

National Youth Mental Health Task Force Report 2017



Minister's Foreword

Ireland is a country with a growing reputation for our commitment to improving mental health for all. There have been many achievements in the ten years since the Vision for Change Mental Health Policy was published and indeed a review of the policy is already underway.

It is acknowledged that more work is required and one of the key priorities for mental health is the provision of additional supports for children and young people. The National Youth Mental Health Task Force was established because youth mental health was a key priority recognised by the Programme for Partnership Government in 2016.

My colleague and predecessor Minister Helen McEntee TD chaired the first Task Force Committee in September 2016 and over a nine month period ensured that the work of the Task Force was enthusiastically driven. When I was appointed as Minister of State with responsibility for Mental Health and Older People, I continued with this commitment because I am very much aware of, and agree with the need to, improve youth mental health services nationally.

I am grateful to the members of the Youth Mental Health Task Force who provided expert advice and professional input. The Task Force worked diligently to identify key areas of additional support for children and young people. I believe that the final recommendations, if implemented, will augment and strengthen current services will also enhance better coordination and standardisation of training nationally, and support additional prevention and early intervention initiatives.

I endorse the recommendations contained in this document as they complement the priorities identified in A Vision for Change our mental health policy and the Connecting for Life suicide reduction strategy. The recommendations apply to all those between the ages of 0-25 and the suggested actions advocate universal, standardised approaches to improving Mental Health for all young people.

I am particularly grateful to the young people who contributed to the consultation process. The voice of young people is very important and I am so impressed with the enthusiasm and energy that primary school, secondary school and Higher education representatives were in a position to provide. I also acknowledge the input received from adult stakeholders who represented clinical services, statutory partners, the NGO sector and service users who contributed to the consultation process.

Minister's Foreword

I acknowledge that there is much more to do in the area of mental health and our Government is proactive in this regard. Notwithstanding the considerable investments made to date to improve and develop services to address the impacts of mental ill health and to emphasise the importance of mental well-being for young people nationally; the needs of our young people remain a priority.



The recommendations contained in this document will have a positive impact and provide children, young people and their families and / or carers with better outcomes as they engage with mental health services in Ireland.

**Minister of State with special responsibility
for Mental Health and Older People, Jim Daly TD**

The National Youth Mental Health Task Force



“The Task Force was designed to incorporate a range of diverse perspectives...”

The National Youth Mental Health Task Force was established in response to an undertaking in the Programme for Partnership Government to provide national leadership in the field of youth mental health and to enhance how the public, private, voluntary and community sectors work together to improve the mental health and wellbeing of young people.

The Task Force was sensitive to youth mental health recommendations contained within existing Mental Health and Suicide Prevention strategies (Vision for Change and Connecting for Life) and wished to consider additional youth-focused supports to broaden mental health service provision in Ireland.

The Task Force was designed to incorporate a range of diverse perspectives including representatives from health, education, local government and non-governmental organisations as well as sporting organisations and the private sector. The Task Force endeavoured to keep a vision of the young person both as a unique individual but also as a young person embedded within his or her family, school, college, community and wider society. The view of the Taskforce was that youth mental health is a multi-faceted issue that calls for a broad perspective rather than a narrow health service focus.

Helen McEntee TD, Minister of State for Mental Health and Older People, convened and chaired the first Task Force meeting which was held in September 2016 bringing together representatives from the statutory, voluntary, public, private and youth sectors. The Task Force met on 9 occasions between September 2016 and June 2017. Minutes of the meetings



and Terms of Reference for the group are available at <http://health.gov.ie/national-taskforce-on-youth-mental-health>.

A change in Government structure occurred just prior to the final meeting of the Task Force. Following a minor re-organisation, Jim Daly TD, was appointed as the new Minister of State with special responsibility for Mental Health and Older People. Mr Daly chaired the final Task Force meeting on 30 June 2017. Minister Daly committed to ensure that the Task Force recommendations remained a government priority.

The Task Force maintained an exclusive focus on youth, defined as young people aged between 0 to 25, a view of youth that extends beyond the traditional childhood and adolescent focus. The Task Force worked in sub-groups as well as a whole. Engagement with communities of practice, site visits and invited guest lectures formed part of the work of the Task Force. A parallel process of consultation was carried out with young people and existing stakeholders and professionals working in the youth mental health field. The results of these consultations are available on the National Youth Mental Health Task Force webpage: <http://health.gov.ie/national-taskforce-on-youth-mental-health>

The Task Force was established to produce, within a relatively short period of time, a series of action-focused recommendations to improve youth mental health and wellbeing. The main areas of focus (as outlined in the terms of reference) comprised: emotional literacy and reduction of stigma; awareness of services and supports; accessibility to services and supports across different settings; alignment of services and supports across different providers; and building capacity in local communities.

