



WAVE Trust comments on Green Paper: Transforming Children and Young People's Mental Health Provision

APPG: Conception to age 2: the first 1001 days
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Ministerial foreword

- This green paper sets out ambition for earlier intervention and prevention; boosted role played by schools and colleges; better, faster access to NHS services
- Government committed to ensuring children and young people (C&YP) and their families get support they need at right time
- Laid strong foundations through improving and expanding NHS mental health services for C&YP

Actions taken

1. Parity between physical and mental health
2. £1.4bn for C&YP's mental health over 5 years
3. By 2020/21, committed to:
 1. 1,700 new therapists and supervisors;
 2. additional training for 3,400 staff;
 3. 70,000 more C&YP obtaining mental health support.
4. Eating disorders: additional £30m funding; 70 new/enhanced Community Eating Disorder Teams
5. Waiting times for eating disorders, psychosis
6. Funding to test different crisis approaches to C&YP mental health in 8 areas
7. Local Transformation Plans for CYI mental health published

...prevention?

- Half all mental health conditions established before age 14
- Early intervention can prevent problems escalating
- Want to put schools and colleges at heart of early intervention efforts

3 key elements of the approach

1. Every school and college to identify a Designated Senior Lead for Mental Health
2. Funding for new Mental Health Support Teams, supervised by NHS C&YP mental health staff – managed jointly by schools, colleges & NHS
3. Trial 4 week waiting times

The evidence: mental health & ACEs (I)

- Links between mental ill-health and Adverse Childhood Experiences (ACEs) well established
- Links mental health needs and looked after children well established
- c. 45% of looked after children have diagnosable mental disorder (vs. 10% of all children)

The evidence: mental health & ACEs (2)

- C&YP with mental health problems:
 - More likely to have disrupted education / be excluded
 - More likely to experience problems in future employment
 - Future impact on welfare benefits, income, continuous employment
- 1/4 of boys in Young Offender Institutions reported emotional or mental health problems
- Research suggests young people with conduct disorder 20x more likely to end up in prison, 4x more likely to become dependent on drugs

The evidence: mental health & ACEs (3)

- Adults with mental health problems – other disadvantages:
 - Lower income in early adulthood / middle age
 - Lower probability of being in work in middle age
 - Increased risk of physical health problems incl. cardiovascular disease, gum disease, serious injury, nicotine dependency
 - Increased involvement in criminal justice system as victims and as perpetrators

The intergenerational effect

- Evidence highlights important role of family in successful interventions
- Children with mental health problems more likely to have parents with mental health problems
- Study: parents of children with an emotional disorder > 2x as likely to have emotional disorder themselves

Action underway (I)

- Record levels of investment
- New mental health waiting time standards
- Improving inpatient care and out of area placements
- Improving specialist services
- A better journey through mental health services, working in partnership

Action underway (2)

- Support for children in need
- Support for children with special educational needs and disabilities
- Better support for LGBT young people
- Better support for young offenders
- Improving data and tackling variation
- Supporting C&YP in schools and colleges

Wider Support Action

- Mental health awareness training
- Teacher training changes
- Every child – learn about mental wellbeing
- Local communities
- Support for young adults

Impact of ACEs on Children's Mental Health - I

- ADHD diagnosis in middle childhood
- Anxiety disorders
- Attempted suicide during childhood/adolescence and adulthood
- Behavioural problems
- Bipolar disorder
- Childhood autobiographical memory disturbance (CAMD)
- Chronic mental health problems
- Depression
- Dissociative amnesia
- Eating disorders
- Externalising and internalising behaviours
- Hallucinations
- High stress

Impact of ACEs on Children's Mental Health - 2

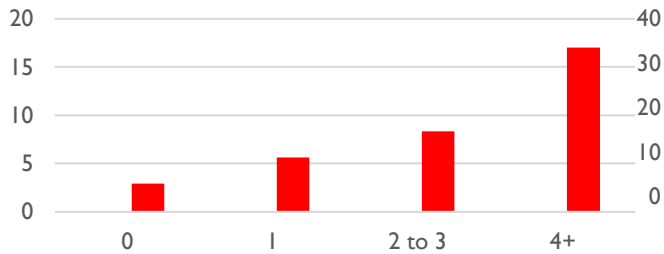
- Lifetime depressive disorders
- Mood-stabilising/bipolar medications
- Panic reactions, anxiety and hallucinations
- Personality disorders
- Poor psychiatric outcomes in adulthood
- Post-traumatic stress disorder
- Psychoses
- Rates of prescriptions
- Rates of psychotropic prescriptions
- Self-harm
- Suicide attempts
- Uncontrollable anger

