support.

Recommendations

Promote mental health support services.

Young people felt services need to raise awareness about what they can offer around mental health support and information, and about the fact that they can be effective.

> *"Publicise case studies of how counselling/online services have helped people – to show that you aren't alone and it's normal."*

Support young people at school.

Several people gave different suggestions about how schools could be well-positioned to offer support for those who are struggling, particularly at stressful times:

> *"Have a health hub at school where pupils can drop in with all sorts of issues, and make it clear that this includes mental health."*

> *"Very ambitious people take getting good grades seriously and are stressed. During exam times there should be counselling."*

Given that some were unaware of their school nurse or unable to see them in the hours offered, this service should also be publicised and made as flexible and accessible as possible.

Improve access to talking therapies.

Young people said that more talking therapies/psychology should be offered, and feared going to a GP would just lead to being prescribed medication. Some also suggested other forms of non-drug treatment:

> *"Use different ways for them to overcome it like going on trips."*

> *"We want to stop being prescribed drugs – they just make things worse, and the long list of side effects is really scary. We want more talking therapies."*

Encourage peer and mentor support.

Many young people suggested that a peer support system would help them to deal with emotional and mental health issues. Several also wanted semi-formal mentoring systems to provide regular one-to-one support and develop a nurturing relationship. Someone close to the young person's own age might be a good mentor. On a connected note, a few people wanted younger mental health advocates, particularly those with experience of illness, to educate them.

Recommendations

"Make young people who have overcome/been through the same thing give advice/counsel others."

Give clear information about confidentiality, and offer anonymous support.

Confidentiality was seen as very important and mentioned by several people. Health professionals and teachers should be clear with the young person about what referrals are being made, keep them informed of what to expect, and ask their permission.

"Build trust. People are more likely to open up to you."

A few young people suggested that anonymous services are needed in order for some people to seek information and support, particularly if there are issues which give them concerns about confidentiality.

Listen to young people.

It is important for young people that they felt understood and people were empathetic about their situation. GPs need to be understanding, impartial and non-judgemental. Listening to and empowering young person is crucial.

"Focus on the needs of young people as they say it is, rather than the assumptions/perceptions of the people working on behalf of them."

"Ensure you understand the young person's predicament – try to put yourself in their shoes."

Make services friendly for young people.

Young people felt strongly that health professionals need to know how to talk to young people, and see them in a non-threatening environment. It's important that young people feel comfortable and trust the services they seek help from.

"You need a comfortable environment. Don't make it look like therapy."

"Don't have a pad and pen making notes, it feels clinical."

"Make the services young-people-friendly and build rapport"

Appendix 1: Survey questions

These are the questions used for the online survey. Very similar questions were used for workshops, though these took a more semi-structured approach.

1. How would you describe 'mental health'?

2. If someone told you they might have a problem with their mental health, or they were showing symptoms you were worried about, what would you do?

3. It's easy for young people to get information and advice about mental health: *Strongly Agree, Agree a bit, Disagree a bit, Strongly disagree, Don't know*

4. My school or college provides (or provided) good information and education about mental health: *Strongly Agree, Agree a bit, Disagree a bit, Strongly disagree, Don't know*

5. I would feel able to talk to my friends about my emotional wellbeing or mental health if I needed support: *Strongly Agree, Agree a bit, Disagree a bit, Strongly disagree, Don't know*

6. I would be able to talk to my parents about my emotional wellbeing or mental health if I needed support: *Strongly Agree, Agree a bit, Disagree a bit, Strongly disagree, Don't know*

7. I would be able to talk to my GP about my emotional wellbeing or mental health if I needed support: *Strongly Agree, Agree a bit, Disagree a bit, Strongly disagree, Don't know*

8. Is there anyone else you would speak to about your mental health?

9. If people knew I had asked for support around my emotional wellbeing or mental health, I would feel embarrassed: *Strongly Agree, Agree a bit, Disagree a bit, Strongly disagree, Don't know*

10. What advice would you give to the people who plan and run mental health services when they look at improving information and support for young people?

Appendix 2: Detailed demography

The table below outlines detailed demographics for the 114 young people that participated in this project; they are separated in columns according to the mode of participation.

