




Mental Health in Children and Young People

RFL Safeguarding Conference Sunday 29th January
2016, HJ Stadium, Warrington.

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Children Board

WSCB - Our key aims

- Help all partners in both statutory and non-statutory fields to work together to learn, improve and promote the care, health and wellbeing of young people.
 - Our statutory responsibilities around child protection, Serious Case Reviews etc
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National Context

10% of Children aged 5-16 years suffer from a **clinically significant mental health illness**



25% of children who **need treatment receive it**



50% of those with lifetime mental illness (excluding dementia) will **experience symptoms by the age of 14**



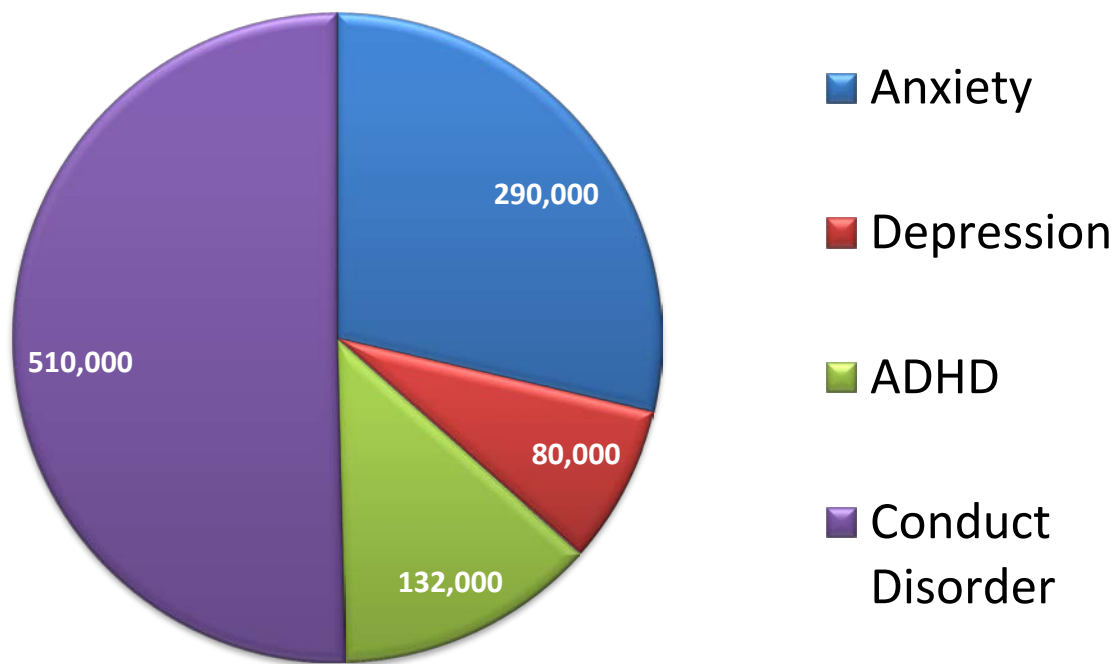
75% of those with lifetime mental illness will **experience symptoms by age of 24**



Boys aged 11-15yrs are **1.3x more likely to have a mental illness** compared to girls 11-15yrs

1 in 10 children aged 5-16 yrs :

695,000 Children experiencing clinically significant mental health illness



* Individuals may meet criteria for multiple categories of mental health

Self harm and suicide

149 children aged 10-19 in England **committed suicide** in 2014, almost 3 per week.



Those who **self-harmed** are **100x** more likely than the general population to **die by suicide** in the following year.


Slides 2-4 from data in *'The mental health of children and young people in England'* Public Health England, December 2016.




Anthony's story

Shared with the consent of Anthony's mum

Anthony

- 16 yrs old, keen RL player and fan.
 - On course for A's and A* GCSE's, wanted to become an architect.
 - Lost very close maternal grandmother in Dec 2014. but didn't often talk to mum about it because he didn't like her to be upset.
 - A very caring, supportive young man who would go out of his way to help others.
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Anthony

- Was being supported by school regarding bereavement, and was referred to Child Adolescent Mental Health Service (CAMHS) before end of school year.
 - Some self-harming behaviour noticed by family and GP appointments made.
 - Seen at beginning of school holidays then due to be seen for follow up.
 - Anthony died 27th September 2015, by hanging.
 - Misadventure verdict recorded by Coroner.
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Good practice we identified

Support from club in the immediate post-incident phase for Anthony's team mates.


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The club contacted **State of Mind**, who delivered a session to all age groups.

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Work by club to establish a **legacy for the family**.

National Confidential Enquiry 2016

In 2014-15, 145 individuals under 20 yrs old died by suicide though this may be higher.

Ten identified common themes

- Family factors such as mental illness
 - Abuse and neglect
 - Bereavement and experience of suicide
 - Bullying
 - Suicide-related internet use
 - Academic pressures, especially related to exams
 - Social isolation or withdrawal
 - Physical health conditions that may have social impact
 - Alcohol and illicit drugs
 - Mental ill health, self harm or suicidal ideas
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What we want to develop over 2017

Create **protocols for communication** between schools and sports clubs CWO's.

Encourage clubs to learn about the **Early Intervention approaches** in their area (and vice versa).

Develop a **training offer for clubs** around working with adolescents.