# Thriving

## Improving young people's mental health services
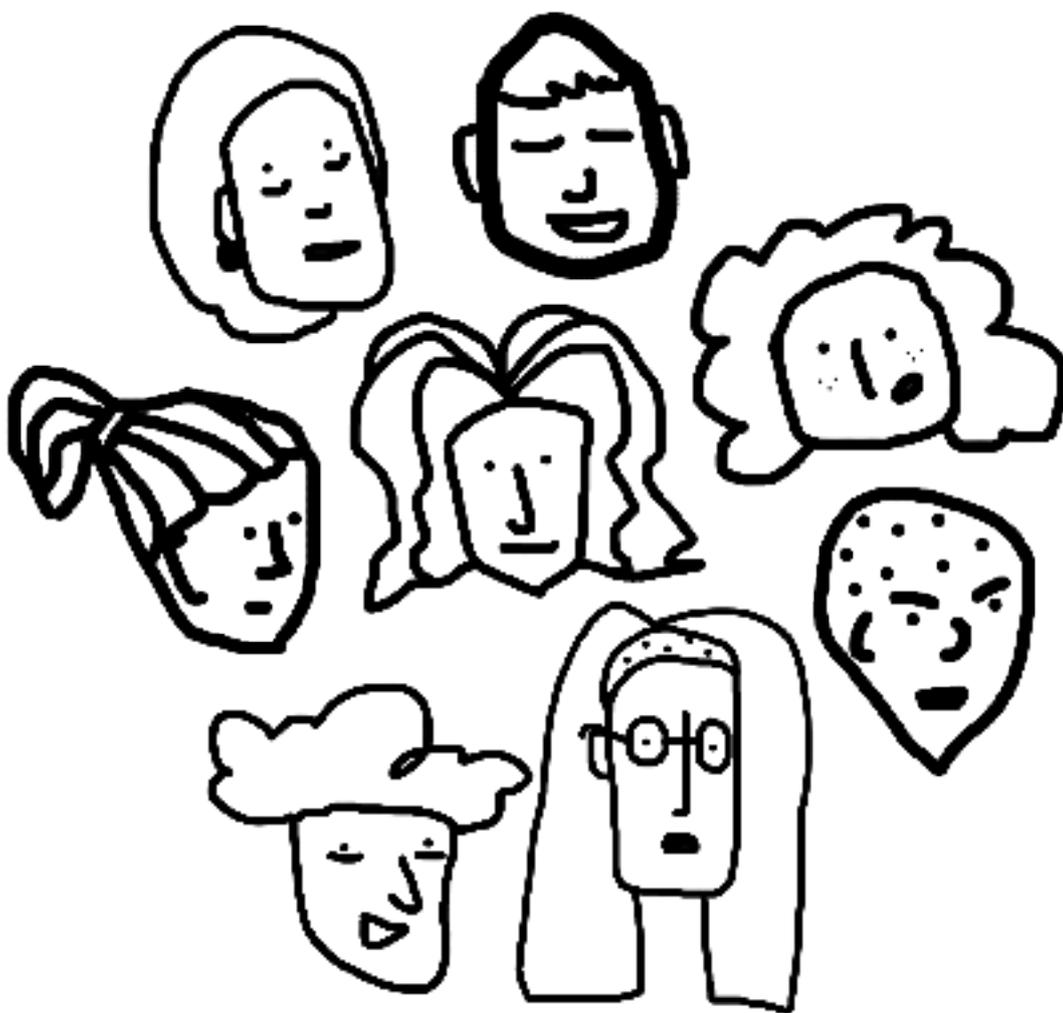
**healthwatch**
Cambridgeshire

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# Healthwatch Cambridgeshire

Our role is to make sure local people have a say when important decisions are made about their health and social care services.

We find out about people's experiences of care and share them with the organisations who make the decisions, to help them improve care where it is needed. If care is not working in the way it should, then we have statutory powers to challenge health and care decision makers.

We are independent and local. Our Healthwatch is part of a national network through Healthwatch England, and we have direct links with regulatory bodies such as the Care Quality Commission and Monitor.