The Taskforce has now completed its work with the publication of this series of recommendations. However it is envisaged that this process will continue alongside another inter-departmental initiative, the Youth Mental Health Pathfinder. This Pathfinder project is an internal process designed to effectively collaborate across departments on an issue that spans more than one department, i.e. youth mental health.

The Government picked this topic to be one of three high-profile pathfinder projects at the heart of its Civil Service Renewal Plan (2014). One of the asks of the Youth Mental Health Pathfinder project was to try and effectively embed a new model of cross-government working using Section 12 of the Public Service Management Act 1997. The processes to test the establishment this are now underway.

Helen McEntee TD, Minister of State with special responsibility for Mental Health and Older People (Chair, September 2016 – May 2017)

Jim Daly TD, Minister of State with special responsibility for Mental Health and Older People (Chair June 2017)

Paul Reid, Fingal County Council (Deputy Chair),

Tony Bates, Jigsaw

Jim Breen, Cycle Against Suicide

Mary Cannon, RCSI / Beaumont Hospital

Mary Cunningham, National Youth Council of Ireland

Julie de Balliencourt, Facebook

Colm Desmond, Department of Health

Moninne Griffith, BeLongTo

Margaret Grogan, Department of Education and Skills

Patricia Hayden, School Principal

Rob Hennelly, Gaelic Athletic Association

Grainia Long, Irish Society for Prevention of Cruelty to Children

Shari McDaid, Mental Health Reform

Clare McNamara, Department of Children and Youth Affairs

Anne O'Connor, Health Service Executive

Kate O'Flaherty, Department of Health

Siobhan O'Halloran, Department of Health

Clíodhna O'Neill, Irish Society for Prevention of Cruelty to Children (replacing Grainia Long)

Cian Power, Union of Students of Ireland

Ian Power, SpunOut

Chairperson of Youth Panel

Niall Breslin, Lust for Life

Secretariat in the Department of Health

Rhona Gaynor (until March, 2017)

Roisin Collier (Pathfinder)

Orla Kennelly (until March 2017)

Martin O'Dwyer (replacing Orla Kennelly)

Tom O'Brien (replacing Rhona Gaynor)

Recommendations of the Youth Mental Health Taskforce

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Recommendation 1

CONSULTATION AND ADVOCACY

The voice of all children and young people must be heard. Young people must be consulted in a meaningful way about the drafting of policies and legislation and the design of services that may affect their mental health. Care should be taken to ensure that all youth engagement activities are inclusive of young people who are marginalised and seldom heard.



Recommendations:

- 1.1 Pathfinder should take a lead in formalising mechanisms to ensure that the voices of young people are fully considered in the development and implementation of legislation, policy and services for youth. The Pathfinder team should develop mandatory protocols which will work to safeguard young people against potential changes in policy that could negatively impact on youth mental health
- 1.2 Policies involving young people should be published in simple, straightforward language that young people can understand
- 1.3 A process of youth consultation should be carried out when designing mental health and other support services and facilities for young people
- 1.4 An independent National Youth Mental Health Advocacy and Information Service should be established. Consultation should be informed by children and young people and should include the HSE, which is developing a tender for a Child and Adolescent Mental Health Services (CAMHS) youth advocacy pilot.

LEAD

Department of Health
(pending establishment
of Pathfinder Programme)

Timeframe

1.1 Q1 2018
1.2 Q4 2017
1.3 Q4 2017
1.4 Q4 2017

Recommendation 2

AWARENESS AND TRAINING

Young people must be supported to enjoy good mental health and wellbeing, enabling them to build their confidence and self-esteem, their sense of connectedness and their sense of place in the world around them. Mental health can be seen as existing along a continuum where a young person can experience positive mental health but may also at some stage in their life experience negative mental health outcomes. Creating a shared understanding of mental health is key to challenging stigma and supporting young people to engage with mental health services as required.

The promotion of positive mental health supports young people to build their resilience, drawing on a wide range of protective factors that support positive mental health outcomes. Supporting young people to develop their social and emotional competencies encourages and equips young people with the skills needed to deal with daily challenges and the stresses of life.

“Training should assist young people to build knowledge around the importance of self-worth...”



