



About us





This report has been produced by Healthwatch County Durham. We are an independent organisation whose aim is to help people get the best out of their local health and social care services, whether it's improving them today or helping to shape them for tomorrow. Everything we say and do is informed by our connections to local people and our expertise is grounded in their experience.

As a statutory watchdog, our role is to ensure that local decision makers put the experiences of people at the heart of their care so ommissioners) and provide our services (NHS Trusts, GPs, the

that those who buy (commissioners) and provide our services (NHS Trusts, GPs, the voluntary sector and independent `providers) can benefit from what people tell us.

The Healthwatch network consists of 152 Healthwatch organisations across each of the local authority areas in England. It also has a national body called Healthwatch England based in London.



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Summary

Healthwatch County Durham wanted to hear from children and young people about mental health. Prior to the research, we knew that mainstream services were stretched and this had been exacerbated by the Covid-19 pandemic. Therefore, we took the approach of looking at a grass roots level; what do children and young people understand about mental health, what are their self-care and, if they could have just one thing to better support their mental health and wellbeing, what would that be?

Over the course of 2021 we engaged with over 900 children and young people with a wide range of activities and focus groups, online, face-to-face in social settings and in classrooms. We were greeted with honesty and an overwhelming sense of resilience, understanding and empathy.

The Health and Social Care Committee recognises that service improvement is required and plans are afoot to transform children and young person's mental health services, with more timely access and increased funding. Healthwatch County Durham's next steps will focus on how we can enable others to better support our children and young people, through sharing best practice and evidence-based self-help, while working closely with partner organisations and monitoring the County Durham situation.

989 children and young people talked to us about mental health



Young people are most likely to confide in teachers, parents and siblings





Since the pandemic many primary school children worry about not having enough food to eat, or enough money.

1 in 6 young people are now more likely to experience poor mental health, compared to 1 in 9 prepandemic



Children have missed out on so much during the pandemic





Introduction

Pre Covid-19, statistically 1 in 9 children could be expected to experience poor mental health before the age of 14, that figure is now 1 in 6. Not surprisingly, children and young person's mental health was voted a top priority for us to investigate during 2021, following our annual public vote.

With mental health services already stretched and patients reporting difficulties in accessing services either through self-referral, or a healthcare professional, we chose to look more closely at children and young people's mental health from a grass roots level.

This report looks specifically at how children and young people view mental health, the main areas of worry and anxiety, who their trusted adults are and self-identified coping mechanisms. The aim was to identify what Healthwatch County Durham can do to enable others to better support children, young people and their families and carers.

Method

The Covid-19 pandemic has meant that we have had to look into more innovative ways of working, particularly with younger audiences. For this report, we held a number of online focus groups with small groups of young people, using the online engagement tool, Mentimeter, which made the interaction more fun and appealing.

In addition, we visited a number of primary schools, liaised with the scouting organisation, and worked closely with Durham Young Carers and Durham Youth Council who took our survey into secondary schools and around the County. Furthermore, we used an online survey to reach those young people not in educational settings and shared this on our social media platforms and in our monthly e-bulletin. The age range that we approached was 25 and under.

In order to engage with our youngest children (aged 4 and 5), we asked them to draw pictures relating to some of our research questions, such as; Who is your trusted adult, what kind of things do you worry about, and what makes you happy, always ending the sessions with positive thoughts on wellbeing and ensuring that any concerns raised were followed up with teaching staff and where necessary Designated Safeguarding Leads (DSL).

Our approach allowed us to engage with 989 children and young people from June to November 2021.

As the topic had the potential to be emotive and to raise safeguarding concerns, we ensured that links to support services were provided where interaction was anonymous, and anything that raised concerns through face-to-face / online focus groups was addressed through the appropriate safeguarding protocols, as per the establishment that we were working with.



Findings



The main findings from this report can be summarised as:

- All of the children and young people we spoke to had a clear understanding of what
 mental health is. The youngest children were able to tell us about the things that make
 their "tummies feel sad" or when something makes them seek someone they trust for
 support. The older children had a deeper understanding of mental health and what it
 meant to them and their peers.
- The main worries that children and young people face are things such as financial worries, not having enough food to eat and the death of a loved one. Older children were more concerned about body image, school work and bullying. It was also noted that there was a shift in concerns over time. Before the summer holidays, many children were concerned about moving to new classes or new schools. From September, the concerns more widely reported were in relation to not having enough food to eat, or not having enough money.
- Most of the young people we spoke to stated that their parents and teachers were their most trusted adults. Older children were also likely to confide in a friend or sibling.
- Common self-help techniques used by children and young people are physical contact such as cuddles and affection, particularly with each other and pets, seeing friends and family, talking, exercise and gaming.
- Teachers and group leaders all expressed concerns over the lasting impact of the Covid19 pandemic. Children's resilience is waning, particular in those who have previously
 experience poor mental health and many children are now dealing with the aftermath of
 Covid at home, either through the loss of a loved one, domestic violence and financial
 hardship. The youngest children were noted to have much higher emotional needs and a
 lack of social skills compared to children in other intakes.
- The main barrier to better and consistent mental health support in schools and colleges is funding. Currently the costs of intervention programmes and additional support is largely from existing budgets meaning that spending is reduced elsewhere, and that provision is inconsistent between settings.