Disorders emerge earlier in maltreated individuals, with greater severity, more comorbidity, and a less favourable response to treatment

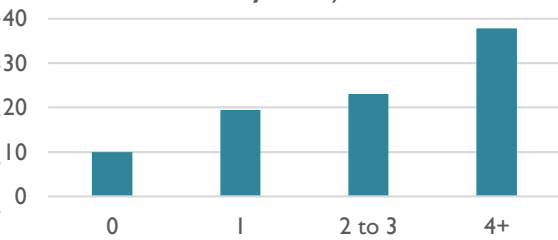
(Teicher and Samson, 2013)

Impact of ACEs (English ACE study)

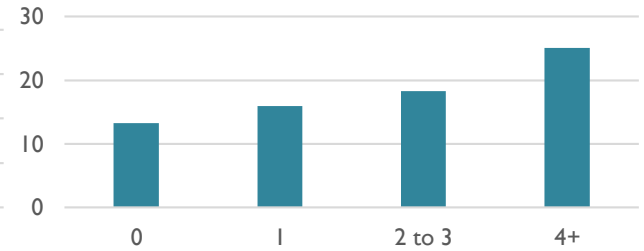
Unintended teenage pregnancy (<18 years)



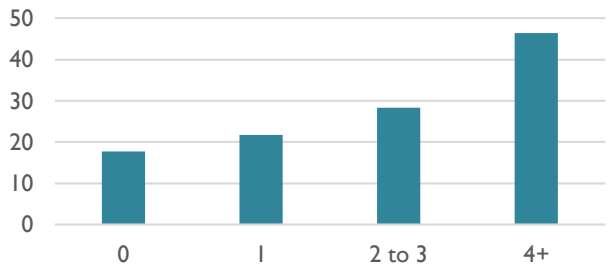
Early sexual initiation (<16 years)



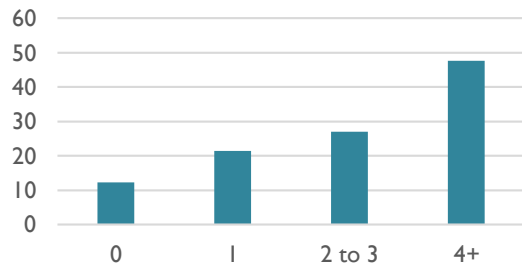
Poor diet (current)



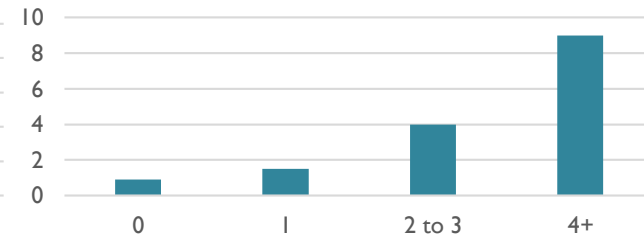
Smoking (current)



Cannabis use (lifetime)



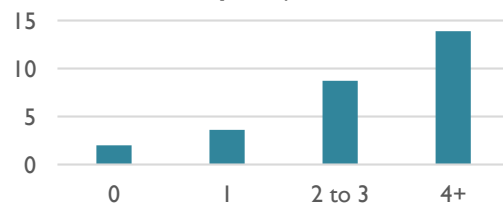
Heroin or crack cocaine use (lifetime)



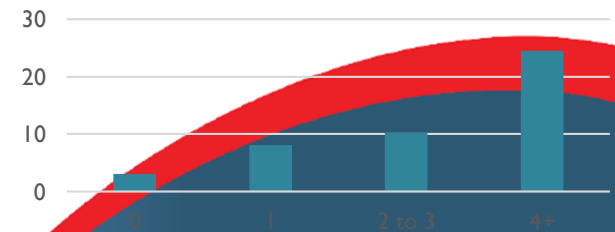
Violence victimization (past year)



Violence perpetration (past year)



Incarceration (lifetime)



