

How to... provide youth-friendly mental health and wellbeing services

**RIGHT
HERE**

Introduction

This 'How to' guide is one of a series of guides designed to bring together learning from the five-year Right Here programme initiated by Paul Hamlyn Foundation (PHF) and the Mental Health Foundation (MHF) to support the mental wellbeing of young people aged 16–25.

Each guide focuses on a particular theme arising from the programme's work across the UK and aims to provide practical pointers and suggestions to support the development of innovative and effective responses to the mental wellbeing of young people.

This particular guide is aimed at those delivering mental health and wellbeing services for young people aged 16–25. It has been written to help services address the specific needs of this age group and tackle some of the barriers which prevent them from accessing traditional mental health services.

Why this guide is needed

It is now understood that adolescence to early adulthood is the peak age of onset for mental ill-health and the period when there is a need for initial care.¹ Poor mental health is closely related to many other health and social concerns for young people, including educational achievements, employment, relationships and substance use.²

Treating poor mental health early improves chances of recovery and reduces the likelihood of severe and enduring illness and all its associated poor health and social problems extending further into adult life.³

Early intervention and support for young people with mental health problems is, therefore, an issue of considerable significance for the UK's society, both in terms of public health and social wellbeing.

Young people with mental health needs have a right to choice regarding the support they receive, but there remain a number of significant barriers which regularly prevent this from happening.

We outline some of these barriers below.

Child and Adolescent Mental Health Services

Child and Adolescent Mental Health Services (CAMHS) are generally able to support young people with mental health problems up to the age of between 16 and 19 years, depending on the service and individual circumstances. There are a few examples of CAMHS being offered up to the age of 21, particularly with young people leaving care, but these are currently rare.⁴

In 2011, the government launched the Children and Young People's IAPT (Improving Access to Psychological Therapies) programme, intended to improve existing CAMHS services. However, accessing support from CAMHS services remains problematic for many, causing the Health Select

Committee to launch an inquiry into the current state of CAMHS in 2014.⁵ Evidence given to the Inquiry suggests that need currently exceeds provision, and that, in order for young people to receive adequate support, CAMHS cannot be expected to provide for the whole solution.

More creative responses, which include primary care interventions, youth counselling services, online interventions, and programmes delivered by youth agencies and other voluntary sector providers, are therefore required.⁶

Transitions

Young people requiring ongoing support as they enter adulthood may, at some point, transition to adult services, a process which is often fraught with difficulties (see Box 1).

The Department of Health admits that the problem with transitioning has not been resolved and that many young people ‘fall off the cliff edge’ at age 18.⁷ This can result in young people disengaging with mental health services despite their continuing need.

Adult Mental Health Services

When young people do reach adult mental health services (AMHS), they often find that they are not ‘young person friendly’ or do not reflect the

specific needs of the 16–25 age group. Young people are typically expected to fit into adult services, rather than adult services being modelled to appropriately engage and support 16–25 year olds.

Furthermore, the fear of being stigmatised for having a mental health problem is also a major factor in young people’s decisions not to access help from mainstream, traditional services.⁹ These issues can mean that young people’s mental health needs often go unsupported. The Right Here programme developed a range of effective approaches to address the issues and barriers to mental health support for those aged 16–25.

This included working with young people, youth charities and mental health agencies across four sites in Brighton and Hove, Fermanagh, Newham, and Sheffield using a unique combination of youth participation and co-design, prevention, early intervention, resilience building and anti-stigma activities.

This guide builds on the experience of the Right Here programme in terms of developing appropriate mental health services for young people through CAMHS transitions and AMHS, in both the statutory and voluntary sectors. In this guide, we summarise some of the key points learnt from the Right Here experience which can point to the future direction of young people’s mental health services across the UK.

Some Common Transition Frustrations⁸

1

Not involving young people, in advance, in planning for their transition to adult services can cause anxiety and stress.

2

Higher thresholds for adult mental health services can mean that some young people may not be immediately eligible for ongoing support. They may then go on to meet such thresholds later if their unmet mental health needs have resulted in deteriorating health.

