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youth
promoting best practice with young people at risk

**Response to A Vision for a Comprehensive Child and
Adolescent Mental Health Service: Consultation Document
November 2005**

January 2006

Introduction

Include Youth is a regional NGO based in Northern Ireland which promotes best practice with young people in need or at risk. We achieve this through the development and promotion of resources, the provision of training, information and support of practitioners and organisations. We also undertake activities which attempt to influence public policy and public awareness locally and nationally.

Include Youth promotes the development of positive choices and opportunities for vulnerable and challenging young people whether in the community, residential care or custody. Include Youth promotes the use of community alternatives to care and custody for children and young people.

Amongst the young people at risk with whom, and on whose behalf Include Youth works are young people from socially disadvantaged areas, those with a learning disability, those with special needs, those who have been truanting, suspended or expelled from school, those from a care background, those who have had a negative parenting experience, young people who have committed or are at risk of committing crime, misusing drugs or alcohol, undertaking unsafe sexual behaviour or other harmful activities, or of being harmed themselves.

Include Youth runs project called Young Voices, which is a participation project for young people who have been involved or are at risk of becoming involved in the criminal justice system, with the aim of supporting these young people to become involved in decision-making processes which impact upon their lives. Currently the Young Voices project supports young people in two groups – one drawing its members from the Greater Belfast area, and the second based in the Juvenile Justice Centre, Bangor. In preparation for this written submission, and in partnership with the Northern Ireland Youth Forum, members of both Young Voices groups participated in a number of group work sessions, where they commented on their experience of living with mental health problems, and what, if any support and services they received, together with their views on the Vision of a Comprehensive Child and Adolescent Mental Health Service, as outlined in the consultation document.

Children in Conflict with the Law

Whilst Include Youth has a wealth of knowledge and experience of the many complex issues faced by children and young people in need or at risk, we have focused our current response to the CAMHS consultation on the particular mental health related issues facing children and young people in conflict with the law. Include Youth welcomes the opportunity to respond to this consultation document on a vision for CAMHS and congratulates the Committee on the breadth and depth of the research in this important report. A comprehensive vision for CAMHS is long over-due given the scale of the problem in Northern Ireland. Include Youth fully agrees with the statement in the consultation that the resources and staffing levels allocated to CAMHS do not reflect the level of the problem here. Many of the young people who participate in Include Youth's services have suffered as a result of the lack of effective CAMHS services.

It is important that the future of CAMHS is placed in the context of children's rights. The United Convention on the Rights of the Child guarantees children's right to the highest attainable standard of health and health care services. The Convention also requires that all under 18's be recognised as children (Art 1), that children do not experience discrimination in obtaining their rights (Art 2), that the child's best interests be a primary consideration (Art 3) and that children are enabled to participate in decisions that affect them. There are also special rights for children in conflict with the law. The Beijing Rules require that children in custody receive psychological, medical and physical care and also that 'drug addicts, violent and mentally ill young people' receive medical and psychological assistance.

Include Youth welcomes the recognition in the consultation document of the impact of poverty, deprivation, inequality and the conflict on children and young people's mental health and on service provision. Many of the young people involved in Include Youth grew up in areas experiencing deprivation and conflict.

'In some of the most deprived and fragmented sections of our society, rising levels of emotional and psychological stress in children and young people, manifesting as anxiety, depression, deliberate self-harm, and escalating

suicide rates are collateral damage following years of civil strife. (NICCY 2004, 89)

Clearly an effective CAMHS service must be set in the context of the particular circumstances of Northern Ireland and the fact that we are a society emerging from conflict which had enormous direct and indirect impact on children and young people, their families and the communities in which they live. Therefore the impact of violence and trans-generational trauma must not be underestimated.

Moreover, it will not be possible to effectively tackle the problems facing young people in Northern Ireland in terms of mental health, without also addressing deprivation and inequality. We welcome also the acknowledgement that there are not just two communities in Northern Ireland but that there is a growing diversity in society and that the needs of young people from ethnic minority communities and families of migrant workers must be met. We welcome the recommendations aimed at achieving this (46, 47 and 48). Include Youth agrees with the Committee that provision of a comprehensive CAMHS will require the integrated provision of services from a broad range of agencies. Statutory agencies in Northern Ireland have all too often failed to work together to meet young people's needs.

