

**Children in Wales**  
**Monday 14<sup>th</sup> July 10.30 – 1.00**  
**Mental Health Provision for 16 and 17 year olds in Wales**

	Introductions
Sally	<p>Barnardo's has worked across the UK for over a hundred and twenty years. Barnardo's Cymru has worked in Wales since 1892. Barnardo's has an established and respected history of providing innovative and effective services with the most vulnerable children, young people and families.</p> <p>During the year 2006-2007 Barnardo's Cymru supported more than 8,000 children and young people in over 40 services across Wales. The range of work includes</p> <ul style="list-style-type: none"> <li>Fostering and adoption</li> <li>Short breaks for disabled children</li> <li>Support of young carers</li> <li>Work with sexually exploited children and young people</li> <li>Support of care leavers and young homeless people</li> <li>Mental Health and emotional well being</li> <li>Work with families around parenting</li> <li>Play provision</li> <li>Work with children and young people who have sexually harmed others</li> </ul> <p>In addition to providing direct services Barnardo's works across the UK and Wales campaigning on a range of issues with children and young people. Currently one of the themes for Barnardo's UK is the impact of parental mental ill health and the support needs of children particularly when their parents are in psychiatric hospital.</p> <p>For the past year in Wales Barnardo's has been focussing a campaign on the transitions from CAMHS to AMHS and the particular needs of 16 -17 year olds.</p>
Sarah	<p>In early 2007 we asked for all staff's views on the topic which they thought most needed a higher profile across Wales. Children and young people's mental health and emotional well being was the issue highlighted by the majority of staff. A further piece of work was carried out looking at the work of our services and how they might contribute to a campaign. From this a decision was made to focus just on the needs of 16 and 17 year olds as the group most often excluded from existing provision and yet also being the group most likely to need significant support.</p>

Sally	<p>As part of the campaign we have pulled together the available evidence, the information on the current policy context in Wales and considered work in the rest of the UK to prepare the Policy and Practice briefing. The briefing was sent to all AMs and was widely distributed both electronically and across Wales. We targeted the part conferences for distribution and have met with the Deputy Minister to discuss the content of the paper. The launch of the paper received some media coverage including a range of radio interviews and a significant piece in the Western Mail. We are currently working on the next stage of the campaign which will involve young people voicing their concerns directly through a postcard campaign.</p>
Sarah	<p>Our briefing focuses on the fact that vulnerable young people in Wales are let down by the mental health services just at the time when they are likely to need them most. Teenagers between 16 and 18 are significantly at risk of mental ill health and yet they are no longer automatically treated by child and adolescent mental health services, but with no statutory right to help from adult services until they reach 18. Adolescence is a peak age for the onset of serious mental illness such as depression, bi-polar disorder and schizophrenia. Aggressive behaviour, drug use, self-harm and increased risk of suicide are associated with these conditions. Yet, if a 16-18 year old is not in fulltime education child and adolescent mental health services (CAMHS) rarely supports them. And if they have behavioural problems, drug or alcohol problems, or lead a chaotic lifestyle their lack of access to services is exacerbated.</p>
Sally	<p>The system in Wales conspires to exclude the most vulnerable young people from mental health support at a time when they need it most, and that can have devastating consequences for them throughout their adult lives. Refusing to treat young people with drug or alcohol problems or behaviour issues is rationalised by saying that treating them will be ineffective while they are also grappling with other difficulties. But the reality is that these issues are often interlinked and we need to look at holistic approaches to supporting them. Homelessness is known to treble a young person's risk of mental health problems, while studies suggest that up to 90 per cent of adolescent drug misusers also have mental health issues. For the adult population it can be hard enough to access appropriate services but for young people it is even harder.</p>