3

Waiting lists for adult services can result in gaps and pauses in support.

4

Bureaucratic referral and assessment processes can be off-putting and give a bad first impression of the services.

Reframing CAMHS

Poor mental health is closely related to many other complex and interdependent health and social concerns for young people, including educational achievements, employment, family, relationships and substance use.¹⁰ If we accept that young people aged 16–25 have their own distinct mental health needs, then the question which arises is how such needs are best addressed within the mental health service system.

One argument which has been made is that CAMHS support could be extended to the age of 25, with a specific component within it focusing on the 16–25 age range.

Young people involved in Right Here have indicated, quite clearly, that they do not want their mental health to be seen in isolation from other aspects of their life and would prefer a ‘one stop’ approach to addressing their needs.

Therefore, an extended CAMHS would need to consider how it could provide mental health support alongside help for other social or physical health issues young people may be facing.

Such changes in emphasis need to be lobbied for with commissioners, and we have produced a specific guide about how to commission better services for young people.¹¹

In the meantime, there is also much to be gained from ensuring that existing CAMHS services are doing their best for those in the upper age range of their client group.

“We need common sense and the human touch, not a person being clinical”

Young person, Right Here Brighton and Hove

The following suggestions from Right Here’s experience may help those involved in CAMHS to consider how to tailor their service for older young people:

- Consult with young people about what they want from the service and develop links with youth agencies that have experience in participation methods to support this work. Using the skills of an experienced participation worker can add great value to the process.
- Demonstrate that your services are youth-friendly by working towards ‘You’re Welcome’ standards or equivalent.
- Work with local voluntary sector providers and youth counselling services to examine what can be done to support early intervention to address needs before they get to the level where support is needed from CAMHS. Create clear referral routes and care pathways that bring CAMHS and young counselling services together. Voluntary sector services can often be less stigmatising and more engaging than traditional mainstream services and therefore need to be seen as a part of the whole support system.
- Recognise that involving young people in service design and delivery takes time. It cannot be rushed and short deadlines will constrict the process and inhibit proper dialogue.
- Don’t discharge young people until you are sure that safe and appropriate services have been set up for them to move on to.
- Consider developing a multi-skilled, multi-agency adolescent health team/hub that includes Tier 2 CAMHS professionals, substance misuse workers and sexual health workers.

Evaluating the CAMHS 'You're Welcome' standards

In Sheffield, STAMP (Right Here Sheffield's young people's participation group) has been involved in influencing local CAMHS services through their evaluation of the 'You're Welcome' standards used within the service. STAMP members visited CAMHS centres, explored their accessibility and interviewed staff about the services they provide.

Both STAMP and CAMHS workers found this to be a very positive experience; this reassured workers and highlighted the value of doing this kind of participation work.

Elsewhere within the CAMHS service, there is now a commitment to pursuing youth participation beyond the 'You're Welcome' evaluation measures. STAMP members have also been involved in the recruitment of new CAMHS workers and have recently been looking at IAPT provision in Sheffield.

"My message to others on doing this sort of work would be to use the local expertise that you have. Don't try and reinvent the wheel: you will spend a long time doing it and may not – probably won't – get users coming along. Doing this kind of youth consultation work can take a lot of effort and resources, and that's where we have failed before.

"We didn't have the expertise and we didn't have the resources. And the fact that the people conducting the evaluation have been separate from CAMHS as well has been great. The young people using our service were far more likely to give honest feedback, we felt."

CAMHS specialist, Sheffield

I'm picking up good transitions

'No health without mental health' states that the service transition from child and adolescent to adult services can be improved by planning early, listening to young people, providing appropriate and accessible information to young people, and focusing on outcomes and joint commissioning.¹² Addressing such a big agenda needs a coordinated approach and strategic commitment.

