

National Assembly for Wales

Children, Young People and Education Committee

CAM 58

Inquiry into Child and Adolescent Mental Health Services (CAMHS)

Evidence from : Children in Wales

Children in Wales is the national umbrella organisation in Wales, bringing organisations and individuals from all disciplines and sectors together. Its role is to make the United Nations Convention on the Rights of the Child a reality in Wales. Children in Wales fights for sustainable quality services for all children and young people, and special attention for children in need, as well as ensuring children and young people have a voice in issues that affect them.

Children in Wales has around 200 organisations in membership, including the major voluntary children's agencies, professional associations, local authorities and health bodies, as well as many smaller community groups. Children in Wales facilitates a variety of forums across Wales and works in partnership with the National Children's Bureau in England and Children in Scotland, and internationally is active in Eurochild and the International Forum for Child welfare.

Children in Wales welcomes this opportunity to contribute to The National Assembly for Wales' Children, Young People and Education Committee inquiry into CAMHS libraries in Wales. The organisation has repeatedly sent consistent messages through consultation responses and engagement in Welsh Government working groups about the importance of increasing understanding of the emotional well-being of children and young people and providing both access and sufficiency of resources. For too long CAMHS has been the poor relation of Mental Health services compared to those for adults. Our experience of being involved in trying to influence policy in this area is that children and young people are an add on to policies for adults.

1. The availability of early intervention for children and adolescents with mental health problems

Children in Wales would like to see a stronger emphasis focusing on early intervention and preventative work for children and young people, as childhood wellbeing is a strong indicator of adult wellbeing.

There has never been a more worrying time in the past decade in terms of availability of early intervention services for this group of children. The combination of reduced resources available in public services and the simultaneous increased pressures on children, young people and families because of financial strain, unemployment and family breakdown make it essential that the emotional well being of children and young people are prioritised. Demand is increasing whilst services are being cut back. In an ideal world, every child who has experienced abuse or neglect should have access to services that offer them early support.

Many of these early intervention services are being or could be provided by third sector organisations, but this sector is experiencing cuts when the statutory sector is focussing on its statutory duties. There has also been a reported cutting back in early intervention input previously provided by education and social services.

The question of what is a mental health issue probably needs re visiting as some CAMHS professionals believe that there has been a "mental healthisation" of what were previously regarded as part of life experience and may have been supported by services outside of CAMHS.

2. Access to community specialist CAMHS for children and adolescents with mental health problems

Reports from children's social services regularly reflect the view that no (or very little) service is available to the children most in need under the auspices of social services. A variety of reasons are given for this including non attendance at appointments, or inappropriate referrals clogging up the system.

There is also a view expressed by CAMHS professionals that that there is an increasing gulf between tier 1 services knowledge and capacity and secondary care so referrals to secondary care increase and may not necessarily be appropriate.

As already stated, there is a huge discrepancy of both policy recognition that children are different – they are not mini adults – and resource allocation between child and adult mental health services. The balance needs to be redressed and much more attention must be given to services designed that are relevant to children, young people and families, based in the community. The Social Services and Well-being (Wales) Bill will require individual assessments to be carried out and there needs to be a robust system in place that ensures that services are provided that address the emotional well-being and mental health needs identified. Care must be taken to ensure that adult services do not take the lion's share of budgets in this regard. Whenever budgets are constrained the inverse care law becomes more pronounced, and children such as those who are in contact with social services or are on the margins, have most difficulty accessing such care. Thus those children with most need have least access to preventive mental health interventions.

Finally we understand that Wales suffers from a much lower percentage of CAMHS professionals than the recommended levels in the UK.

3. the extent to which CAHMS are embedded within broader health and social care services

Children in Wales has long advocated for better integration of CAMHS into the wider child health service. The rationale for this is that many community health professionals are in fact managing the emotional health needs of children in their area. Many children also have a combination of physical and emotional issues. Recognition of the reality of what is happening on the ground should be reflected in service design.

The extent to which CAMHS is integrated into the broader health and social care services also varies considerably. Children in Wales has consistently advocated for a child centred holistic service encompassing health, social services and education. It is also important that there is better integration with the Youth Justice Services.

For example the school counselling service has been a successful early intervention initiative and yet in many areas it is managed by the education department and is not necessarily connected in to the CAMHS service, to school nursing or to social services.

4. *whether CAMHS is given sufficient priority, including allocation of resources*

As stated above, CAMHS has been the poor relation of the Mental Health services for many years. Considering the increasing workload, we are aware of the pressures on the current workforce and their endeavours to cope given the unequal challenge. There has also been increased demand because of the new and emerging issues for children and young people whose emotional well-being and mental health needs have increased over time. For instance there has been increased demand for services to address the increased challenging self harming adolescents (15-25).

5. *Whether there is significant regional variation in access to CAHMS across Wales*

There are clearly models of promising practice in parts of Wales but whilst we are not in possession of the full range we are aware anecdotally of areas where there is a dearth of availability to children in contact with social services.

6. *The effectiveness of the arrangements for those who need emergency services*

This is not our area of expertise, suffice it to say that there should be provision of emergency care when a child or young person needs it – moreover it is critical that services are child centred and responsive and are flexible enough to go to where the child is.

We would point to the imminent Public Health Wales Child Death Review report into suicides in Wales as one source of information from which to improve future services in all aspects of CAMHS.

7. *The extent to which the current provision of CAHMS is promoting safeguarding, children's rights, and the engagement of C&YP*

The focus on children and young people should always be viewed through the lens of children's rights. The outcomes should identify and recognise the impact on children and young people of, for example poverty, being a young carer or a looked after child, on emotional wellbeing and mental health. Whilst Welsh Government began to address trying to bring in the views of children and young people, it is regrettable that overall the adult policies drove the direction of travel. It is important

that there is some measure of how age appropriate information is developed and made available to children and young people in the places where they will be able to access it.

The outcomes in Welsh Government's 'Together for Mental Health' are aimed at all people (from cradle to grave) and make reference to the UNCRC or children's rights, but do not identify needs of children and young people in terms of age appropriate information, or in terms of Article 12 and the right to participate in decisions that affect them. The outcomes focus is on the process and does not reflect a child centred approach to service delivery.

Children in Wales has expressed the view that there should be a coherent national outcomes framework that is child centred that covers all services – as expressed through the 'well-being' part of the Social Services and Well-being (Wales) Bill. It would also be very useful to cross reference to the wellbeing indicators in the Children and Young People's Wellbeing Monitor.

8. Any other key issues identified by stakeholders

Children in Wales welcomes the arrangement to oversee the delivery of the Welsh Government strategy 'Together for Mental Health' and also welcomes the expressed commitment to workforce development, but the reality of the costs involved make us unsure that this commitment can be realised unless children are prioritised. We would also wish to see how the Welsh Government will work to ensure that all policy agendas contribute to the wellbeing and mental health agenda.

We also believe that consideration should be given to moving away from the solely medical model of CAMHS to a more holistic term such as emotional well-being and mental health so that there is more widespread ownership of the agenda.

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