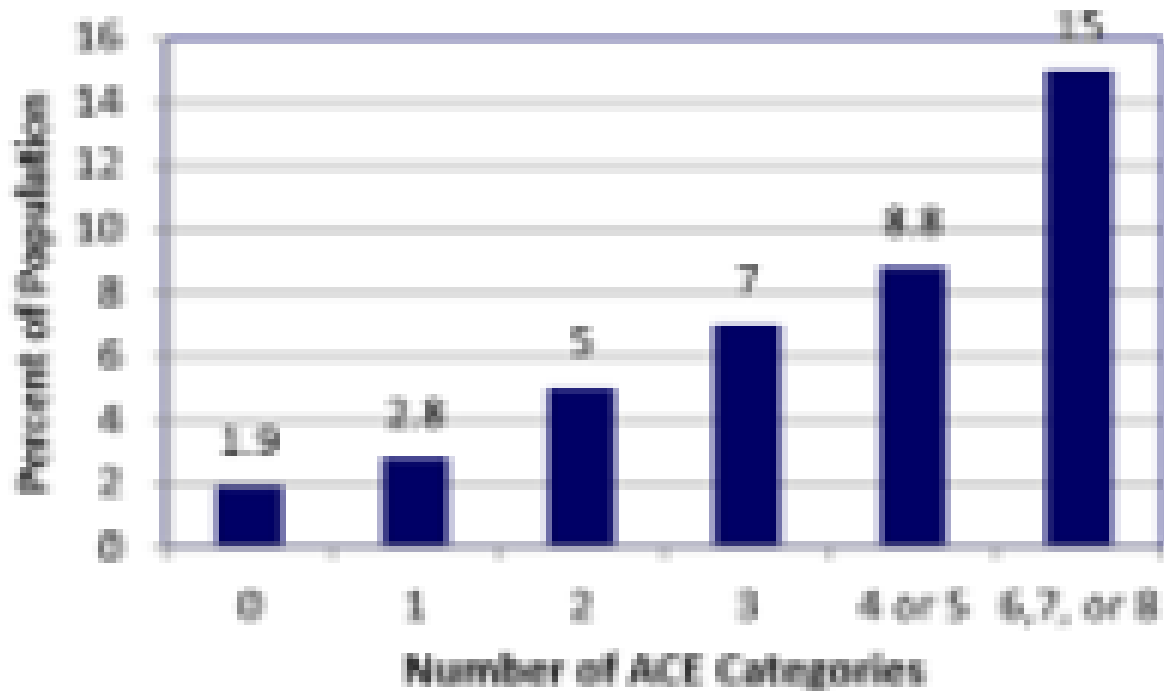
Impact of ACEs (US ACE studies)

Chronic Depression



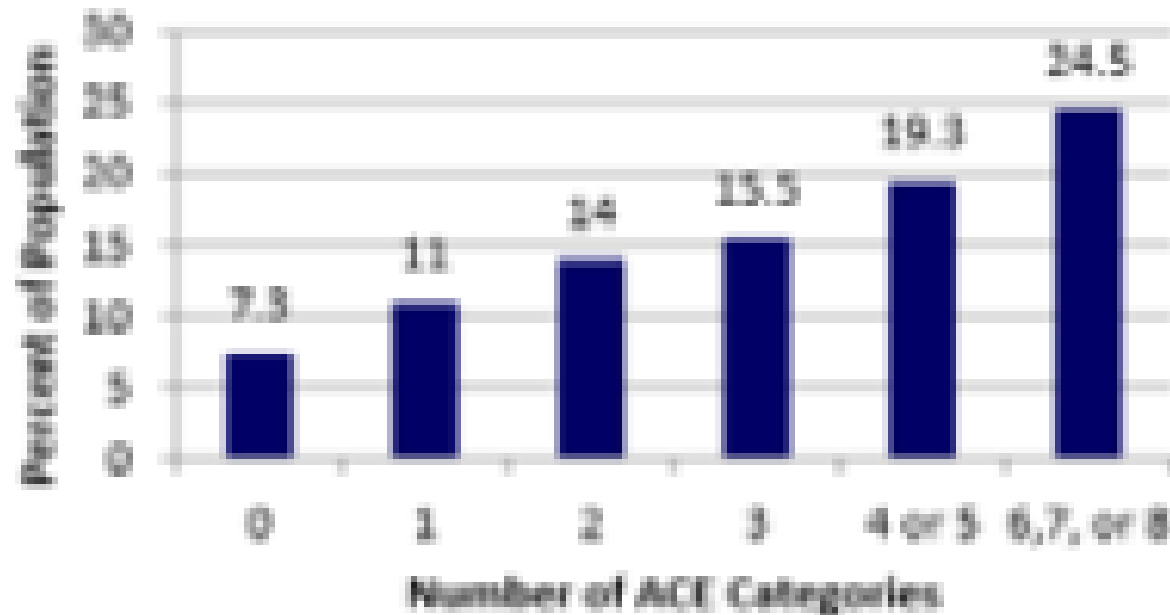
Impact of ACEs (US ACE studies)

Anxiety



Impact of ACEs (US ACE studies)

Treatment for Mental Health Condition



Word counts

Schools	239	Mother	3
College	84	Pregnant/pregnancy	2
Parent	50	Neglect	2
Prevent/prevention	28	Abuse (child abuse)	1
Teacher	20	Father	0
Domestic abuse	5	Infant	0
Baby	3	Toddler	0