Current or last school or college attended:

	Workshops (47)	Online survey (7)	Walworth Academy survey (60)
Southwark schools (77 pupils at 11 schools)			
Walworth Academy (Southwark)	1		60
St Saviour's and St Olave's - for girls, CofE (Southwark)	3		
The Charter School (Southwark)	3		
St Thomas the Apostle College - for boys, RC (Southwark)	1		
St Michael's Catholic College (Southwark)	1		
Notre Dame RC Secondary Girls' School (Southwark)	1		
Sacred Heart School - RC (Southwark)	1		
Harris Girls' Academy East Dulwich (Southwark)	1		
Harris Girls' Academy Bermondsey (Southwark)	1		
Bacon's College (Southwark)	3		
Ark Globe Academy (Southwark)		1	
Other South East London schools (15 pupils at 11 schools)			
Sydenham School - for girls (Lewisham)	2	1	
Forest Hill School - for boys (Lewisham)	2		
Platanos College (Lambeth)		1	
La Retraite RC Girls School (Lambeth)	2		
Lambeth Academy	1		
The Elmgreen School (Lambeth)	1		
Ravensbourne School (Bromley)	1		
The John Roan School (Greenwich)	1		
St Ursula's Convent School (Catholic Girls) (Greenwich)	1		
Crown Woods (Greenwich)	1		
Norbury Manor Business and Enterprise College for Girls (Croydon)	1		
Schools in North London (7 schools)	**8**	**1**	
No answer	**10**	**3**	

Appendix 2: Detailed demography

Borough of residence:

	Workshops (47)	Online survey (7)	Walworth Academy survey (60)	Total (114)
Southwark	18	2	43	63
Lambeth	7	2	2	11
Lewisham	3	1		4
Greenwich	2			2
Bromley	1			1
Croydon	1			1
Hackney	4			4
Islington	1			1
Waltham Forest	1			1
Newham	1			1
Tower Hamlets		1		1
Don't know			2	2
No answer	8		13	21

Age:

	Workshops (47)	Online survey (7)	Walworth Academy survey (60)	Total (114)
12 years	1			1
13 years	3		3	6
14 years	2		42	44
15 years	5	2	2	9
16 years	17	3		20
17 years	3			3
18 years	1			1
19 years	1			1
20 years	1			1
21 years	2	1		3
22 years	2			2
23 years	1	1		2
No answer	8		13	21

Appendix 2: Detailed demography

Gender:

	Workshops (47)	Online survey (7)	Walworth Academy survey (60)	Total (114)
Female	27	6	20	53
Male	10	1	30	41
Non-binary	1			1
Other	1			1
No answer	8		10	18

Gender status:

	Workshops (47)	Online survey (7)	Walworth Academy survey (60)	Total (114)
Cisgender	37	7	47	91
Transgender	2		2	4
Don't know			1	1
No answer	8		10	18

Sexuality:

	Workshops (47)	Online survey (7)	Walworth Academy survey (60)	Total (114)
Straight/heterosexual	33	7	45	85
Lesbian/gay/homosexual			1	1
Bisexual	3		1	4
Asexual	1			1
Other	1		1	2
No answer	9		12	21

Length of time in UK:

	Workshops (47)	Online survey (7)	Walworth Academy survey (60)	Total (114)
Whole life	32	3	37	72
Less than 18 months			2	2
2-5 years			4	4
6-10 years	1	1	4	6
More than 10 years	3	3	1	7
No answer or unclear	11		12	23

Appendix 2: Detailed demography

Ethnicity:

	Workshops (47)	Online survey (7)	Walworth Academy survey (60)	Total (114)
British unspecified	1		2	3
White British	1		3	4
White European	1		1	2
White unspecified			2	2
White other			1	1
Black [British]	3	1	7	11
Black African [British]	8	2	14	24
Black Caribbean [British]	9	1	1	11
Black other	1		2	3
Asian, South Asian, Bangladeshi, Bengali, Pakistani or Indian [British]	4	2	4	10
Turkish [British]	1		2	3
Mixed White/Black	4		1	5
Mixed Black/Asian	1			1
Mixed - White British/Irish	1			1
Mixed unspecified	1		2	3
Mixed other	2		1	3
Other or insufficient detail		1	6	7
No answer	9		11	20

Refugee status:

	Workshops (47)	Online survey (7)	Walworth Academy survey (60)	Total (114)
Not a refugee/asylum seeker	35	6	36	77
Refugee or asylum seeker		1	4	5
No answer	12		20	32

Appendix 2: Detailed demography

Religion:

	Workshops (47)	Online survey (7)	Walworth Academy survey (60)	Total (114)
Christian	22	4	19	45
Muslim	4	2	12	18
Sikh	1			1
Pagan	1			1
Jewish			1	1
Atheist	2			2
None	4	1	6	11
Christian/Muslim (haven't decided)			2	2
Don't know	1			1
No answer	12		11	23

Disability:

	Workshops (47)	Online survey (7)	Walworth Academy survey (60)	Total (114)
Not disabled	34	7	47	88
Disabled	3		2	5
No answer	10		11	21

Being looked after:

	Workshops (47)	Online survey (7)	Walworth Academy survey (60)	Total (114)
Have not been looked after (in care)	31	6	42	79
Are of have been looked after (in care)	4		7	11
No answer	12	1	11	24

'Do you care for somebody else who has an illness or disability?'

	Workshops (47)	Online survey (7)	Walworth Academy survey (60)	Total (114)
No	25	7	28	60
Yes	11		16	27
No answer	11		16	27