There are a number of steps identified through Right Here's experience which can help to bridge the gap between child and adult services:

- Talk to young adults about their past experiences of transitioning and ask young people about their hopes and fears for transitions yet to come. You may be surprised by what they have to say.
- Plan for transitions well in advance with young people. Resources like *Ready Steady Go*¹³ can help you to do this.
- Build relationships with services on the other side of the transition from you. Build connections between services in the voluntary and statutory sectors. Hold joint events together to give young people the opportunity to ask questions and share their concerns.
- For selected disorders (like Autism), consider redesigning pathways of care that cross age barriers and make a reality of the life course approach.
- Where possible, be flexible around the age of transitioning.
- If a young person doesn't meet adult service thresholds, take responsibility for ensuring the young person is linked into appropriate support elsewhere.
- If a young person disengages from AMHS, attempt to track and follow up with the young person rather than closing the case.

London Borough of Newham's Mental Health Transitions review

In 2013, Right Here Newham supported the input of young people into the London Borough of Newham's Mental Health Transitions review through facilitation of the Pathways to Wellbeing Event. This event involved approximately 30 young people, together with councillors, borough officers and other professionals. The review was tasked with looking at how transitions into adult services could be managed better within the borough.

Key recommendations from the review were as follows:

- All future mental health strategies created are to include clear reference to support for transition from adolescent to adult services.
- Greater integrated working should develop between CAMHS and AMHS.
- Greater emphasis should be placed on supporting young people with lower level needs.
- Better communication about what the borough can offer young people is required.
- Providers should offer young people waiting for formal services the opportunity to access other community-based resources that are provided by the third sector.
- Co-production should be the mainstay of all the work that is undertaken in this area.
- Further work should be undertaken to investigate better levels of support for GPs and A&E practitioners.

For the full report see: www.newham.gov.uk/Documents/Council%20and%20Democracy/ScrutinyMentalHealthIn-depthReview.pdf

The youth will out

It is not surprising that adult services with an older clientele offer little appeal to most young people. We would argue that there is a role for specialist, community-based mental health services which are targeted specifically at the 16–25 age group, and we would also strongly support work to influence commissioners to recognise the value of commissioning services for this age group. Voluntary sector organisations and youth counselling services have an important role to play in this regard.

However, there is also much that can be done within traditional AMHS to make them more engaging to young people and remove some of the access barriers to support.

If you are considering how you can make your service more accessible to young people, we have provided some ideas and suggestions, based on the experiences of the four Right Here projects.

“I went to a group last week... it was all older people. I felt really uncomfortable... a lot of young people won't go when it's all older people. Young people feel better with young people.”

Young person, Right Here Sheffield

Right Here's seven steps to youth friendliness

The following suggestions are based on Right Here's experience of what has worked in terms of developing and delivering youth-friendly mental health services:

STEP ONE

Promote, promote, promote

“I'm at university but I have never seen flyers or promotion about mental health services.”

Young person, Newham

It is quite possible that the young people you are targeting have never heard of your service or don't know what it can provide. It is worth spending time, therefore, thinking about how you promote and raise awareness of your service.

Do consider involving young people in the creation of promotional materials, as they will help tailor it to their peers. Find out where young people get their information from and think creatively about the use of social media to raise awareness.

To support access to services, Right Here partners, together with young people, are developing Find Get Give, an online, England-wide listings database for mental health services working with 16–25 year olds.

The website also offers young people the opportunity to feed back about their experiences with different mental health services.

See www.findgetgive.com

STEP TWO

“One of the things we did was especially for young people, because of the young audience, we did things like the Irish Youth Music Awards... what we did was express things about the music and that's really important because it gives you that chance, especially with mental health issues, to talk about [mental health].”

Young person, Fermanagh

Focus on activities rather than services

We have found that young people are often drawn to activities rather than services, and particularly to activities that relate to their own personal interests and hobbies.

At Right Here, we were able to try out new early intervention approaches such as rock-climbing, fishing, non-contact boxing and walking groups, all with built-in mental health promotion.

We have found a great synergy exists between activities which promote physical exercise and the promotion of positive mental health and wellbeing.

Fortunately, there is growing evidence that supports these types of approaches for young people¹⁴ and we would strongly encourage others to use this evidence as a launch pad to think more creatively about how to provide mental health support for those aged 16–25.



STEP THREE

Simplify your referral processes...