Sarah	Mental health problems often first surface during the transition to adulthood, due primarily to new pressures and challenges. Up to 20 per cent of 16- to 24-year-olds have a mental health issue, mostly anxiety and depression. Suicide is the cause of a quarter of all deaths amongst 16- to 24-year-old men, and it has been estimated that suicide attempts by young men have risen by over 170 per cent since 1985.
Sally	The Mental Health Foundation found that where CAMHS ends at 16 and AMHS begins at 18, young people between these ages, especially those who are no longer in education, frequently disappear from statutory services, because of the lack of transition arrangements in place. Even where there is no gap in provision, the move from CAMHS to AMHS can be difficult, and many young people drop-out at the point of transition and consequently have no access to the skilled support they need. In addition, parents often report that they feel left out of important decisions during the transition to AMHS, despite wanting to remain involved with their child's treatment.
Sarah	The concerns about young people's particular needs as 16 and 17 year olds have been repeatedly highlighted across a broad range of organisations, documents and by young people and their families. Everybody's Business in 2001 recommended that CAMHS should ordinarily cover young people up to their 18th birthday but recognised that this policy was not applied or applicable in the NHS in many areas. It recommended that moving towards this age range for CAMHS should be the goal. Its achievement would be a key part of local strategic planning and implementation that would require consideration of the substantial resource and training issues consequent on this plan. In addition, there was considerable support for developing specialist services especially for older adolescents and young adults that cover people from around 15 to around 25. Everybody's Business states
Sally	"There is much to commend this more radical advice. We do not wish to duck this issue but we do consider it wise to proceed cautiously to ensure that the plainly significant implications for human and financial resources are fully understood before a final decision is made. We propose to commission a study to achieve this full understanding of the issues."

Sarah	Some five years on from the publication of Everybody's Business Peter Clarke in 2006 commented that the system was "resulting in a gap in mental health services for many 16-18 year olds and patchy and problematic provision such that vulnerable teenagers were "probably the least safeguarded group" in Wales.
Sally	Two years on still there is no sign of a coherent package of care for 16 and 17 year olds, the arrangements for transition for young people in mental health distress are largely non existent. Professionals across CAMHS and AMHS still to a very large degree appear to exist within an age restricted vacuum so from the outside it feels hopefully erroneously that the gate keeping of services is the primary objective.
Sarah	We are currently considering the possibility of how a measure introduced under the proposed mental health LCO could be designed to implement primary legislation to protect 16 and 17 year olds.
Sally	<p>Barnardo's Cymru wants mental health support to be part of a holistic service for young people aged between 16-25, and they want young people to be more involved in planning the style of services they are offered. Many young people report that they are only offered medication with a lack of therapeutic and holistic support. Young people consistently request support which can focus on all of their needs and on support which is non judgemental and from people who have time to invest in them as individuals.</p> <p>The recommendations for AMs and mental health service providers to address include:</p> <ul style="list-style-type: none"> <li>• Re solving the problem of young people being excluded from mental health services as a result of substance misuse and other issues</li> <li>• Providing young-people centred holistic services and adequately resourcing them</li> <li>• End the practice of adolescents being placed on adult wards</li> <li>• Including young people in service planning, professional training and peer support.</li> </ul>
Sarah	Barnardo's Marlborough Road Partnership works with vulnerable young people through a range of services. Marlborough Road has provided services to children and young people since 1976. Currently we run

	<p>projects in Cardiff and Newport for teenage parents and homeless young people. We run a service in Newport called Out There working with young people who have disengaged from all other service provision and in Cardiff we manage Caterpillar a service specifically for young people aged 12 – 19 experiencing mental ill health. Caterpillar is a model of how a service can be developed for vulnerable adolescents including 16 and 17 year olds and those experiencing transition.</p> <p>In Cardiff all the services are based in the Marlborough Road building. The building is equipped and set up for group and individual support for young people as well as providing office space for staff.</p>
Sally	<p>In 2002 Marlborough Road was approached to take part in the pilot for the Youth Crisis project in partnership with the Mental Health Foundation and the then Health Authority. The project was funded by the Princess Diana fund and arose from the two reports commissioned by the Mental Health Foundation – Turned Upside Down and Bright Futures.</p>
Sarah	<p>The work of the project focussed on consulting with young people aged 15 – 25 who had experienced mental health services both as children and young people. The consultation worker worked with young people on an individual basis and in groups across South East Wales to help them find ways to express their views and explore ways to carry those views to adult professionals. The young people identified the following as priorities for a service to address their emotional needs</p>
Sally	<ul style="list-style-type: none"> <li>• Support which is compassionate and empathetic and does not solely focus on their illness but recognises their needs as young people.</li> </ul>
Sarah	<ul style="list-style-type: none"> <li>• They wanted more control of activities, rather than have appointments for services tightly managed by those services, and to be able to access support on a very frequent and regular basis as it was needed.</li> </ul>
Sally	<ul style="list-style-type: none"> <li>• Staff who could spend lots of time getting to know them</li> </ul>
Sarah	<ul style="list-style-type: none"> <li>• They wanted to build support networks with each other but also felt a worker to help with the groups when they were feeling poorly was important</li> </ul>

