

**Minutes of the Meeting of the Cross Party Group on Mental Health  
held on 5<sup>th</sup> December 2017, 6.00pm, in P1.02 of the Scottish  
Parliament**

**1. Introduction from Convenor and Deputy Convenor**

Clare Haughey apologised for the late start to the meeting and for the lack of audio-visual equipment. Clare introduced new deputy convenor, Jenny Gilruth MSP.

**2. PRESENT AND APOLOGIES**

**MSPs:** Clare Haughey MSP; Jenny Gilruth MSP; Annie Wells MSP.

**Non-MSP Members:**

<b>Organisation</b>	<b>Name</b>
ASH Scotland	Mary-Grace Burinski
BACP (British Association for Counselling and Psychotherapy)	Steve Mulligan
BACP (UC Division)	Carol Murray
COSCA	Brian Magee
Mellow Parenting	Christine Puckering
Mental Health Foundation	Lee Knifton
Mental Welfare Commission for Scotland	Kate Fearnley
MSP	Annie Wells
Pasda	Tom Wightman
Penunmbra	Robin Murray
Police Scotland	Julie Robertson
RCPsych in Scotland	Elaine Lockhart; Elena Slodecki (secretariat)
Salvation Army Scotland	Olive Lomax
Scottish Council on Deafness	Willie Mcfadyen
Scottish Independent Advocacy Alliance	Patrick Garratt
The Salvesen Mindroom Centre	Mig Coupe
VOX	Andrew Muir
WithKids	Emile Van Loo

**Non-members in attendance:** Chris Lord; Deva MacGinty (speaker); Alison Mahon; Gwenn McCreath; Thomas McEachan (speaker); Alice Paul; Jane Robins; Zee Timmins (speaker).

**APOLOGIES**

Apologies for absences were received from Oliver Mundell MSP, Tom Arthur MSP and 19 non-MSPs.

**3. MINUTES**

Minutes of the joint meeting of the CPG on Mental Health held on 5 September 2017 were accepted as an accurate record. The minutes were proposed by Willie Mcfadyen and seconded by Carol Murray.

#### **4. YOUNG PEOPLE, LGBTQI YOUNG PEOPLE AND MENTAL HEALTH**

The group will hear short presentations from the following invited guest speakers followed by a Q&A:

##### *Responding to Young People in Crisis*

Dr Elaine Lockhart, Consultant Psychiatrist and Chair of the RCPsych in Scotland Child and Adolescent Faculty

Dr Lockhart thanked the group for the invitation to speak. Dr Lockhart reported an art therapist and young person had drawn pictures specifically for this presentation which are unfortunately not available due to the IT/AV issues. Dr Lockhart asked the group to consider what it's like being a teenager in Scotland at the moment. Dr Lockhart reported at this age the body and brain are changing, there is pressure at school with exams, friendships are forming and social media is a force for good and bad. Dr Lockhart suggested any young person might have a crisis when things happen, such as falling out with a friend or failing an exam, but the question is when does it become a significant mental health crisis. Dr Lockhart reported mental health services are more likely to see teenagers with additional challenges, such as mood disorders or learning disabilities, which make teenage years even more difficult.

Dr Lockhart moved on to speak about how presentations of crisis can be dealt with at home, in hospitals and at school. Dr Lockhart noted most parents feel overwhelmed, guilty and helpless and are not sure what to do so. This is the same for teachers. Dr Lockhart talked about the need to support parents. Dr Lockhart suggested we also need to support teachers to get the training they need to support students. There are a few action points in the Mental Health Strategy which address this and the development of school counselling is seen as positive. Dr Lockhart noted we need people in hospitals who have training and can respond in a compassionate and informed way to someone in crisis. Dr Lockhart stated there is only one time when someone comes to the hospital for the first time and that first response is critical.