“We are thinking about how the specialist provision of CAMHS and IAPT, which reaches a very small proportion of young people overall, can be better linked to early interventions for young people. We are beginning to develop clearer pathways between services.”

Right Here worker,
Sheffield

Convoluting referral processes and long waiting times are not ideal for anyone, but particularly not for young people whose life circumstances can change rapidly. Think about how you can build relationships with services to streamline referral systems and speed up access to support.

To speed up access to local support, Right Here Brighton and Hove launched a Counselling Fast Track service. Right Here worked to develop a referral protocol with an existing young people’s counselling service already established at Sussex Central YMCA. Young people who were involved with Right Here as volunteers or participants had a quick route to counselling assessments and regular appointments.

The service aimed to give young people the help they need early on and to help them continue to benefit from the other activities the project had on offer.

STEP FOUR

...and then simplify your assessment processes too

“Young people are telling us very clearly that sitting them down, and doing a long intrusive assessment with them at their first meeting just doesn’t work and will drive them away.”

Sheffield IAPT service

If your first contact with a young person involves a protracted assessment process, they may not see what the service can offer them.

A welcoming and low-key start may be more effective in ensuring service uptake than filling in paperwork.

STEP FIVE

Don’t be constrained by traditional healthcare settings

“If you’re at the reception desk and you need to pick up something, a couple of times at my surgery they’ve said my problem out loud and it’s right in front of everyone.”

Young person,
Brighton and Hove

There can be a stigma associated with community mental health clinics and centres which may deter young people from taking that first step through the door. More general medical environments can also be daunting and unwelcoming to young people. Worries about confidentiality can also be a concern.

There is definitely scope to be more creative about where mental health support is located, particularly if you are looking to engage with excluded young people.

In Brighton, Tier 2 community CAMHS offer assessments and appointments in Sussex Central YMCA’s Youth Advice Centre, a young people’s one-stop shop for multiple services, based in a city centre, which is a youth-friendly, non-clinical space.

See www.sussexcentralymca.org.uk/node/246 for more information.

MAC-UK’s ‘Integrate’ model takes mental health professionals out of the clinic and onto the streets to work with excluded young people where and when they need it. This can be anywhere, for example: on a bus, in a stairwell, or whilst waiting at court.

See www.mac-uk.org for more information.

STEP SIX

Focus on sustainable, supportive relationships

“It was just such a slow process to build a therapeutic relationship... [and] gain his trust.”

Right Here worker,
Fermanagh

Being asked to repeatedly tell your story to different professionals can be disheartening and reduce the therapeutic impact of the support given.

One of the most significant things that young people have told us makes a difference to them is having a consistent, supportive listening ear.

This does not necessarily need to be a mental health professional, and a number of Right Here projects have explored the potential for youth workers to provide the consistent, supportive role in young people's support structures.

Peer support can also provide young people with a powerful opportunity to share with others who have lived through similar experiences, which can, in turn, help to reduce isolation and the stigma associated with mental health problems.

Our guide *‘How to... promote mental wellbeing in youth work practice’* describes some ways in which youth workers can develop and maintain supportive relationships with young people.

<http://www.mentalhealth.org.uk/publications/mental-wellbeing-in-youth-work-practice/>

STEP SEVEN

Involve young people in service design and delivery

“The young people have given us a bit of oomph, actually. They have given it energy. I think that energised some others in commissioning and provision to be a bit more daring and get things moving a bit more. I think young people have said ‘This is not good enough’, and we’ve been able to listen.”

Right Here partner,
Sheffield

The experience of Right Here has shown that involving young people in service design, delivery and evaluation can result in a whole raft of benefits including the following:

- Services which are more acceptable to young people, leading to greater service uptake.
- Services which use young people themselves in co-production and delivery.
- Improved mental health and wellbeing of young people using services.
- Greater levels of empowerment and engagement among those young people involved in services.
- Fewer stigmatising attitudes from professionals towards young people and their capabilities.
- Clear and more transparent decision-making processes.
- A group of committed and enthusiastic young people, some of whom will go on to train and move into this field of work themselves, thereby creating dynamic future professionals.

