Public Petitions Committee
Inquiry into mental health support for young people in Scotland
SAMH (Scottish Association for Mental Health)

Introduction

Around since 1923, SAMH operates over 60 services in communities across Scotland providing mental health social care support, primary care, employment services, and children and young people’s services among others. These services together with our national programme work in See Me, respectme, suicide prevention, and sport and physical activity inform our public affairs work to influence positive social change.

SAMH welcomes the opportunity to submit a response to the Public Petitions Committee’s inquiry into mental health support for young people in Scotland. We recognise that this inquiry has been launched as a result of the discussions that took place regarding Annette McKenzie’s petition (PE1627/D) on consent for mental health treatment for people under the age of 18. SAMH responded to this petition and our submission can be viewed here.

In May 2017, SAMH launched its Going To Be campaign, which seeks to review, refocus and invest in early intervention services for children and young people. Following this SAMH and ISD Scotland were commissioned by the Scottish Government to undertake an audit of rejected referrals to Child and Adolescent Mental Health Services (CAMHS). SAMH spoke to over 360 people, including young people, families and referrers, to find out about their experience of rejected referrals.

The substantive evidence gathered by listening to people's lived experience, resulted in 29 recommendations, all of which were accepted by the Scottish Government. Moreover, the Government announced a CAMHS Taskforce to take forward the proposed changes. The Taskforce, which SAMH is a member of, is being backed by £5 million of investment and chaired by Dr Dame Denise Coia.

Alongside the Scottish Government and Young Scot, SAMH is working in partnership with the Youth Commission on mental health. The Youth Commission is a group of 22 young people who have been recruited to improve mental health services by leading a study, drawing on their own and others’ experiences. The Commission will report back to the Scottish Government and make recommendations for change.

The need for early intervention

The onset of mental health illness and disorders peak in adolescence and early adulthood, with 50% of mental health problems starting by age 14\(^1\) and 75% by age 24.\(^2\) This is why it

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\(^1\) Kim-Cohen et al., 2003; Kessler et al., 2005
\(^2\) Universities UK, Minding Our Future, May 2018
is so important that we see increased investment in early intervention and prevention services for mental health.

We know that young people want to receive more information about mental health, including positive information about good mental wellbeing. Moreover, young people in Scotland have indicated that they would like to see: mental health integrated into classes; age specific mental health services; and early intervention services readily available in schools (SYP, 2016).

Most children will never come into contact with specialist mental health services, yet all children have mental health. Diagnosis of a mental health problem should not be the only mechanism to trigger support, but it’s often at that late stage when interventions take place. This is not good enough; supporting the well-being of our young people must be a priority.

**Existing services**

In Scotland, CAMHS is delivered through a four-tiered model of care, from early intervention and prevention through to more specialist support. Tier 1 consists of contact with practitioners working in universal services, including teachers and GPs; tier two is specialist CAMHS support in primary care and the community; tier 3 is multidisciplinary teams working in the community or outpatient services; and tier 4 is multidisciplinary teams, with treatment overseen by a consultant.4

The final report on the audit of rejected referrals to CAMHS recommends that the Scottish Government consider if the tiered model continues to be fit for purpose, as it can be confusing for children, young people and their families.5

Nonetheless, there are more young people than ever before seeking help for their mental health. One reason for this could be that stigma is reducing and that the younger generations are finding it easier to seek support when it’s needed. But this also means that there is a greater demand on services.

There has continued to be a gradual increase in waiting times for children and young people seeking help through CAMHS. In the quarter ending September 2018, over 30% of children and young people were waiting over the statutory 18 week period;6 this is in comparison to around 26% in the same quarter in 2017.7

When you consider that there is a 12 week treatment time guarantee for most health problems,8 it is unacceptable that a child or young person should be expected to wait up to 18 weeks before getting an appointment for their mental health. We also know that there is

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4 Audit Scotland, *Children and young people’s mental health*, Sep 2018
5 Scottish Government, *Rejected Referrals to CAMHS: Audit*, June 2018
6 ISD Scotland, *Child and Adolescent Mental Health Services in Scotland: Waiting Times, Service Demand, and Workforce*, Dec 2018
7 ISD Scotland, *Child and Adolescent Mental Health Services in Scotland: Waiting Times, Service Demand, and Workforce*, Dec 2017
8 Scottish Government, *HEAT Standard*
a belief amongst young people that they will not receive support from CAMHS unless they are at immediate risk of harm (Scottish Government, June 2018).

