**Answers: Understanding the Needs of Young People with Mental Ill Health**

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**Executive Summary (word count: max 200)**

Adolescence and early adulthood are periods that are developmentally critical for mental health. This is influenced by external global factors such as such as the COVID-19 pandemic and anxiety around climate change This project included a literature review, the collation of national and local data from the perspectives of young people, their families and healthcare professionals, and focus groups with young people in Norfolk and Suffolk to synthesise views and experience on what supports their mental health and that of young people more broadly. Results show that young people identify many strategies that they do independently to protect and maintain their mental health, and are aware of needing to support each other. Young people asked for more mental health awareness in schools, for therapeutic input to be more individualised, and they valued being truly listened to and heard by professionals. The pros and cons of on-line vs in-person mental health advice and support was discussed.

**Background and Context (word count: max 250)**

Adolescence to young adulthood is an important period of development, characterised by biological, cognitive, psychosocial, and emotional changes alongside expected key life transitions such as continuing education and starting employment. This presents a critical period for the onset of mental health disorders (kessler). Young people today face many challenges for their mental health, including exposure to global news and a huge amount of information (both factual and speculative) via an increasingly connected world afforded by the internet. Recent world-events, including the COVID-19 pandemic, the war in Ukraine, and concerns about climate change are known to have impacted mental health (Singh, singh, van Nieuwenhuizen, meherali). To support young people, it is important to understandwhat factors positively impact their mental health and wellbeing. Exploring young people’s perspectives on their mental health will allow a more person-centred knowledge of how best to support them. study aims to understand the perspectives of young people on what helps their mental health since the peak of the COVID-19 pandemic. The bracket of young people is defined for this report as ages 11-25 years old, as per the age range focused on by the National Youth Agency and the Youth Access YIACS Model in the UK (14). We kept a broad scope for these discussions (encompassing services, community activities, social networks, and personal coping strategies) to gain a holistic view of the avenues to which young people turn to help their mental health.

**What the Evidence Indicates (word count: max 500)**

Existing qualitative data on what helps young people’s mental health during and since the pandemic, from the perspectives of young people, their families and their healthcare professionals was collated. Firstly, through a scoping review searching data within the UK, followed by the collation of data local to Norfolk and Suffolk.

The scoping review searched PsychINFO, Embase, MEDLINE, and CINAHL searching within the timeframe of 1st March 2020 to 19th July 2022 using search strings of mental health, youth, qualitative methodology and COVID-19. Eleven studies fit criteria (1-4,6,7,9,10-12,15). The following themes emerged of what young people found helpful during and since the COVID-19 lockdown:

*External Support*

Young people turned to mental health services, where online provision of services offered consistency, structure, and connection; allowing people to engage to the extent they were most comfortable with and for some, removing access barriers (1, 4, 9).

Some young people reported accessing mental health support from educational facilities or the workplace, in the form of staff offering practical support such as deadline extensions and wellbeing leave, as well as wellbeing check-ins and increased awareness of mental health (7).

*Improved Relationships*

Lockdown afforded the opportunity for families and friendship groups to have more open, direct, and sensitive conversations, which fostered better connections (3, 6, 7, 9). This acted as a support mechanism for young people’s wellbeing. For those living at home, some young people felt that they were feeling closer with family due to the time lockdown enabled them to spend together (6, 7, 9, 10, 15).

Young people also turned to technology to help cope, maintaining a sense of social connectedness, and accessing support networks (3, 6, 7, 11, 15).

*Self-Care*
Young people participated in self-care practices such as prioritising more time to focus on their wellbeing, relaxation, self-reflection, controlled breathing, mindfulness, and meditation (4, 6, 7, 9, 15). Additionally, young people reported better sleep during lockdown and linked this key lifestyle factor to their mental health (4, 6, 7).

The collation of local secondary data from published reports prepared by third-sector organisations, health support and council bodies (that gathered qualitative data from the perspectives of young people), their families or mental health professionals resulted in the following themes:

*School Staff*

Young people wanted to be listened to by staff in education, for staff to respect and value minorities’ rights, and to be approachable so that they felt able to ask for advice or support. Young people expressed wanting more mental health awareness being raised in schools including busting myths that contribute to stigma.

*School Structure*

Young people suggested changes to school structure such as later starts and breaks between lessons would benefit their mental health via reduced sleep deprivation and time to process what they’ve learnt and clear their minds.

*Support to support*

Young people wanted to get more help and advice on how to support peers with their mental health.

*Technology*

Regarding accessing support, young people cited their preference as being a blend of human interaction initially, followed by technology.

**Summary of Findings (word count: max 500)**

To better understand the perspectives of young people in Norfolk and Suffolk about strategies for supporting their mental health and wellbeing, we spoke to 10 young people who had accessed or attempted to access formal support for their mental health across 3 focus group discussions. Discussion topics were informed from the outcomes of the literature scoping review and secondary data review. Groups were video/audio recorded, transcribed and analysis thematically.

Participants were recruited through MAP, an NHS peer participation group and Headucate. Data was collected from 10 participants. 3 participants were aged 11-15, 7 were aged 16-25. 2 participants were males and 8 were females (from observational data).

Themes are presented below (corresponding quotations in Appendix 1):

*Definitions*From the perspectives of young people, “wellbeing” as a concept was defined as distinct from mental health in that wellbeing encompasses more aspects of their health including physical health. A theme of having knowledge/awareness emerged, including insight into the definition of wellbeing for young people as being the concept of having self-awareness of how they feel and what to do if they don’t feel okay.