To be emotionally literate is to recognise, understand and effectively communicate the feelings an individual experiences and to be aware of the impact these can have on an individual's life and on the lives of those connected to that individual. The way a person reacts to certain situations is influenced by many factors, but training and awareness can assist young people to build resilience.

Being equipped with the ability to cope with and adapt to new situations and having a sense of resilience and positive wellbeing enables a person to approach other people and situations with confidence. Training should assist young people to build knowledge around the importance of self-worth, self-acceptance and teach young people how to address challenges in life.

Recommendation 2

AWARENESS AND TRAINING

There is a significant opportunity to build the skill set and knowledge of adults working with young people to identify the risk and protective factors for mental health and to identify the early signs of mental health distress. The first step is to identify and develop appropriate training programmes and then to use existing structures to support the roll out of training. The value of training needs to be recognised and employees should be encouraged and proactively facilitated to avail of this training.

Recommendations:

- 2.1 A series of sustained and evidence based awareness campaigns should be developed, specifically targeted at children and young people, to improve mental health, emotional literacy, build resilience, and aid the development of coping mechanisms
- 2.2 Sustained, quality-assured and evidenced-based training programmes should be funded to provide support to individuals in the public, voluntary and community sectors who have contact with young people so that those trained might be in a better position to promote positive mental health

LEAD

HSE

Timeframe

2.1 Q2 2018

2.2 Q1 2018



Recommendation 3

ONLINE YOUTH MENTAL HEALTH SUPPORTS



The use of digital technologies can play an important role in the delivery of mental health supports to children and young people.

In order to respond to the changing needs of children and young people we must increase our investment in innovative, digital technologies which are well placed to support children and young people when and where they need it.

A comprehensive system of mental health care for young people should include active listening and signposting, recognising that

these are core skills within mental health service provision and an important element of universal service delivery. Many online services are currently available within both the HSE and non-governmental organisations dealing with young people.

The skills to develop such tools are already available and existing services should be enhanced and expanded and co-ordinated to provide an easily-accessible, responsive, quality-assured suite of digital and online mental health supports and services for young people. Consideration should also be given to the provision of online therapeutic supports also.

Recommendation:

- 3.1** The Taskforce recommends increased investment in age-appropriate, scalable digital youth mental health supports in conjunction with existing providers to ensure all young people ages 0-25 have access to an active listening service and dynamic signposting tool.

LEAD

HSE in conjunction with existing providers and non-governmental organisations (NGOs)

Timeframe

3.1 Q2 2018

Recommendation 4

SUPPORTING FAMILIES TO PROMOTE MENTAL HEALTH IN YOUNG PEOPLE



Families play a key role in the development of health and wellbeing. We recognise that it is essential, particularly for younger children, to consider the mental health needs of the child or young person in the context of the family environment. People come to parenthood with different capacities, different beliefs and values.

Prevention and early intervention has been shown to be more cost-effective when compared to intervention in later life. The earliest form of intervention for young people is intervention at the level of support for parents, guardians and carers. Parenting supports should continue to be developed by Tusla and other relevant agencies. This support should extend from the prenatal period right through the period of youth. The Task Force recognises that support and help for parents should begin from pregnancy and that families should be supported throughout the journey.

The Task Force recommends that evidence-based information regarding positive mental health is included into routine perinatal care services. It recommends that staff in maternity hospitals and all public health nurses are trained so that they are skilled in how to identify people experiencing mental health challenges and how and where to refer to vulnerable parents and children to relevant services and supports. The Task Force supports the recommendations pertaining to mental health in the National Maternity Strategy 2016-2026 "Creating a Better Future Together".

Recommendation 4

SUPPORTING FAMILIES TO PROMOTE MENTAL HEALTH IN YOUNG PEOPLE

The Task Force recommends that the commissioning, planning and service delivery of pre- and post-natal services should take into account the needs of new parents who may develop mental health issues.

Recommendations:

- 4.1 Families, guardians and carers should be supported in parenting children and young people through the provision of universal, quality-assured and evidence-based parenting information and support programmes
- 4.2 Evidence-based information, interventions and signposting tools about mental health should be included into routine perinatal care services

LEAD

Tusla
National Maternity Working Group

Timeframe

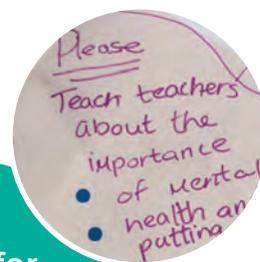
4.1 Q2 2018
4.2 Q2 2018



“The earliest form of intervention for young people is intervention at the level of support for parents, guardians and carers....”