Indeed, around 20% of children and young people who seek help from CAMHS have their referral rejected (Scottish Government, June 2018). In the quarter ending September 2018, we know that 1,701 children and young people did not receive help from CAMHS, despite receiving a referral (ISD Scotland, Dec 2018). We also know that: around 58% of children and young people are not provided with signposting following a rejection; when signposting is provided it is often unhelpful; and around 30% of children and young people don’t do anything to seek support after a rejected referral (Scottish Government, June 2018).

The fact that some people are not seeking support after a rejected referral is not surprising, given that only a quarter of young people know where to go to find support for their mental health (SYP, 2016). Young people also continue to face a range of barriers in talking openly about their mental health. Research has shown that, despite a reduction in stigma and discrimination, young people still have concerns about being judged, a lack of confidentiality and not being taken seriously (SYP, 2016).9

What needs to change

Some changes are already taking place as a result of the Mental Health Strategy, which made a number of commitments relating directly to young people’s mental health. One of these commitments was to complete an audit of rejected referrals to CAMHS, which SAMH and ISD Scotland undertook.

One of the recommendations in the final audit report was to review and, if necessary, restructure the current system to ensure that services are available for children and young people who do not meet the eligibility criteria for CAMHS support (Scottish Government, June 2018). This recommendation was followed by an announcement in the Programme for Government to establish services for community mental wellbeing for 5 to 24 year olds and their parents / carers.10 This announcement is welcomed as it recognises that all children and young people have mental health, even if they do not require specialist support.

Furthermore, the Scottish Government has committed to £60 million of investment for 350 school counsellors and 250 school nurses (Scottish Government, Sep 2018). SAMH has been calling for the provision of counselling services for all of Scotland’s schools. As such, we would now like to see the Government act on its commitment through the delivery of a counselling service in every school, with equity of access across Scotland.

However, there is still a lot more to do, if we want to ensure that all of Scotland’s children and young people have access to mental health support when they need it. This is why SAMH is also calling for:

- A national training programme on mental health for all school staff.

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9 Griesbach & Associates; Survey of young people on the topic of mental health, stigma & discrimination; 2015
10 Scottish Government, Programme for Government 2018-2019, Sep 2018
The extension of CAMHS services to age 25.

Over 3,000 teachers responded to a SAMH survey about mental health, which showed that 66% of respondents do not feel they have received sufficient training in mental health to do their job properly.\(^\text{11}\) Moreover, only one third of respondents said that their school had an effective way of responding to pupils experiencing a mental health problem (SAMH, 2017).

Whilst the Scottish Government’s commitment to offer mental health first aid training for teachers to all local authorities is welcomed, it does not go far enough. We need to ensure that all school staff are equipped to help pupils find the most appropriate support. This is why we are asking for a national training programme for all school staff that is delivered consistently across Scotland.

We also know that young people in Scotland find the transition from CAMHS to adult services difficult (SYP, 2016), and that transitional support is patchy.\(^\text{12}\) The Scottish Government has already committed to considering SAMH’s ask to extend CAMHS to age 25.\(^\text{13}\) We would now like to see the Government act on this commitment, building on the work done by the Scottish Youth Parliament to improve the transitions process.\(^\text{14}\)

There should also be a long-term commitment from Government to develop a specialist mental health service for 16 to 25 years olds. This has already been suggested by the Scottish Parliament’s Health Committee,\(^\text{15}\) with other such services already existing elsewhere in the UK.\(^\text{16}\)

\(^{11}\) SAMH, Going To Be... Well Trained, August 2017

\(^{12}\) Paul et al., Transition to adult services for young people with mental health needs, 2014

\(^{13}\) Scottish Government, Programme for Government 2017-2018, Sep 2017

\(^{14}\) NHS Inform, Transition Care Plans: moving from CAMHS to adult mental health services

\(^{15}\) Scottish Parliament, Inquiry into Child and Adolescent Mental Health and Wellbeing, 2009

\(^{16}\) NHS Camden and Islington Foundation Trust, 18-24 Transitions Service