*Helpful personal strategies*
Young people reported enjoyable activities (such as going on walks, interacting with pets) helped their mental health through the self-reported mechanisms of grounding, bringing joy and comfort). Within this, being outside was a helpful strategy for supporting their mental health by bringing a sense of freedom, not feeling trapped and giving space to breathe.

Creativity was recognised as helpful through facilitating young people to process the things that they’ve experienced and the vast quantity of news/information they take in, as well as being a form of expression. Journalling was recognised as being helpful through similar mechanisms (processing and self-expression) with an added emphasis on not having to hide anything.

*Accessing formal support*
Young people reported that they chose to seek formal help when they experienced an extended period of no improvement in how they felt or if others in their life raised concern. Barriers to seeking help included young people thinking they must be self-harming or suicidal to seek help, exacerbated by cultural messages that it is weak to seek help or minimising messages from adults towards young people which confuse what is normal and what warrants help.

*Experiences of support*
Emphasis was given to the impact of being properly listened to as an individual and having input that feels tailored to them individually rather than being treated as though they are the same as others (for example, just because they have the same diagnosis).

*Recommendations for support*
Being given the choice of remote and in-person therapeutic input was recommended to combine the strengths of both (cited as human connection and accessibility, respectively). Young people asked for support managing over-exposure to information and how to help their peers with their mental health. Educational staff were identified as playing a big role in mental health support.

**Recommendations for commissioners and future research (word count: max 500)**

A collated from the literature review, documentation review and focus group work, results show that young people have many strategies that they use on a personal level to maintain their mental health and wellbeing, including creativity and use of outdoor spaces. Emphasis was put on these techniques giving them the space to think, process and express themselves. This feels particularly important for young people to have this space to process given the amount of information they are exposed to (through school and the internet, and their peers).

Our findings indicate that educational staff having mental health awareness and ability to support with mental health would be valued. This was present in the national data and local secondary data as well as the local primary data collected via focus groups. Young people valued being properly listened to and reported that currently school staff can be minimising of their struggles. Mental health awareness training and basic mental health skills may be indicated for education staff to better support young people and to facilitate healthy and open interactions about wellbeing.

Use of technology for formal support was also present across all three modes of data, with the consensus being that there is space for both, with timing and choice being critical to feeling empowered. Therapeutic input was valued most when it started with face-to-face to build rapport and create human connection, with technology coming in later as helpful for being able to stay consistent despite practical barriers. Overall, focus group data emphasised wanting to be given the choice between modes, given that preference varies on individual circumstance.

Local young people identified the need for help with how to support their peers with their mental health as well as help to know how to navigate consuming and caring about the worldwide information afforded through the internet (identified from both secondary data and primary data). Young people showed a sense of caring and wanting to be able to help in these areas, which may impact their wellbeing when they feel helpless to change or impact these situations.

Future research would benefit from continuing to engage young people to ascertain what their perspectives are on their mental health in a post-COVID 19 world and how to best support them from their perspective. Research on young people’s mental health would benefit from further focus groups with young people on a larger scale to include a more representative sample, learn more about peer support strategies, and work with schools, health services and other support systems to support increased mental health awareness and communication training.

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**Appendices**

**Appendix 1**

Quotes corresponding to each theme.

*Definitions*

“For me personally, wellbeing is about being OK, feeling OK, mentally, physically and emotionally, I put all three of that on to well-being.”

“feeling OK and knowing what to do if you aren't feeling OK”

*Helpful personal strategies*

“for me my dog is a source of comfort, the walking gives a sense of feeling free, more able to breathe and not having to think”

“I think the aspects of grounding that these activities bring … it just like brings you back to kind of yourself because it's so easy to lose yourself doing just constant assignment after assignment, task after task. So just coming back in like, I don't know, like just having like 5 minutes playing with your dog is like you're just like, oh, like, this is what makes me happy. This is what- who I am. This is, you know, I think that's just important aspect to hold on to. To keep motivated about just doing life.”

“I write poetry and lyrics as of way of communicating and processing and and I'm very bad at it but I dance like try to dance whenever I can to maintain my physical health and my mental health and again to really help me make sense of what is going on around me and and process it”.

*Accessing formal support*

“I just had had no information on [mental health and when to seek support] at all. I didn't know what was normal. I thought it had to be, like, at the level where you're contemplating suicide before you sought support, I thought it was only reserved for extreme cases.”

*Experiences of support*

“the ones that [a]re helpful activly listen to what your saying [sic] … the unhelpful ones just brush it off and direct you elsewhere and they act really disinterested”

[response to question: what message would you give to those in charge of the mental health services] “that not everybody is the same, two people have have anxiety but it doesn’t mean they act the same way.”

*Recommendations for support*

“Being forced to be in person / online isn’t always great, an option would be preferred”

“One of my closest friends developed anorexia … and I had no idea what that was. I had no idea how to deal with it. … I was just absolutely clueless and without, you know, trying, you know, without being told about these sorts of things and how- what you can do to help and how you talk to people in a way that's non-judgmental and listening and the importance of all of that, it’s just so important because I was just a terrible friend to her for that year. Because I just didn't know what to do. And I think that happens in a lot of cases because you just don't know what to do. When you’re not, you haven't been told, you know.”