# Contents

# Intro

Cambridgeshire & Peterborough Clinical Commissioning Group commissioned Healthwatch Cambridgeshire and Healthwatch Peterborough to talk to young people about emotional wellbeing. This will help inform the redesign of children and young people's mental health services, based on the iThrive model.

The discussions were designed to encourage young people to:
- talk about their opinions and experiences of mental health and the services available;
- look at the information and resources available; and
- think about how young people use and understand language.

We want to thank all of the children and young people who took part, as well as the organisations that helped us. We believe a greater understanding of the experiences and opinions of young people are essential to any service improvement programme.

# How we did it

This project took place during January, February and March 2016. We contacted four youth groups around Cambridgeshire: Active from Addenbrookes, Ely Sixth Form College social care class, and Carers Trust groups in Huntingdon and St. Ives.

We ran focus groups sessions with the young people to help us understand their opinions and experiences of mental health. We asked 35 young people to tell us about their experiences with mental health services, and how they regard the wording around the subject. We did this with the help of flip-charts and diagrams, recorded discussions and ideas that young people told us about.

We talked about:

- **Wording** - Words like mental health, thriving, emotional wellbeing, anxiety, and what they mean.
- **Mental health leaflets** - What do young people think of the designs of leaflets about mental health? How can then be more accessible and appropriate for them?
- **Accessing information** - How do young people find information about mental health services? How do they prefer to get this information?
- **Case studies** - What would young people do if a friend kept crying? What would they do if the friend was self-harming?
- **Getting help** - Their own experience with mental health problems and any experiences accessing Children and Adolescent Mental Health Services (CAMH).

We divided each session into two main points: **understanding the language** around mental health services and **getting help**. The findings from these sessions are reported here, to help commissioners and service providers with the service redesign.

| Groups | Numbers |
| --- | --- |
| Active, Addenbrookes | 5 |
| Ely Sixth Form College | 12 |
| Carers Trust, Huntingdon | 5 |
| Carers Trust, St.Ives | 13 |

## Young people's ages

- 8 (3%)
- 9 (3%)
- 10 (11%)
- 11 (14%)
- 12 (3%)
- 13 (3%)
- 15 (3%)
- 16 (20%)
- 17 (14%)
- 18 (11%)
- 19 (3%)
- 20 (3%)
- ? (9%)
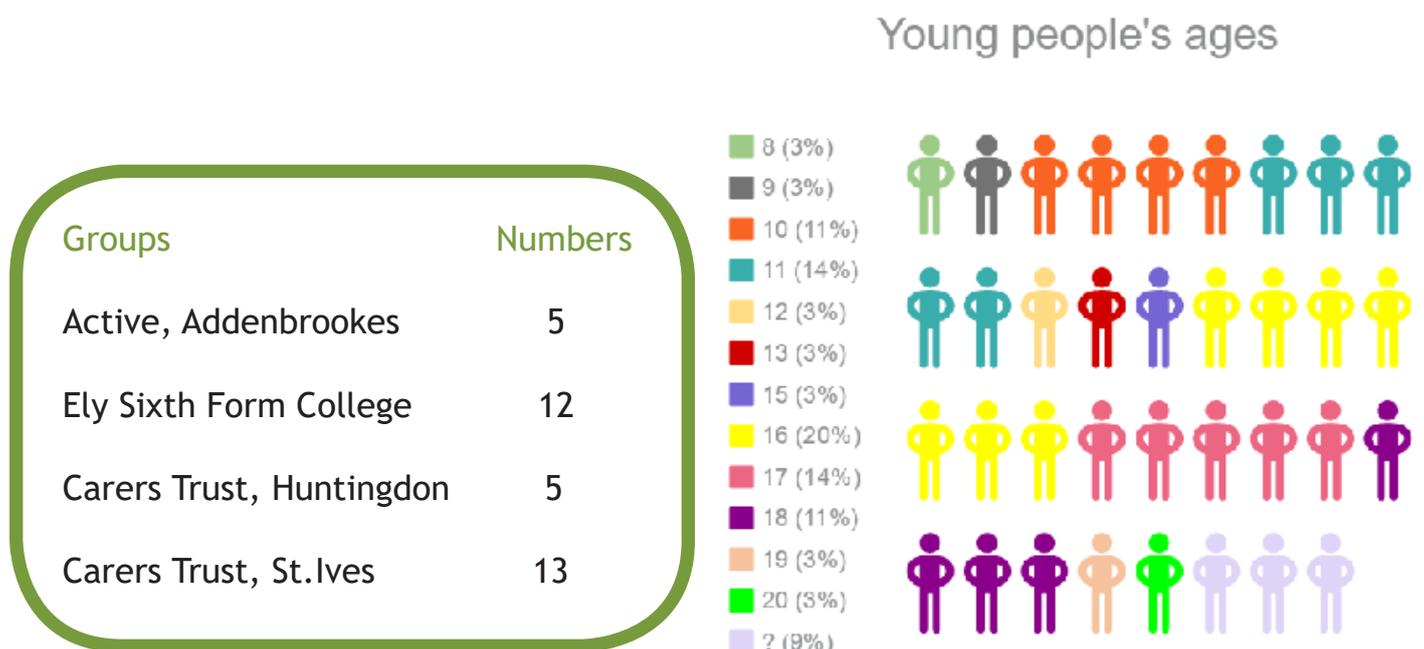
# 1. Understanding the Language