We welcome the principles set out on pages 12 and 13: that services for children be comprehensive, individualised, least restrictive, family focused, culturally diverse and inclusive and that there be effective case management, early intervention and smooth transition from adolescent to adult services.

In the context of Include Youth's current response to the CAMHS Consultation, which is focusing on the specific issues raised in respect of children in conflict with the law, we wish to draw attention to the particular problems relating to mental health services for children and young people in custody, which has been well-documented in recent research conducted on behalf of the Northern Ireland Commissioner for Children and Young People in 2004. Research also shows that a high proportion of older girls and women in custody have experienced childhood abuse (HMCIP 1997). The failure to meet the mental health needs of children who have experienced abuse and the subsequent road to custody for some is an indictment of our society.

The Human Rights Commission's report *In Our Care* (2002) found that many children coming into custody had experienced trauma and mental ill health but that there was a dearth of mental health provision for them. The lack of mental health support for children in custody was an important contributory factor in girls and boys as young as 15 being sent to prison service custody and in the case of girls to Maghaberry adult prison. The recent CJINI inspection of the Juvenile Justice Centre noted that 'research has consistently found that young people placed in custody are likely to have complex needs and are particularly vulnerable and may have mental health problems.' The inspection found that many children who come into custody had not accessed health care sufficiently in the community. Young people with 'particularly complex PTSD' were coming into custody. The inspectorate noted that there is still a 'bleak' outlook for young people with personality disorder particularly when they reach the age of 17. The CJI concluded that mental health provision in the centre had improved with the provision of a full time psychologist but that there was still a need to develop better links with CAMHS in the community to maintain continuity for young people (CJINI pp 60-61).

Over-representation of children coming from looked after care into custody remains a problem and Include Youth agrees that it is vital that CAMHS provision is targeted at children in care to prevent them coming into custody. It is well-established that mental ill-health in children can be avoided through preventative and early intervention in children's lives, which is sustained and long-term. The implications of not detecting and treating the problems are extremely significant for the individual young people concerned and often result in s/he becoming involved in risk-taking behaviours, which can result in placement breakdown, entry into residential care and/or custody. Failure to deal with these problems significantly reduces the child's life chances. The Committee's recommendations on CAMH services for children in LAC are welcome (recommendations 35, 36 and 37)

Recent research by the Human Rights Commission, *The Hurt Inside* (2005) found that under 18 year old girls with mental health needs were still being received into the adult women's prison in Maghaberry. The report documented the case of a 17 year old severely self-harming girl with diagnosed personality disorder who was being held in isolation in a bare punishment cell, in anti-suicide clothing with little human

contact (pp132-137). The Commission documents how the girl's treatment had been tested in a judicial review where a High Court judge ordered that she be removed from the punishment block to the prison hospital. A short time later the researchers found her once again in a punishment cell. In November 2004 an inquest into the death of 19 year old Annie Kelly in Maghaberry Prison was held in Belfast. Annie Kelly was also diagnosed as having personality disorder. The jury found that Annie should have been cared for in the community and not in prison and that her containment in a punishment cell for long periods in isolation had contributed to her death by hanging. More recently the Criminal Justice Inspectorate NI and the Prisons Inspectorate carried out an inspection of Ash House, Hydebank Wood and were highly critical of the way that children and young people with mental health needs were detained. The tragic cases referred to above are an indictment on our society and must never be allowed to happen again. Clearly an effective CAMHS service is crucial in this regard, and must operate within a holistic model which has prevention and early intervention at its core, to ensure that children with mental health issues are identified early, and are provided with services which are based on an assessment of need rather than availability of resources.

It is clear from the research and from Include Youth's experience that young people with mental health needs are ending up in custody largely as a result of their mental health problems. Neither JJC staff nor prison officers are equipped with the training necessary to deal with these issues. The narrow definition of mental illness in legislation in NI and by sections of the medical profession helps to exclude some of those requiring services, for example young people diagnosed as having personality disorders.