Dr Lockhart said only 50-75p out of every £100 in the NHS is being spent on mental health services for children and young people. Dr Lockhart said the critical time for brain development is in the first five years of life and if we want to help prevent crises we should intervene then. Dr Lockhart summed up her presentation by stating we need the resources to provide adequate services for children and young people, and join up the system around young people to their benefit.

##### *Barriers for LGBT Young People in Accessing Mental Health Support*

Deva MacGinty, Policy and Participation Officer, LGBT Youth Scotland and Zee Timmins

Deva explained LGBT Youth Scotland support young people aged 13-25 through digital platforms and opportunities. Research shows LGBT young people have poorer mental health outcomes, due to prejudice, discrimination and bullying. It was noted 40% of LGBT young people overall consider themselves to have a mental health issue. Deva suggested it is stigma and discrimination which cause poor mental health, not a LGBT affiliation or identity. Zee explained many LGBT young people don't feel mainstream services are inclusive of their needs. Some young people LGBT Youth Scotland spoke to said some doctors are asking about gender identity during consultations, instead of focusing on the issue at hand. For example, they may go in with an ear ache but spend the appointment explaining what it means to be trans or lesbian.

Deva and Zee explained the LGBT Youth Scotland's Youth Commission on Mental Health feel doctors should have better training on LGBTI identities to help support people and young people should be more aware of their rights when accessing treatment. LGBT young people are concerned medical professionals will make assumptions about their identity and this is a barrier to health support. Deva and Zee outlined recommendations from LGBT Youth Scotland's Youth Commission on Mental Health. The Commission recommend:

- Policies be in place across all health boards, surgeries and services to ensure LGBT young people aren't discriminated against or excluded.
- Programmes be rolled out to ensure all staff are fully aware of LGBT issues and proficient at handling LGBT health questions in a non-judgmental way.
- LGBT identity should be visible and embedded into health resources and services.
- Health services provide mechanisms and opportunities to anonymously and safely report feedback. Young people can then feel safe and get support or report issues.

Zee and Deva concluded their presentation by drawing attention to the Scottish Government's Consultation on Gender Recognition. Studies have shown people are happier and healthier if their identity is accepted and respected.

*Speak Your Mind – Our Generations Epidemic!*

Thomas McEachan MSYP for Glasgow Pollok, Scottish Youth Parliament

Thomas explained he is the MSYP for Glasgow Pollok, as well as the Scottish Youth Parliament (SYP) trustee for projects and campaigns. Thomas explained the Scottish Youth Parliament is a human rights based organisation whose vision, values and mission are grounded in UNHRC on the rights of the child. Thomas reflects the views of his constituents in his position on the SYP board. Mental health is an issue which came up regularly and eventually won the campaign selection to become a focus of work for SYP.

The campaign was developed by young people and included the aim of increasing young peoples' awareness and understanding of mental health. Other aims were to encourage the use of a common language and advocate for high quality services and information provision. The SYP gathered responses from 1500 young people aged 12-26 on their experiences of the mental health system and conducted focus groups with young people. The findings of the report were merged into the document, *Our Generations Epidemic*. The title is important – in one focus group a boy who came along to speak about experience mentioned he thought mental health was his generation's epidemic.

The report showed a lack of awareness amongst young people about available information, support and services. Young people identified a barrier to seeking support, in addition to embarrassment and fear of being judged, was a lack of understanding about mental health. Thomas spoke about his personal experience after leaving school. Thomas explained it took speaking to a SYP staff member who knew how to get help for him to eventually see a counsellor. Thomas went on to suggest public information about mental health should be tailored to different age groups. Thomas noted within the report, services that were young person specific were seen as positive. The report gave two further recommendations: improve provision of school counsellors and develop a young person led mental health forum in each local authority area. The report influenced the Scottish Government's Mental Health Strategy and assisted in securing agreement that CAMH services would be extended up until 25-years of age. On a local level, one MSYP has developed a mental health toolkit which she is taking to schools across her constituency.