Recommendation 5

SCHOOLS AND YOUTH MENTAL HEALTH



“Training for existing teachers in mental health awareness and knowledge of local services and referral pathways is understood to be a key skill for staff...”

Schools have an important role to play in supporting and fostering wellbeing and mental health. Training for existing teachers in mental health awareness and knowledge of local services and referral pathways is understood to be a key skill for staff. The Department of Education and Skills (DES) Action Plan for Education 2016- 2019 includes recommendations relevant to this.

Recommendations:

- 5.1 The Department of Education and Skills should support teaching professionals in schools and centres for education with the knowledge and skills to understand their role in supporting young people with mental health issues and how to access information about services and supports available to them.
- 5.2 Principals and teachers should be supported to implement the wellbeing junior cycle curriculum.

LEAD

Department of
Education and Skills

Timeframe

5.1 Q4 2018
5.2 Q2 2018

Recommendation 6

MENTAL HEALTH SUPPORTS IN HIGHER EDUCATION INSTITUTIONS

The transition from second level to higher level education is recognised as being a particularly stressful time for young people and work has been on-going to support a better transition for students through the Transition reform initiative (www.transition.ie).

For students in higher education, a recent report prepared by AHEAD, shows that counselling and other supports are currently available in most institutions in Ireland. It also indicates that there is good practice and innovative initiatives aimed at supporting students experiencing mental

health difficulties in many institutions and this good practice needs to be highlighted and systemised. However, the report also shows a significant increase in the number of students seeking to access counselling and it is reported that there are long waiting lists in some institutions and gaps in provision.



Recommendations:

- 6.1 The current provision of counselling and mental health supports in higher level institutions should be maintained and enhanced
- 6.2 The Higher Education Authority and the Department of Education and Skills should develop appropriate indicators to assess student experience in higher education in the system performance framework for higher education
- 6.3 Prioritise the implementation of recommendations contained in “Mental Health Matters”

LEAD

The Higher Education Authority /
Higher Education Institutions in
partnership with Department of
Education and Skills and AHEAD

Timeframe

6.1 Q4 2019
6.2 Q1 2019
6.3 On-going

Recommendation 7

COMMUNITY SUPPORTS FOR YOUTH MENTAL HEALTH



Young people need a safe, supportive community environment in order to promote their wellbeing and to fulfil their potential.

Local government recognises that the provision of 'safe spaces' helps to ensure that individuals can access support locally in places not normally associated with mental health provision. These include community spaces, sporting facilities and facilities for mental health services.

Excellent work has been carried out in some areas and models of good practice can be shared nationally. However there is no uniform provision of such spaces for youth across the country. The ability to access supports in non-mental health centres also limits the stigma associated with accessing mental health services.

Recommendations:

7.1 The Task Force recommends that local government work with relevant agencies, youth groups and community groups to provide safe, 'youth friendly' spaces, sporting and cultural facilities that are conducive to promoting good mental health. These should include the provision of pleasant spaces and facilities for young people to access qualified health and mental health care in the community

"Young people need a safe, supportive community environment in order to promote their wellbeing and to fulfil their potential...."

7.2 Evidence-based, quality-assured training in youth mental health should be available to all individuals working with young people in the community (See Recommendation 2.2)

LEAD

Local Government in partnership with sporting bodies and youth and community organisations

Timeframe

7.1 Q1 2018
7.2 Q1 2018

Recommendation 8

ACCESSIBILITY AND ALIGNMENT OF MENTAL HEALTH SERVICES



There is a need for a clear joined-up approach for the provision of mental health care for young people when and where it is needed. There should be improved access to the appropriate level of mental health care in timely manner and clear referral pathways across and between services for the 0-25 years age range.

The importance of inter-agency coordination cannot be over-emphasised. There remains a challenge to provide high quality services and equity of access on a national basis. The Task Force recognises the need for stronger inter-agency communication and coordination between statutory and voluntary providers to assist individuals enter, navigate and exit services seamlessly.

There is a need to review the current initial referral process. Waiting times could be reduced significantly if a standardised referral process was created to ensure that young people receive the appropriate level of intervention at the optimal time. This is likely to require the provision of additional mental health resources for young people at the primary care level.

Transition between child mental health services and adult mental health services requires oversight and

“The importance of inter-agency coordination cannot be over-emphasised.”

Recommendation 8

ACCESSIBILITY AND ALIGNMENT OF MENTAL HEALTH SERVICES

coordination. The period between 16 and 25 is recognised as a time when many young people fail to access appropriate services and supports in a timely manner.