There are particular problems faced by children living in Northern Ireland with significant mental health problems, and we particularly welcome the Review's recommendation for the development of a regional forensic CAMH Service, which should have an important impact for children in care and custody (recommendation 45). There are currently no beds available in the whole of Northern Ireland for adolescents requiring a period of in-house treatment for serious mental health problems. This means that many children aged 14-17 are inappropriately placed on adult psychiatric wards and managed by staff with minimal or no training in

paediatrics or child and adolescent mental health, and not subject to child protection vetting procedures, raising huge problems both of quality of provision and child protection. In 2003-2004 children in NI occupied 2386 Bed Days in Adult psychiatric wards. (DHSSPS, *Number of Admissions of Young People to Adult Wards and Bed Days Occupied across the Region, 03-05*)

In addition, if a young person in custody displays markedly disturbed or psychotic behaviour there are not appropriate resources within CAMHS, residential care or youth justice systems to deal with this, which has resulted in the transfer of young people from custody and secure care to adult psychiatric facilities or specialist services outside Northern Ireland because their needs could not be met in this jurisdiction. At October 2004 17 young people were receiving specialist services outside NI. (DHSSPS, *Young People in Regional Care Centres/Youth Justice, October 2004*, 43). This is highly inappropriate and not only has significant resource implications, with the annual costs of individual Out of Area placements ranging from between £120,000 and £300,000, but is not in the best interests of the child, who is moved to unfamiliar cultural surroundings, and is far removed from any network of support.

Provision for young people leaving custody is poor so that even when young people do receive help for their mental health needs in custody they are largely unsupported when they return to the community. There is a great need for provision of specialist therapeutic services including houses staffed 24 hours a day by trained staff including those with experience of mental health issues. There is a need for greater secure or semi secure provision for young people diagnosed as having personality disorder.

Learning Disability

Include Youth would also like to raise the issue of children and young people with learning disabilities in conflict with the law and in custody. There has been no published research on the extent of learning disabilities among children in custody. Anecdotal evidence and research from other jurisdictions suggests that the level is likely to be high in comparison to the extent of learning disability in the general population. Include Youth's experience with often the most disadvantaged young people leads us to believe that many with mild to moderate learning disability are

undiagnosed and therefore not properly addressed due to the attention given to other factors such as family conflict or breakdown.

Moreover, Include Youth has concerns with regards to the level of expertise and services for children and young people with autistic spectrum disorder particularly Aspergers Syndrome. It is our experience that there are insufficient resources for or knowledge of how to meet the needs of such young people and their families.

Although the consultation document contains some information on children in conflict with the law and juvenile justice, Include Youth recommends more research into this area including research on young people's experience.

The Committee is right to note the problems facing non-statutory organisations working in the field. NGOs play a vital role in supporting marginalized young people including those involved in alcohol and substance misuse and those who are self-harming or suicidal. It is vital that the NGOs providing front line services are well resourced and are not left in a precarious situation due to funding crises. The recommendation that appropriate voluntary sector agencies be included as full partners when developing CAMH services is particularly welcome (recommendation 51).

Include Youth broadly welcomes the report's recommendations including those aimed at promoting more research into specific aspects of mental health; greater training for those working with young people; more integrated thinking; early intervention; outreach services; more funding for CAMHS services and prioritisation of CAMHS; more child-friendly services and greater emphasis on regional services.

In the context of Include Youth's focus on children in conflict with the law we especially welcome the recommendation that specialist CAMH services should develop close working relationships and care pathways with youth justice teams (recommendation 44) as well as incorporation of prevention and treatment strategies for alcohol and substance misuse with CAMH services providing quality care (recommendation 38). Development of a regional forensic CAMH Service should have an important impact for children in care and custody (recommendation 45), mentioned earlier in this response.

In addition to the crucial recommendations already made, Include Youth suggests that the Committee look further at the issues relating to children and young people in custody and leaving custody raised above and come up with specific recommendations to address their needs.

Conclusion

Include Youth welcomes the opportunity to be involved in the Review of Mental Health and Learning Disability (Northern Ireland) Vision of a Comprehensive Child and Adolescent Mental Health Service. We hope that our comments have been constructive and useful to the Review Team and are more than happy to meet with you to discuss anything in this response. In particular our Young Voices project would be delighted to engage directly with the Review Team should you wish to speak directly to young people in conflict with the law as you take forward the proposals contained within the current consultation. We wish to be kept fully informed of progress in the development of a Vision of a Comprehensive CAMHS, and look forward to the issues raised and recommendations made in this response being addressed and taken forward.