What children & young people told us:

Mental health is really important to me and I feel like it isn't considered when it comes to students

I like writing stories but we don't do that in school anymore

I worry when someone I know is really ill

The thing that is important to me - is listening to me and involving me

Being outside makes me feel better Mental health is a main part of having a healthy life, mental health is an important as physical health

Mental health is like a banana, things are much more different on the outside than the inside

I worry about making the right choices for something big

Spending time with my pet makes me feel better

Volunteering helps to take my mind off things and makes me feel better for helping someone else



1. What does Mental Health Mean to you?

The aim of this question was to gauge young people's understanding of mental health. All the young people we spoke to knew what mental health was, that everyone has it and that it can be affected by many things. Teachers and group leaders all told us that conversations around mental health and wellbeing are actively encouraged, although some young people felt that more could be done to support mental health in secondary schools and colleges.

2. What kind of things do you worry about?

Young people reported that the things they are most likely to worry about include isolation, meeting new people, schoolwork and exams and bullying. Incidentally, there was a shift in concerns from children when looking at the comments made at different points in the school year. Transitioning to a new class or school and the loss of a loved one were key concerns prior to the end of the school year, whereas from September we saw an increase in the number of younger children who had financial worries (relating to parent's income) and concerns about not having enough food to eat and going hungry.

Maslow's Heirarchy of needs is commonly applied in education settings. A failure to meet basic physiological and safety needs will have a detrimental effect on a person's mental health. Children who are hungry and worried, insecure and/or frightened, will not thrive in education. This has long-term implications in terms of overall health and wellbeing. Many of the teaching staff and group leaders that we spoke to referenced the additional support they provide to young people in order to try and meet those needs. These may include but not limited to, funded breakfast clubs, free school meals (for those not eligible and whose families are suffering from financial hardship), healthy snacks available in classrooms, food parcels and vouchers for school holidays, provision of school uniforms, coats and shoes, and toiletries. Schools told us that they had seen a substantial increase in the number of families needing financial assistance since the pandemic, with many families falling through the gap of not being eligible for help but experiencing a change in financial circumstances as a direct result of the pandemic.

3. Who are your trusted adults (and where do you go for support)

Most primary school children told us their trusted adults were their teachers and parents. Secondary school children, and older told us that they would confide in a parent, friend or sibling. The decline in children's mental health over the pandemic can be attributed, to some extent, to not having access to their trusted adults. Long periods of missed schooling and lack of contact with family and friends have led to people not being able to talk openly about their thoughts and feelings. This coupled with financial concerns and the overall effect of isolation and uncertainty has led to an increase in mental health decline. Early years teaching staff have noted a substantial increase in the level of emotional and social support required by new school starters, more so the September 2021 intake than 2020. This is assumed to be because of not having the usual nursery and social experiences of pre-school child. Older children are described as being more anxious over normal everyday things, with one teacher commenting "they really just need to learn how to play, and be children again."



4. What do you do to help make yourself feel better?

The children and young people we spoke to showed a lot of maturity in managing how they handle their feelings and support their own mental health. The self-care practices commonly adopted include cuddling and physical contact with friends, loved ones and pets, playing and engaging with friends and family, exercise - which ranged from football and running, to dancing, yoga and martial arts. Young people commented about how it makes them feel distracted from their worries, in control and with a sense of calmness.

5. What one thing do you need to better support your mental health?

The main thing that young people want, is to be heard. They want to be able to talk, be listened to, respected and to be involved in decision making processes. Some of the younger children were more tactile in their responses, citing things like drawing equipment and fidget toys. A number children said they wanted their parents to have enough money to buy food.

Talking to school staff and group leaders it was apparent that children and young people have missed so much through the pandemic. This ranges from early years' experience at playgroups and nurseries, to socialising with family members and friends, to experiencing 'normal' things such as parties, trips to the park and days at school with no restrictions on contact and interaction. Every adult professional that we spoke to expressed concern over the impact that this has had on children's mental health and wellbeing. Reference was frequently made to how there is a presumption that children are resilient, but that there is a limit and two years down the line, that resilience is waning.