Recommendations:

- 8.1** Pathfinder should carry out a detailed assessment of the services and supports currently available in relation to youth mental health, in order to identify gaps in service provision and to scope what improvements could be achieved through greater coordination
- 8.2** The HSE should improve provision of mental health supports to young people at the primary care level to reduce the pressure on the tertiary referral services and improve waiting times
- 8.3** The HSE should establish a National Lead for Youth Mental Health and a Lead for Youth Mental Health in each Community Health Organisation (CHO) to coordinate the provision of services and address gaps in service provision, including out of hours services. The CHO Leads will liaise with relevant agencies to develop appropriate communication protocols, standardised assessment processes and coordination of service provision. This joint working will bring together expert stakeholders to identify and address potential blocks to service provision and seek to reduce current wait times nationally with the introduction of other more appropriate interventions in primary care.

LEAD	Timeframe
HSE	8.1 Q1 2018
	8.2 On-going
	8.3 Q1 2018

Recommendation 9

CONSENT ISSUES



There is a lack of clarity about consent to access to health services for young people under the age of 18 years. The Task Force supports the recommendations of the Expert Group on the Review of the Mental Health Act, 2001 on the issue of consent to mental health services for those children aged 16 or 17.

The Task Force is aware that a major overhaul of mental health legislation is underway. The Mental Health Act 2001 was comprehensively reviewed by an Expert Group which reported in 2015 detailing 165 recommendations which provides a clear roadmap for updating and improving the 2001 Act. The Government accepted the Report and has approved the preparation of the General Scheme of a Bill to amend the 2001 Act on the basis of the Report’s recommendations.

The Government accepts the importance of advancing this work as quickly as possible and the text of the General Scheme of a Bill is expected to be significantly advanced by the end of the year.

Recommendation:

- 9.1 Legislation should be published to give effect to the recommendations of the Expert Group on the Review of the Mental Health Act, 2001 with regard to children, including reforming the consent provisions, to allow young people under 18 direct access to mental health services

LEAD

Department of Justice
Department of Health

Timeframe

9.1 Q3 2018

“There is a lack of clarity about consent to access to health services for young people under the age of 18 years.”

Recommendation 10

IMPROVING KNOWLEDGE THROUGH RESEARCH



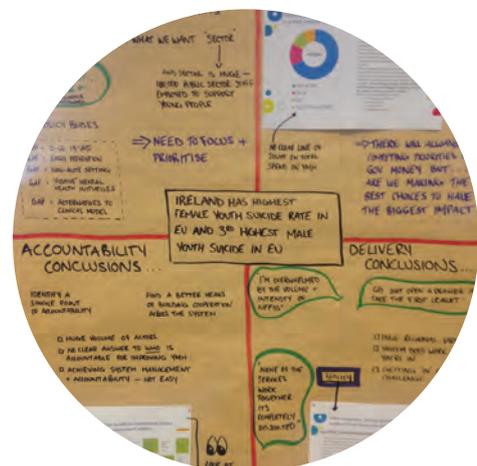
We need to know more about what supports and what challenges young people's mental health and what works best to help them.

There is growing recognition that mental health will become the priority health issue over the coming decades. Research and investment in prevention strategies have made remarkable progress in reducing the incidence and prevalence and improving the outcomes of many chronic health conditions such as cardiovascular disease and cancer. We need to apply a prevention, mental health promotion focus to our work in

the area of mental health. International research indicates that 75% of all mental health disorders have already begun in some form before the age of 25 years.

Research can help us to identify what prevents mental health difficulties from becoming entrenched and what improves outcomes. Factors influencing resilience and key developmental periods for intervention should be identified in order to move towards a prevention and pre-emption paradigm for mental illness.

As part of this research strategy, the Task Force recommends on-going support for large-scale projects that can improve the quality and frequency of research on youth mental health issues, such as the "My World" and 'Growing Up in Ireland' surveys. The Task Force also recommends more support for studies of interventions to improve young people's mental health and more research on impact of mental health issues on families and carers.



Recommendation 10

IMPROVING KNOWLEDGE THROUGH RESEARCH

Recommendations:

- 10.1 A funded strategic national research programme on youth mental health will be developed
- 10.2 International sources of funding (for example from European Union or philanthropic organisations) should be leveraged to enhance this research strategy on youth mental health research

LEAD

Department of Health
Health Research Board

Timeframe

10.1 Q2 2018
10.2 Q2 2018

“Research can help us to identify what prevents mental health difficulties from becoming entrenched and what improves outcomes.”