## 1.1 Wording

During the focus groups sessions, we asked young people from each group to think about words often linked to mental health. We wanted to know what they thought and understood when they heard those words. This is what they said:

**Mental Health** - Overall there were negative emotions and ideas linked with the words. Some of the words young people mentioned were:

- Stress
- Anxiety
- Psychosis
- Frightening things
- Mental asylum
- How healthy your brain is
- Sadness
- Worries
- Problem with your mind
- To keep safe
- Suffering
- Staying in control
- Problems with emotions
- OCD
- Mental wellbeing
- Interactions
- Thoughts perceptions
- Emotions
- Depression
- Mental illness
- Different thoughts
- Self-harm
- Misunderstood
- Not always good/not always bad

**Thriving** - A large number of young people didn't fully understand, or had ever heard of the word. Some words mentioned associated with thrive/thriving were:

- Doing something fast
- Eager for something
- Doing well in your environment
- Pushing to achieve something
- In the best place you can be
- Happy
- Doing really well
- Flourishing, community doing well

**Emotional wellbeing** – Young people had more positive comments and ideas about these words, and normally related them to positive things. They mentioned words like:

- Communication of feelings
- Feelings
- Moods
- Everyday feelings
- Not a mental illness
- Fitness in general
- Affects everyone but mental health doesn't affect everyone
- How we handle situations
- Functioning daily
- How we cope with emotions

Anxiety – Young people had heard about this word before, but a large number could not necessarily define it. Some of the comments we received were:

- Not very stable
- Panic attacks
- Slyness
- Making something bigger than it is
- Irrational dramatizing
- Fear of something
- Over-thinking situations
- Certain apprehensions of the unknown

- Over thinking
- Stressed about something
- Not wanting to do something
- Negative thinking
- Worried
- Fear of new situations
- Not being in control
- Physical effects

## 1.2 Opinions about leaflets

We gave young people a number of different leaflets specific to mental health services, and asked them:

- What they liked about them?
- What they didn't liked about them?
- What they would do differently, to make them easier and more attractive to young people?

We received opinions and comments that can be used for future reference when creating mental health materials for young people. Some of the themes were:

### Language
Young people said that leaflets should contain simple language, written in a way they find it easy to follow. Too much information can become difficult to understand, and doesn't grab their attention. Leaflets should contain fewer words, be straight to the point and be age appropriate to the age range they are written for.

Some of the comments young people made related to wording of the leaflets:

- *'Boring, it is a dull far fetched leaflet. It gives the impression that only professionals will understand.'*
- *'Give more examples of "common mental health problems" so that you can be sure this service is for you. Maybe give examples of people who have been helped by the service and that they have/are on to achieve (before/after)'*

### Design
Young people said leaflets needed to be more colourful and 'eye catching'. They said that having more pictures and colour would help. Big headings would also help in making it more interesting and easy to understand. Some of the comments young people made:

- *'Add a couple more pictures to make it look more interesting'*
- *'Organised in good sections. Clear, bold information, not overloaded'*
- *'The pictures at the front seem quite 'adultish' – no young people, only adults'*

# 2. Getting help

## 2.1 Getting Information

We wanted to know how young people ask for help, and the ways they use resources and information. We asked, 'how do young people access information?' We talked about where to find information about mental health services. We talked about the best ways for them to find information.

