CHILDREN 1ST welcomes the focus of this inquiry on Child and Adolescent Mental Health Services (CAMHS), and welcomes the opportunity to provide a written submission. In order to complement the submissions of other organisations working with children and young people, we have focused our submission on three areas: support for children after abuse; befriending support, and support for parents of children and young people with mental health problems. Our submission will particularly address two of the questions raised by the committee, namely:

- what action is being taken to facilitate early intervention and what else can be done?
- how access to services and ongoing support can be improved?

General points
Above all, we want to highlight the considerable shortage of CAMHS across Scotland. Many of the vulnerable children and young people that we work with would benefit from such services but shortages mean that they are not able to access them when they are most needed. Often children have to wait until their symptoms are more pronounced before they can access CAMHS, and also experience great difficulty regaining access to CAMHS at later points when they may need additional support.

We highlight that a Statistical Notice from the NHS confirmed these national shortages: that staffing levels do not meet the recommended number to deliver adequate community CAMH services; that currently a high proportion of CAMH posts are temporary and if these were not included, the picture of staff shortages would be even more serious; and that many areas are only providing CAMH services up until 16 years old when they should be provided until 18 years of age.

Support for children who have experienced abuse

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1 Statistical Publication Notice at www.isdscotland.org
Abuse or neglect of any kind can have a very negative impact upon a child’s mental and emotional wellbeing. Many children suffer low self-esteem and feelings of guilt, often blaming themselves for the abuse. Children can find it difficult to have trusting relationships and experience loneliness and bullying. Children often have feelings of hopelessness, hate, despair, misery, and rage, sometimes talking about feeling suicidal. Research shows that children who have suffered abuse are also more likely to suffer from drug and alcohol dependency and to have long-term mental health difficulties including depression.

CHILDREN 1st believes that it is crucial for the current and future mental health of children who have been abused that they get the help and support that they need when they need it, in the way that they need it, and for as long as they need it. Anything less leaves hurting children feeling more alone and leaves possible mental health problems to escalate and have an even more lasting effect upon their life.

Unfortunately however, we know that children are often left without any support or anyone listening to their needs and concerns. In particular, we know that there is a considerable shortage of therapeutic services such as counselling and art therapy for children who have experienced abuse. CHILDREN 1st provides 8 abuse recovery services throughout Scotland, and these often have considerable waiting lists which mean that children often have no access to therapeutic help until their symptoms are serious or a significant length of time has passed. Given that one year is a long time in a child’s life, this gap in provision is very concerning.

CHILDREN 1st therefore recommends that the Committee urge more action from the Government to improve the provision of therapeutic services for children who have suffered from abuse or trauma of any kind. We also hope the Committee will encourage the Government to have a clear focus on meeting the emotional needs of these vulnerable children as a key theme of its current review of child protection guidance.

Befriending support
CHILDREN 1st’s Bfriends services provide support for vulnerable children by matching an adult volunteer with a child for friendship, someone to talk to and opportunities to build their self-esteem. Very often these children have poor mental wellbeing having undergone difficulties in their home lives or at school. Knowing that they have a trusted adult to talk to and share with can make all the difference for these vulnerable children.

We realise that there are many different models of service which can be appropriate to help children and young people’s mental wellbeing at different times. However, we take this opportunity to highlight the effectiveness of befriending support and encourage the Committee to include such services
within their consideration of the provision of early intervention services relating to children’s mental health.

Support for parents to support their children’s mental wellbeing
ParentLine Scotland, the national free and confidential helpline for parents and carers, hears regularly from parents who are concerned about their child’s mental health. A recent report into concerns raised with the helpline found that 20% of calls were about a child’s mental health, including situations such as a child’s mental wellbeing after parents’ divorce and after experiencing bullying.

It is ParentLine Scotland’s experience that very often, there is nowhere to point parents on to for face-to-face or more in-depth help with parenting a child who has mental health problems. In particular, there is a considerable lack of support – and in fact in many localities, no support at all – available for parents of teenagers experiencing any kind of difficulty. This is regrettable given the importance of positive family relationships for our mental health, and given that parents could be a daily support for teenagers as they struggle to cope with mental health issues. Any consideration of early intervention must recognise the key role of parents and carers as the first line of support for young people.

We therefore strongly urge the Committee to recommend that the Government commission a review of support for parents of teenagers in Scotland as part of helping to strengthen our young people’s mental and emotional wellbeing.

Conclusions
We believe that this is a timely consideration of mental health services for Scotland’s children. Looking at current provision, there is a concerning picture of lack of services and/ or waiting lists which mean that children are not getting the support they need, when they need it. We know that delays in receiving, or not receiving a service at all, makes things worse. Too often, a service can only be obtained when a problem becomes acute. This does not fit with the principles of early intervention and raises clear challenges in terms of ensuring access to services and ongoing support.

For further information about any aspect of this paper, please contact:

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20 January 2009

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2 ParentLine Scotland, A snapshot of concerns raised in calls to ParentLine Scotland, 2008