Conclusions

The Covid-19 pandemic has adversely affected mental health and wellbeing, and children and young people are no exception. Education settings are into their third academic year of restrictions and disruptions, mental health services are facing unprecedented demand and life is still uncertain in so many ways.

There are many reports on children and young person's mental health including those referenced in this research by the Health and Social Care Committee, the Department for Education and CQC. The recurrent issues highlighted, are that demand for services was stretched prior to the Covid-19 pandemic, the need to increase access to services is a matter of priority, as is lack of funding at a local level.

Our research has shown that young people understand what mental health is and how they value it as being as significant as physical health. They know what to do to support their own wellbeing and that of their peers. It has also shown that school is often the place where initial intervention needs are identified. The youngest children are likely to place their trust in a teacher, parent/carer and for older children this is more likely to be a parent/carer, sibling or friend.

Conversations with schools have shown that a lot of mental health support and low-level intervention is left to them to resource and fund. In turn, this places a lot of additional pressure onto school staff and budgets and is something that schools have no option other than to do, to safeguard the wellbeing and longer-term outcomes for their pupils.





We know that young people want to be heard, be involved in decisions about their care and be respected by their peers and their care givers. We also know that younger children feel especially concerned about not having enough food to eat or financial security. All these concerns were supported in the conversations we had with parents, carers, teachers and professionals. Further concerns were raised about timely access to services, a lack of funding to provide the much-needed support and the importance of early intervention and the impact that has on long term outputs.



Next steps

Given children's likelihood to confide in a trusted adult in school, there is a need for support to be more accessible and consistent across educational settings. Many teachers we spoke to expressed concern over how long referrals take to external agencies, how funding for intervention programmes has to be found from within existing budgets, and that the cost of providing support to families through breakfast clubs, school meals and basic food packages often fall to schools and charities. HWCD will publish this report and share with relevant agencies and organisations to raise awareness of what the research has shown.

The government have announced plans to roll out Mental Health Support Teams across primary schools over the next 6 years in a bid to identify and support children and young people who are beginning to experience problems with their mental health. While the time frames for this are not ideal, particularly in the aftermath of the pandemic, Healthwatch County Durham understand that any radical change to services will take time. We will continue to monitor this initiative locally and report on its impact as and when it is rolled out to schools within our area, through maintaining an active dialogue with education settings and key agencies.

In the meantime, Healthwatch will also continue to work with schools, families, and providers to ensure that timely access to the most appropriate services and pathways is supported wherever possible.

Healthwatch will continue to hear the voices of young people and share intelligence with service providers. In addition, we will also share good practice and evidence-based self-help to assist our families at a time where there is an inevitable delay in accessing mainstream services.

Responses

Philippa May - Project Manager, The Bridges Young Carers Service-

"Ensuring that children and young people's voices are heard is incredibly important to us at The Bridge Young Carers, so we were delighted to be included in this important piece of work by Healthwatch. Our Young Carer Ambassadors are advocates for other young carers, so it was a fantastic opportunity to have their opinions included. The young people involved were able to discuss and explore different issues, whilst also come up with suggestions to improve services for all young people in the future."

MYP Matthew Hill, Durham Young Carers-

"Young people's mental health is just as important as adults. If young people do not know what support is available and how to cope with their mental health, then that could unfortunately lead to detrimental consequences. We as a Youth Council firmly believe that every young person should be heard and that includes issues surrounding their mental health. Young people always need support in so many areas and mental health is seen as one of the most important to them."

County Durham Primary School Headteacher

"There has been a significant adverse impact on children's mental health and wellbeing, as a direct result of COVID-19.



There are widespread implications for schools to support children through effective mental health and wellbeing provision, which are fundamental to improving the outcomes and future life chances of children, post-pandemic.

Importantly, provision should be focused on placing the needs of the child at the centre of planning and delivery and aim in securing early identification of vulnerabilities, providing appropriate support and timely access to services."

Acknowledgments

Many thanks to everyone who took part in this research, including education settings across County Durham, Durham Scouting, Durham Youth Council, Durham Young Carers and Investing in Children.

An extra special thanks go to all of the children and young people who shared their views with us over the consultation period.



Appendix

Appendix 1: Please see separate document for the details of the consultation led by Durham Youth Council.

References

- Children and Young Person's Mental Health Report, House of Commons, Health and Social Care Committee - December 2021
- Transforming Children and Young Person's Mental Health Provision: A Green Paper
- Mental Health Care of Children and Young People through the Covid-19 Pandemic
- Maslow's Hierarchy of Needs; DfE, Change Kids Lives, Education Library & The Education People