



Public Health
England

Protecting and improving the nation's health

PHE Board Paper

Title of meeting	PHE Board
Date	Wednesday 25 November 2015
Sponsor	Kevin Fenton & Viv Bennett
Title of paper	Children and Young People's Emotional Health and Wellbeing

1. Purpose of the paper

- 1.1 The purpose of the paper is to provide background to the agreed theme on Emotional Health and Wellbeing for the Takeover Day PHE Board meeting.

2. Recommendation

- 2.1 The Board is asked to **NOTE**:
- PHE's work on young people's emotional health and wellbeing
 - The work PHE is currently doing with the Mental Health Taskforce
 - Actions PHE are taking to promote and protect young people's emotional health and wellbeing
 - Future actions PHE are taking to promote and protect young people's emotional health and wellbeing

3. Background

Takeover Day

- 3.1 As agreed at the PHE Board meeting of 15 July 2015, the November Board meeting will be 'taken over' by young people. '[Takeover Day](#)' is an annual day facilitated by the Office of the Children's Commissioner that encourages organisations and businesses to hear young people's views. Five Board members, plus Eustace de Sousa, Kevin Fenton and Viv Bennett will be shadowed at this meeting. The theme for the Board will be 'Emotional Health and Wellbeing', informed in part by the [Future in Mind](#) publication (March 2015), and the NHS Mental Health Taskforce report due to be published in November 2015. This paper summarises for the board the subject area in relation to PHE.

Epidemiology

- 3.2 The Chief Medical Officer's Annual Report [Our Children Deserve Better: Prevention Pays](#) reported on The British Child and Adolescent Mental Health Surveys which found that 1 in 10 children and young people under the age of 16 had a diagnosable mental disorder. Among younger children (5 to 10 years old), 10% of boys and 5% of girls had a mental health problem. The most common problems are conduct disorders, attention deficit hyperactivity disorder (ADHD), emotional disorders (anxiety and depression) and autism spectrum disorders.
- 3.3 In the 16–24-year-old age group 2.2% had experienced a depressive episode,

4.7% screened positive for post-traumatic stress disorder, 16.4% experienced anxiety disorder, 0.2% had a psychotic illness and 1.9% had a diagnosable personality disorder.

- 3.4 Suicide is the leading cause of death in young people. 6.2% of 16–24 year olds had attempted suicide and 8.9% had self-harmed in their lifetime. The suicide rate among 10–19 year olds is 2.20 per 100,000; it is higher in males (3.14 compared with 1.30 for females) and in older adolescents (4.04 among 15–19 year olds compared with 0.34 among 10–14 year olds).
- 3.5 The latest [Health Behaviour of School Age Children Report](#) (using the results from 2014 survey) found that 79% of boys and 69% of girls rated their life satisfaction as High, with 15 year old boys and girls reporting a decrease since 2010. 8% of young people said they had felt lonely in the last week, with girls' reports of loneliness showing a dramatic increase. 22% of 15 year olds reported that they had ever self-harmed. Nearly three times as many girls as boys reported that they had self-harmed; 11% of boys compared to 32% of girls. 17% of young people reported feeling pressured 'a lot' by schoolwork, with girls (21%) more likely than boys to report feeling pressured (13%).
- 3.6 Whilst not the subject of this paper, PHE is leading on giving every child the best start in life – evidence supports the importance of early attachment and the early years on emotional health and wellbeing. PHE are also focussing on ensuring young people have the skills they need to make healthy decisions and are aware of all the risks. We believe by building young people's life skills and supporting them to be resilient we can impact positively across a number of exploratory behaviours which can carry health risks for young people. PHE support a whole school/college approach to emotional health and wellbeing, including realisation of the links between good physical health and good mental health.

Future in Mind

- 3.7 PHE worked closely with the DH and NHS England taskforce on child mental health. The result of this taskforce was the publication [Future in Mind](#), which focussed actions on the following themes:
- a) Promoting resilience, prevention and early intervention
 - b) Improving access to effective support – a system without tiers
 - c) Care for the most vulnerable
 - d) Accountability and transparency
 - e) Developing the workforce
- The report sets out a clear national ambition in the form of key proposals to transform the design and delivery of a local offer of services for children and young people with mental health needs.
- 3.8 PHE is a member of the new National Children and Young People's Mental Health and Wellbeing Oversight Board. The Board has been set up to bring together key delivery organisations to enable collaboration on cross-cutting areas and lead a joint programme that will deliver the components needed to contribute to the *Future in Mind* vision. The Oversight Board will provide an opportunity for constructive challenge and cross-agency working on issues which require genuine partnership. The Board will hold members to account against the *Future in Mind* work plan.