Sally	<ul style="list-style-type: none"> <li>• They wanted a place to go that was safe and comfortable and made them feel at home</li> </ul>
Sarah	<ul style="list-style-type: none"> <li>• Staff who were, primarily, skilled at relating to young people.</li> </ul>
Sally	<ul style="list-style-type: none"> <li>• Staff who could support them to negotiate the maze of agencies and professionals they were involved with, to help explain why things were happening and to help them speak for themselves.</li> </ul>
Sarah	<p>The young people involved in the initial consultations wrote a series of presentations. The presentations covered the work of many young people some of whom did not want to take part in meetings but who wanted their views and experiences shared with others. The group gave an impressive and thought provoking range of presentations to a variety of organisations. At each event the young people presented their views and experiences directly to adult professionals.</p>
Sally	<p>In April 2004 at the end of the consultation project Caterpillar was established based on the ideas of the young people. The aims of the project were and are</p> <p><b>To offer young people positive and non-judgemental support to enable them to effectively access other provision and build the capacity to enjoy happiness.</b></p> <p><b>To campaign with young people to influence policy makers to provide and improve services for young people experiencing mental health issues.</b></p> <p><b>To work with statutory and voluntary agencies to offer training to reduce the stigma associated with children and young people's mental health.</b></p>
Sarah	<p>The service was initially funded by Barnardo's and the Mental Health Foundation. The service carried on developing presentations and seeking out opportunities for young people to directly talk with policy makers. In addition the service provided some limited direct support through a range of informal groups and individual support. Staff have worked with a number of young people who are moving from CAMHS to AMHS and have attempted to work with them and the various agencies to ensure better transition – unfortunately this work has been extremely difficult.</p>
Sally	<p>In September 2006 the Caterpillar service was expanded after a successful application to the Big Lottery Fund. At the same time we secured grants for a smaller project called Bounceback working with young people in schools.</p>

Sarah	The project was able to employ a range of staff with backgrounds in social work, youth and community work, education, health and academia to develop the work of the project in terms of individual and group support and direct work in high schools. Young people were involved throughout the recruitment process and received appropriate briefs in terms of confidentiality and the recruitment process. It is always a priority that the staff we recruit are chosen by the young people.
Sally	Staff have worked across the UK on a range of initiatives for example the National Self Harm Enquiry and Scotland's Heads up and See Me.... Initiatives. In 2005 a self harm awareness raising campaign with BBC and Radio Wales resulted in the highest record number of requests for help from their action line for any awareness raising series. In the past year we have worked with MIND to adapt their adult self harm leaflets into something more accessible for young people.
Sarah	Within four months of the new funding the community based Caterpillar service was working at capacity. On average the service receives at least eight new referrals each week. At present the service is only able to work with young people with significant mental ill health. Currently the project works with 60 young people all of whom are or have very recently received support from CAMHS or CITT. All our work is directly with young people and we cannot provide broader family support. We work basic office hours but with groups running in the evenings, some weekend work and with some young people the option of access to a twenty four hour on call service. On Call has been particularly effectively used with young people who self harm as a means of harm reduction.
Sally	We do receive referrals for children much younger than 12, referrals for parenting work and a very high number of referrals for 11 - 14 year olds boys for anger management/conduct disorders. We are rarely able to offer support to these young people. The vast majority of the young people using the service are aged 14 - 17. We would like to work with a wider age range but the issues of crossing boundaries for funding, and in terms of health, education and social services means that we are trapped in the same bubble of tightly defined criteria as mainstream services.
Sarah	Through Caterpillar we offer individual Support, group support and opportunities for young people to be involved in consultations, campaigning and influencing.