It may require some extra time and resources to support these changes to happen and to encourage meaningful participation to permeate through the whole service design process.

Our advice would be to take it gradually and persevere.

The following tips may also help you to make youth participation a reality:

- Use creative processes to generate ideas. See www.innovationlabs.org.uk for some inspiration.
- Recognise that young people may prefer to express their views to other young people. Consider commissioning young people to undertake research with their peers about their experiences of local services.
- Respect and listen to the views young people express, however challenging. Work with Healthwatch to ensure that young people can express their views through this route as well.
- Support contributions to the Find Get Give website as a way for young people to provide feedback about the services they have received. www.findgetgive.com



“One young person... talked about how she had counselling before, but had the realisation during the walk that there were usually bits of herself that she ‘left outside the door’ at counselling sessions and didn’t talk about... She attributed [this] to... being in a less formal or bounded environment than a consulting room. She saw this as a big positive to take to future counselling... to be able to bring more of her whole life ‘into the room’ when she was having counselling or getting support from someone.” Right Here Brighton and Hove evaluation

Walk and Talk, Right Here Brighton and Hove

Walk and Talk is aimed at people experiencing social anxiety and is composed of counselling and a group walk. The project takes place in stages once a cohort of young people has been recruited:

- Step one** An individual counselling session to talk about the walk and about anxiety.
- Step two** A group walk with the other young people, counsellors and the activities coordinator.
- Step three** An individual counselling session to reflect on the walk.
- Step four** A group debriefing with the counsellors, with the activities coordinator, again, present.

Success factors of Walk and Talk include:

- The combination of individual and group work – this allows the young person to share their anxieties privately before attempting to overcome them in a group setting.
- A flexible structure in terms of the length of walks, breaks and timings.
- A non-medical environment which supports natural discussion and peer support.

See right-here-brightonandhove.org.uk/walkandtalk/ for more information.

About Right Here

Right Here is a £6 million programme which is running from 2009 to 2014, and is jointly managed by PHF and the MHF. It aims to develop effective new approaches to supporting the mental health and wellbeing of young people in the UK aged 16–25. Right Here focuses on intervening early to help young people at risk of developing mental health problems and on tackling the stigma associated with mental health problems that often prevents young people from seeking help.

Right Here operates across four different projects in: Brighton and Hove, Fermanagh, Newham and Sheffield. Each project is led by a youth charity, working with other voluntary and statutory organisations. Young people's participation is fundamental to how all of the projects operate, as is working in partnership.

Young people work with youth workers and mental health professionals to design, commission and deliver activities, while Right Here's local delivery organisations work with public sector partners to increase the influence and impact of their work. The projects are intended to bring lasting benefits to the young people they work with, the lead organisations and their partners, and youth mental health provision as a whole.

Right Here is also a partner in the Innovation Labs initiative which is developing a range of new digital tools to support young people's mental health.

Right Here is being independently evaluated by the Tavistock Institute of Human Relations and the Institute for Voluntary Action Research (IVAR). The final evaluation report from IVAR will be published in the autumn of 2014. Paul Hamlyn Foundation and the Mental Health Foundation will use what has been learnt from these evaluations to influence practice more widely and make the case for policy changes, where appropriate.



Interim results from the independent evaluation of Right Here show that these activities have made a number of differences to the lives of young people. Participants have:

- Developed the confidence to consider and/or take up new opportunities.
- Acquired new skills and techniques for spotting and then handling changes in their emotions, especially the onset of feelings of anger and violence.
- Improved or made changes in their relationships with family members and their peers, including leaving violent or damaging relationships.
- Felt able to be themselves in groups, and forge relationships with others, sometimes for the first time. This helped combat isolation; it also helped develop a sense of security and identity.
- Come to realise that 'everyone has mental health' and grasped its relevance to themselves, as well as understanding that there is less difference between those who are 'well' and 'unwell' than they first thought.¹⁵

In December 2013, Right Here won the National Positive Practice Award for Mental Health and Primary Care.

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For further information about Right Here, including some of the resources developed through the projects, please visit www.right-here.org.uk

or contact info@mentalhealth.org.uk

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