Introduction and background

The government recognises that, although children and young people’s mental health has recently become more of a priority and there are pockets of excellent practice, the support and provision offered by schools, colleges and the NHS varies considerably. In some areas children and young people can wait too long to receive the support which they need.

This Green Paper sets out proposals which represent a shift in how young people will be supported with their mental health. It builds on the vision set out in the 2015 *Future in Mind* report.

Key points

The prevalence and impact of mental health disorders

- Those who experience mental health issues in childhood face more challenges in their adult lives, particularly if these issues continue into adulthood.
- Half of all mental health issues are established before the age of 14. This means that early intervention can prevent the escalation of problems.
- The prevalence of mental health disorders varies by age. Around 8 per cent of 5-10 year-olds have a diagnosable mental health disorder, compared to around 12 per cent of 11-15 year-olds. Boys are more susceptible, with 11 per cent suffering from a mental health disorder compared to 8 per cent of girls. Other groups who are more vulnerable to mental health disorders include LGBT young people, looked-after young people and those who are NEET (not in education, employment or training).
- The impact of mental health problems on the lives of children and young people is significant. Those with such problems have: more time off school; a greater likelihood of being on welfare as adults; and a greater likelihood of engaging in a criminal act. They are 20 times more likely to end up in prison and 4 times more likely to become dependent on drugs than those in the general population.
- Mental health disorders incur wide-reaching societal costs. For example, conduct disorder in children leads on to adulthood antisocial personality disorder in about 50 per cent of cases, and is associated with a wide range of adverse long-term outcomes, particularly delinquency and criminality.

Current provision

- The Care Quality Commission carried out the first phase of a thematic review of Children and Young People’s Mental Health Services in October 2017. Findings show that 8 out of 10 inpatient wards for children and young people with mental health disorders were rated good or outstanding by the regulator. Three out of 4 community mental health services were rated good or outstanding.
- However, quality was found to be variable. At times, the different organisations supporting young people are insufficiently joined up.
- Treatment waiting times can vary considerably in different areas, from around four weeks from referral to treatment to up to 100 weeks. Latest data shows that in 2016-17 the average wait for treatment in a children and young people’s mental health service was 12 weeks.

Evidence informing the Green Paper

- The proposals made in the Green Paper have drawn on evidence from a range of sources including the Health and Education Committee’s recent inquiry report; and current and emerging guidance from the National Institute for Health and Care Excellence.
- In order to gather additional evidence, the government recently commissioned a systematic review of the evidence relating to the mental health of children and young people. The key findings of the review are outlined below.
- Evidence-based treatments for mild to moderate levels of mental health disorder can be delivered by trained non-clinical staff with adequate supervision, leading to outcomes comparable to those of trained therapists.
- Schools have an important role both in identifying mental health issues at an early stage, and in helping to put in place support for pupils experiencing problems. The school environment is well suited to supporting children’s mental health as it is non-stigmatising, making interventions more acceptable to children and young people, and their parents.
- The coordination of interventions and the development of pathways between children and young people’s mental health services and school is particularly important for children and young people with more severe problems and those where medication is involved.
- There is limited evidence for the long-term effectiveness of universal prevention approaches on mental health outcomes related to: suicide and self-harm; depression and anxiety; and alcohol and drug misuse at 12 months. However, the review did find that some general mental health promotion approaches such as mentoring showed promise.
The core Green Paper proposals

- The government aims to incentivise every school and college to identify and train a Designated Senior Lead for Mental Health, building on existing practice in many parts of the country and the lessons from successful pilots. The role of such a lead will include: oversight of the whole school approach to mental health and wellbeing; and supporting the identification of at-risk children and children exhibiting signs of mental ill health.
- Funding will be provided to develop leads and their skills. There will also be funding for the development of training packages for potential leads. The government will aim to cover the costs of a significant training programme and provide up to £15-20 million each year from 2019 until all schools and colleges have had chance to train a lead.
- The government proposes establishing new Mental Health Support Teams, supervised by NHS children and young people’s mental health staff and linked to groups of schools and colleges. These teams will work with the Designated Senior Leads for Mental Health in schools and colleges, and provide new capacity for addressing the needs of children with mild to moderate mental health issues. They will also provide the link with more specialist NHS mental health services so that children can more swiftly access help they need.
- The government will start preparing for the rollout of the new Mental Health Support Teams from 2018. Initial trailblazer areas will be identified and the first group of trainees to staff the new teams will be recruited in these areas. The first wave of training will begin in September 2018 and trailblazers would begin delivering in 2019.
- As the new Mental Health Support Teams are rolled out, the NHS will pilot implementing reduced waiting times for access to NHS-funded children and young people’s mental health services in some of the trailblazers. The aim will be that children and young people in those areas will be able to access NHS-funded services within four weeks.
- Currently, the Department for Education’s Mental Health and Behaviour guidance sets out detailed advice on what to look for in terms of underlying mental health issues and on how to respond. In response to Tom Bennett’s 2017 ‘Creating a Culture’ report on how schools can promote good behaviour, the guidance will be updated. It will reflect key messages about the importance of setting clear routines and expectations for the school as a whole – as well as the impact of trauma, attachment issues or post-traumatic stress experience on individual children’s behaviour.
- Training initiatives such as the Youth Mental Health First Aid training programme are already ensuring that more staff can identify and support young people with mental health issues. The government is committed to building on existing training programmes so that a member of staff in every primary and secondary school in England receives mental health awareness training.
- A framework of content for initial teacher training was published by the Department for Education for the first time in July 2016. It includes detail on how courses can meet the teacher standards, including placing an emphasis on the importance of emotional development, such as attachment issues and mental health, on pupils’ performance. There is evidence that the framework is influencing training provision coverage and we know that a number of providers have started to include training on mental health and wellbeing in their provision, in the course of the first year of the changes. The government will support the teacher training sector to develop and share this practice by including a specific focus on mental health in future rounds of our school improvement programmes.
- The government has already funded guidance and lesson plans for teaching about mental health in Personal, Social, Health and Economic Education (PSHE) through the years of compulsory education (key stages 1-4). Planned developments to PHSE and relationship education will include a specific focus on how mental health and wellbeing can support healthy relationships and how best to secure good quality teaching for all pupils through PSHE.
- The government intends to set up a new national strategic partnership with key stakeholders focused on improving the mental health of 10-25 year olds by encouraging more coordinated action, experimentation and robust evaluation. It is proposed that this partnership could initially focus on higher education.
- The government will commission further research into children’s mental health, including into: he best ways of supporting vulnerable families; the effectiveness of peer support approaches. In addition, Public Health England will convene a special interest group bringing together academics, practitioners and professionals, to identify key prevention evidence and its relevance to practice, and to highlight gaps.
- As part of wider work on the Internet Safety Strategy Green Paper the Department for Digital, Culture, Media and Sport, along with the Department of Health, will convene a working group of social media and digital sector companies to explore what more they can do to help us keep children and young people safe online, in terms of the impact of the internet on their mental health and wellbeing. In addition, the Chief Medical Officer will produce a report on the impact that technology has on children and young people’s mental health.
- The government proposes the expansion and simplifying of the Myriad of Pathways to ensure vulnerable children and young people are identified and supported earlier. The government intends to provide the Office for National Statistics with data on children who have contacted mental health services, expected for publication in Spring 2018.