Sally	When young people are offered individual support they are allocated a support worker who is there to develop a relationship with the young person, and to get to know them well and gain their trust. The support worker engages the young person on many levels; attending medical appointments with them, helping them to express their views and concerns about their treatment, taking them out on social outings, being there to provide practical and emotional support if they, for example, self-harm . Eventually they will help the young person to look to the future and start planning for education or work and independent living. Support can be available to young people on a 24 hour basis.
Sarah	Caterpillar run a weekly group at the Hafod Newydd in-Patient facility in South Wales. We currently run four community based groups – two girls groups, a boys group and an art group. All of the groups help to develop the young people’s social skills and provide opportunities for them to develop safe peer support networks. The groups offer a safe learning environment for skills and relationships to be developed for young people who may be very isolated or uncomfortable in peer groups.
Sally	Some of the young people also work in groups preparing training workshops and presentations to raise awareness of mental health issues and needs of children and young people. Young people have recently designed a training package to be delivered to adult professionals for managing self harm, reviewed books for Young People Now, run self harm workshops for adult professionals, and taken part in countless media interviews including recently a documentary with the BBC. On Friday young people met with Madeline Moon M.P. for Bridgend to discuss their ideas for how to improve services. Young people are given the option of being involved. For many this is a crucial part of development, a way of letting go of experiences, building confidence, campaigning for the future, trying to make things better for the future. It is a fundamental and empowering process for all young people involved.
Sarah	The Cymorth funding in Cardiff is specifically to provide support to Year 10 and Year 11 children in four high schools. Bounceback is part of Caterpillar but is very much about providing intervention and support at a much earlier stage. The staff in Bounceback provide structured support sessions in the schools to any child who the school feels is unhappy or distressed and would benefit from sometime to look at their emotional well being. Bounceback also provides issue based sessions to whole school populations on self harm, self esteem, eating disorders, substance misuse and depression and anxiety.

Sally	<p>Across all the work of Caterpillar we work with other agencies including education, housing, children's services, benefits, physical health, AMHS, CAMHS and CITT. It is crucial for the emotional well being of all the young people using our services that we are able to work in partnership with all of the agencies involved in young people lives. As with all multi agency working the frustrations of different professional backgrounds and on occasion different priorities are wearing but the advantages for the young person when it works well are huge.</p> <p>On occasion with some agencies we have been able to work in a way that offers the young person a coherent, balanced package of support with clear communication between all involved and with respect between the agencies. However, at other times miscommunication, a perhaps misplaced sense of hierarchy and a lack of thought have led to an inferior service for young people and possibly at times dangerous practice.</p>
Sarah	<p>The Caterpillar service was part of an evaluation of voluntary sector projects across the UK undertaken by the Mental Health Foundation. The eight projects were selected on the basis of innovative practice and engaging with young people who have experienced significant distress. The evaluation demonstrated that all of the young people using the service reported a positive impact on their lives. The families of young people have reported on the importance of the support offered by the service and the difference it has made to the lives of not only the young person but of the wider family. Young people have consistently commented on the way project staff are able to work to facilitate support across a wide range of issues.</p>
Sally	<p>The first annual report to the Big Lottery evidenced that the project had met all the targets set with the Lottery. These include reductions in self harming behaviours, improvements in self esteem and confidence, attendance at all appointments with other agencies, and take up by 80% of young people of some form of educational or employment opportunity.</p> <p>The project is also subject to the Barnardo's UK planning and reviewing</p>

	<p>cycle and to the reviewing processes of the Children and Young People's Partnership.</p> <p>We have just introduced the Richter scales to measure soft outcomes with all young people.</p>
Sarah	<p>We continually evaluate our service with young people and the project continually evolves according to the needs and wishes of the young people. We try to instil a sense of true ownership of the service to the young people so that they feel involved on every level. This is crucial to young people and enables them to have a real say in the way things are run. We hold electronic files on all of the young people using the service. Young people can access their files at any time and we encourage young people to add their own comments to the staff recording.</p>
Sally	<p>For the future we hope Caterpillar will be able to continue to develop and possibly look at ways of establishing similar projects in other areas. Caterpillar has recently secured a substantial donation which will ensure our funding is secure for a further two years. We are also working closely with New Philanthropy Capital looking at sustainable and intelligent funding in the voluntary sector in relation to children's emotional well being. We are working with a number of authorities developing service protocols for young people involved in risk taking behaviours including self harm. In the coming year Barnardo's Cymru will promote the campaign for increased services for young people in the transition from CAMHS to AMHS and will also be working with the BBC across Wales on their proposed social action campaign focussing on young people and depression.</p>