Mental Health Taskforce

- 3.9 The Mental Health Taskforce has been established by the NHS Five Year Forward View Board to develop an independent report that sets out a strategic approach to improving mental health outcomes for children, young people and adults. Chaired by Paul Farmer (Chief Executive of [Mind](#)) and Vice Chair Jacqui Dyer (expert by experience and carer), the Taskforce is focused on actions that can be delivered by the health arm's length bodies (ALBs) of England. Taskforce membership includes representatives from the ALBs (including PHE), the third sector, think tanks and professional bodies working together to deliver cross-system commitment and alignment.
- 3.10 The final Taskforce report will underline the importance of mental health nationally and the once in a generation chance for change. To develop the approach, the Taskforce has been exploring: ways to tackle the prevention of mental health problems; variations in access to and quality of care and support across England; and outcomes for children, young people and adults who are and aren't able to access help. The views of people with mental health problems, their families and carers have been vital to the work. These have been gathered through consultation via digital platforms, questionnaires, listening sessions and community events. One in four of the public's responses identified prevention as a key priority for action by 2020 and beyond. In September the Mental Health Taskforce published its engagement report [The Five Year Forward View Mental Health Taskforce: public engagement findings](#).
- 3.11 PHE has been a keen champion the adoption of a strong emphasis on prevention. We have taken a leadership role in the development of evidence-based prevention (primary, secondary and tertiary). The overarching principles of our contributions to the work are increasing focus on prevention and reducing inequalities, and promoting mental health across the life course and at key stages in life – including childhood and adolescence.
- 4. PHE work on young people's emotional health and wellbeing**
- 4.1 PHE have published a number of documents supporting children and young people's emotional health and wellbeing:
- a) [Promoting children and young people's emotional health and wellbeing : a whole school approach](#)
 - b) [Improving young people's health and wellbeing: a framework for public health](#)
 - c) [Promoting emotional wellbeing and positive mental health of children and young people](#) – professional guidance for Health Visitors and school nurses
 - d) [Supporting the health and wellbeing of young carers](#) – professional guidance for Health Visitors and school nurses.
- 4.2 PHE have also developed the following digital products:
- a) PHE host a dedicated section on the ChiMat website for [Mental Health and Psychological Wellbeing](#), including tools and data
 - b) The [Rise Above](#) website provides information and support, taking an innovative young people-friendly approach
 - c) The Chief Nurse Directorate have developed [Digital Badges](#) in collaboration with [Makewav.es](#). These badges are an innovative approach to addressing key public health issues (including emotional health and wellbeing) with children and young people. School nurses, teachers and wider community services including youth workers can work together to promote health and wellbeing

through safe social media. Further badges are currently being developed

- d) The School and Public Health Nurses Association (SAPHNA) and Community Practitioners and Health Visitors Association (CPHVA) have developed with Health Education England (HEE) on our behalf an e-learning module on young people's emotional health, and additional health needs.

4.3 PHE support a wide range of cross Government working on young people's mental health and wellbeing. Currently PHE staff sit on the following Boards relating to young people's emotional wellbeing:

- a) Mental Health Taskforce
- b) DH National Children and Young People's Mental Health and Wellbeing Oversight Board
- c) Wellbeing and Mental Health in Schools Partnership (convened by the National Children's Bureau) and is contributing to some work the partnership is leading to develop tools to support schools in implementing evidence-based practice.

4.4 PHE provided public health support to this NHSE-led process (September-October 2015) in the assurance process of CAMHS Local Transformation Plans.

5. Future actions

- 5.1
 - a) PHE are working with DH and NHSE to refresh the You're Welcome accreditation process - this is an endorsement that a service is youth friendly and accessible for everyone, particularly those most at risk
 - b) PHE are also developing resources for local authorities which will support services to integrate around young people – offering a more holistic service response, by sharing examples of good and innovative practice.

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