Several times, young people mentioned social media and internet as their preferred way to find information. There were also discussions on how family, friends, and trusted adults, (like teachers, school nurses, and doctors) have an important role to play. Having someone they trusted give advice on where to go, helped them get help more easily.

These were the mentioned preferences:

- Internet
- Google
- Social media,(Snapchat, Instagram, Facebook,Twitter, WhatsApp)
- Teachers
- School nurses
- Doctors
- GPs
- Friends
- Family
- Magazines
- TV
- Posters
- Radio in the car
- Phoning
- Email

- Community, where people are
- Schools
- Counselling
- Conferences
- Adults
- Youtube (video),
- Books
- News
- Speaking about it
- Leaflets
- Parents
- First aider
- Letters

Some young people said social media is not their first choice for getting information. One of the groups said that if they were facing big problems, they would need immediate help.

They said producing simple information is helpful, and makes it easier for them to understand and use it.

One young person said they were afraid to look up information, in case it made them feel worse about themselves.

## 2.2 Case Studies

We also asked the young people a number of scenario questions. In each scenario we asked what they would do to help their friends in the given situations. We wanted to know how well they would cope; and how informed they were about when and how to ask for help. The scenarios were:

**What to do if a friend kept crying** – a number of possibilities were explored and the majority of young people recognised the need to speak to a friend, or a responsible adult about the issue. They recognised that listening and helping a friend, can help and is part of solving the problem. Young people would help the friend by:

- *'Show you are present for them before asking them 'what's up?'*
- *'Offer to have a chat or support' (Themselves or someone else, counsellor was mentioned)*
- *'Tell someone, if you were really worried about them'*
- *'Comfort your friend'*
- *'Don't worry it will be over soon'*
- *'Go and sit down somewhere in peace'*
- *'Would you like to talk about it?'*
- *'Calm the friend down'*
- *'Convince them I can help'*
- *'Talk to them about the problem, listen'*
- *'Try and give advice, maybe make them talk about it with a friend'*
- *'If it happens a lot, ask parents' opinion. Not the teacher, in case they don't want them to know'*
- *'Do things for them if they don't feel comfortable telling you'*
- *'Tell them to talk to someone'*
- *'Write a list of things that they are worrying about'*
- *'Listen to them'*
- *'Tell them to go to the doctors'*
- *'Take pressure off them'*
- *'Talk them out'*

**What to do if a friend was self-harming** – Young people were happy to talk about this situation and recognised the sensitivity around it. Several times they said that speaking to an adult, or family members, would help. Young people would help the friend by:

- 'Support them - don't push them'
- 'Try not to mention it to them' (their experience, their friend didn't want to talk about it. Mention of addiction to self-harming pain)
- 'Speak to their family so they are aware'
- 'Advise see the doctor, depending on worries'
- 'Talk about it to see what the issues is'
- 'Support'
- 'Tell the teacher'
- 'Talk it out'
- 'Reassure them they are no alone'
- 'Go to the doctors, go with them'

# 3. Learning points

At the end of each session the young people had a few minutes to think about what we all talked about. They each filled in a survey where they could share information and comments in a confidential way, without having to speak in front of the group.

We have taken a number of these comments, combined them with what young people told us in discussions, and have drawn out learning points that commissioners and service providers can use to inform service development.

## 3.1 More information

Young people mentioned several times how more information about mental health should be easily available for them. This is what they said:

- *'It should be more information for young people how they can get the help or deal with the problem they have'*
- *'I think there should be more info on mental health for young people'*
- *'The past few years have been a struggle for me at home. I look to professionals within school for advice and help'*
- *'There is not much support and help for people struggling with mental health'*
- *'There are a lot of mental health services that can help people with a mental health illness, and they should get in contact'*

## 3.2 More mental health education

They also talked about how important it is to target mental health education. They thought it was important to spend more time on the subject, and school should provide time for discussion. This is what they said:

- *'I think mental health is not targeted enough and a lot of people struggle in many different ways and all different ages'*
- *'I think more people need to be aware of mental help'*
- *'More people's opinions on mental health'*
- *'Maybe we could do more sessions on this topic'*
- *'Maybe more time on this session'*
- *'I think there needs to be more mental health services at school for young students. There needs to be someone who you can go directly to and that you know they are the right person to sort out the problem straight away (not refer you to outsiders etc.)'*

## 3.3 Fighting Stigma

Young people mentioned how stigma has a big impact on the way they understand and perceive mental health illness. They said:

- *'Mental health is an illness, which many people don't really take into account. Whether it's schizophrenia or depression, it's all an illness'*
- *'I think mental health is a sort of taboo. People feel uncomfortable talking about it and there are many negative stereotypes around them'*
- *'Mental health is for people with mental problems'*
- *'I think that I learnt how much disparity there is in perceptions of mental health and the stigma attached to it so it would be great to raise awareness and clarify with people what exactly mental health is eg. Assemblies in secondary schools'*
- *'I found it quite difficult to understand it, I mean teachers tell you about it and say you can speak to them but they don't understand that people with mental health issues aren't always aware that they have them and so many do not ask for help until it gets really hard or out of hand'*
- *'I now understand that mental health and emotional wellbeing are the same thing!'*
- *'Mental health isn't actually negative, mental health can also be good'*

## 3.4 Sharing young people's experiences

A number of young people shared their own experiences with mental health illness. They talked about some of their struggles, and how they coped with it. This is what they said:

- *'I suffer with depression and anxiety'*
- *'I have depression, anxiety and OCD. I saw a therapist, and I see my counsellor and GP regularly. I'm on antidepressants. There's too much of a long wait to see a therapist'*
- *'I've gone through self-harm, anxiety problems and depression. I never used any services, I just kept things to myself and didn't talk to anyone about it'*
- *'At the moment I have depression, eating disorders, epilepsy and family problems'*
- *'I've suffered from depression and still sometimes now'*
- *'Previously suffered with depression and self-harm'*

*'At the moment I have depression, eating disorders, epilepsy and family problems'*

# 4. Suggested actions

As a result of this project Healthwatch Cambridgeshire suggests a number of actions for the commissioners, to help young people find the help and support they need:

- **Use of language** - Use wording that is meaningful and relevant to young people.

- **Having stories online** - Help young people relate to mental health situations in a meaningful, positive way, as well as fighting stigma.

- **Resilience** - More promotion amongst children about how to 'bounce back' after a difficult time. More positive thinking; seeing their strengths. Not seeing failures as set backs, but part of the learning process.

- **Self Help** - Promote a better understanding of how generally 'looking after yourself' helps good mental health and well-being. Looking after your self includes: regular exercise, plenty of sleep, a good balanced diet and a social life.

- **More use of online resources** - Let young people, professionals and providers know about the resources that already exist. Make sure they are used appropriately and work is not duplicated.

- **Invest in Peer to Peer support** - Help young people to be equipped and confident in finding help for themselves and for friends in need.

- **Personal Social and Health Education (PSHE) in schools** - Encourage schools to talk about mental health to their students, as well as it being a core element of their PSHE Curriculum.

- **Counselling in Schools** - Promote the value of counselling in schools as a significant investment in helping young people maintain good mental health.

*'I think mental health is not targeted enough and a lot of people struggle in many different ways and all different ages'*

# Acknowlegdements and thanks

We want to give a special thanks to everyone who was  involved with this project. From the young people to project workers, and teachers who committed their time and input, making it possible.

We especially want to say thank you to Active, from Addenbrookes, Ely Sixth Form College, and The Carers Trust for the great feedback and discussions we received from their young people.

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# Appendix

## Resources

**These are some of the resources used to develop each focus group session:**

- Epic Friends website http://epicfriends.co.uk/

- Time to Change campaign http://www.time-to-change.org.uk/

- 5 ways to mental wellbeing https://www.mentalhealth.org.nz/assets/Five-Ways-downloads/mhf-5-ways-a3-vert-bubble-poster.pdf

- Young Minds http://www.youngminds.org.uk/

- Online Counselling for young people https://www.kooth.com/