Thomas concluded his presentation by drawing attention to the SYP's new campaign 'Right here, right now' which is about ensuring all young people are aware of their rights.

Clare Haughey asked the secretariat to include a link to the SYP report in the minutes. [http://www.syp.org.uk/our\\_generation\\_s\\_epidemic](http://www.syp.org.uk/our_generation_s_epidemic)

#### Q&A

Tom Wightman, Pasda, stated autistic people do not develop at the same time as others and noted concerns about the cut offs for young people not taking this into account. Dr Lockhart said this comment would resonate for families who have young people with autism. Dr Lockhart noted proposals for flexible services are positive, but only if accompanied by enough trained people.

Kate Fearnley, Mental Welfare Commission, asked Deva and Zee whether they had any thoughts about the Mental Welfare Commission's guidance on LGBT inclusive mental health services. Deva noted she has been speaking to the Mental Welfare Commission and the Youth Commission uses the resource.

Andrew Muir, VOX, asked whether homosexuality should be considered as a mental illness and gave some statistics on a vote about inclusion in the DSM. Deva responded being LGBT in whatever capacity shouldn't be seen as a mental health issue or a mental disorder. Deva reiterated it is prejudice and discrimination which causes mental health issues. Thomas said he is a gay man and his struggles in high school are what played a role in developing severe anxiety. Thomas suggested we need to tackle issues around bullying to reduce poor outcomes for LGBT young people. Dr Lockhart stated that psychiatrists do not see homosexuality as a mental illness.

Christine Puckering from Mellow Parenting asked speakers what they thought about a recent statement suggesting GPs should routinely ask about gender and sexual preferences. Deva answered LGBT Youth Scotland ask clients to complete introductory forms which include demographic information. These are monitored but do not appear in a person's records. This allows services to see the minority groups accessing services but allows a choice about whether to divulge information. Zee stated it is optional for GPs to ask these questions and some people might want to come out and others will not.

Gwenn McCreath, Health in Mind, asked whether speakers are aware of examples from other countries which we could learn from to address the current gaps in services. Zee answered those countries with better human rights laws tend to have better access to services for LGBT young people. Deva referenced the Rainbow Index which shows the level of LGBT equality countries have. Dr Lockhart suggested Scandinavia has good outcomes, due to the level of funding and services.

Lee Knifton, Mental Health Foundation, suggested the presentations showed a mismatch between need and the ability respond. Lee asked whether community organisations can be skilled up to respond sensitively at the early stages. Thomas answered he thinks this is the kind of thing which needs to occur, so those in crisis have accessible people to speak to about mental health issues. Dr Lockhart added it is important people get support close to where they live and where they are comfortable. Dr Lockhart added that if community services aren't enough, there are other services to help.

Jane Robins stated she feels not enough is being asked of parents in terms of being prepared to look after their child physically, emotionally and mentally. Dr Lockhart noted there is no training for bringing up a child, so we need to flag up how parents can be supported. Christine Puckering noted if you have poor relationships in your childhood this carries on to the next generation. Christine suggested it is important for education to start before people are even contemplating parenthood so there is a better platform for the next generation.

Tom Wightman, Pasda, suggested short-term funding is affecting the third sector's ability to support people. Thomas suggested this comes down to the issue of parity of funding as Dr Lockhart mentioned earlier.

Alice Paul, Your Voice, stated mental health is everyone's responsibility. Alice suggested you cannot underestimate the value of peer support and unpaid workers. Clare Haughey MSP asked whether the speakers had looked into peer support. Dr Lockhart noted there is research being conducted into peer-to-peer support in schools and if it is shown to work, it will be rolled out.

Clare rounded off the session by thanking speakers and those who asked questions.

#### **5. DATE AND TIME OF NEXT MEETING**

The next meeting will take place on Tuesday, 20 March 2018 at 18.00 in Committee Room 6 and will be themed around primary care mental health/mental health in primary care.