



## About Healthwatch Newcastle

Healthwatch Newcastle is one of 152 local Healthwatch organisations established throughout England on 1 April 2013 under the provisions of the Health and Social Care Act 2012. We have a dual role to champion the rights of users of publicly funded health and social care services for both adults and children, and to hold the system to account for how well it engages with the public.

We collect feedback on services from people of all ages and from all communities. We do this through our network of voluntary and community sector organisations (VCS); comments cards at events, regular drop-in sessions and listening events at a range of venues across the city; social media; callers to our 'Just ask' helpline; and online through the feedback centre on our website. As part of the remit to gather views we also have the power to 'enter and view' services and conduct announced and unannounced visits.

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## Foreword

Maintaining good mental health and wellbeing is extremely important. It is vital in ensuring that people can live happy lives, contribute to society, earn a living, care for themselves and for others and to live long and fulfilled lives.

Research shows that people with mental health problems on average die 10–20 years earlier than those with good mental health and wellbeing<sup>1</sup>.

Many people believe that society has a responsibility to care for its vulnerable and this is probably most commonly held when we refer to our children and young people. The last epidemiological study suggested that less than 25–35% of people with a diagnosable mental health condition accessed support<sup>2</sup>.

In early 2015 the NHS England Children and Young People’s Mental Health Taskforce produced the report ‘Future in mind: Promoting, protecting and improving our children and young people’s mental health and wellbeing’<sup>3</sup>. The report describes what needs to be done to improve children and young people’s mental health and wellbeing.

‘Future in mind’ shows that:

- In an average class of 30 schoolchildren, three will suffer from a diagnosable mental health condition
- Children with mental health problems are at greater risk of physical health problems
- 12.5% of children and young people have medically unexplained symptoms and a third of these have anxiety or depression<sup>4</sup>
- As many as 50–60% of children and adolescents who have clinically significant experiences do not have appropriate interventions at an early age<sup>5</sup>
- People with acute conduct disorder cost the public purse a lot more than those with some conduct problems. This can be around £150,000 per case<sup>6</sup> made up of 71% costs associated with crime, 13% costs of mental illness in adulthood and 7% differences in lifetime earnings

Spending on mental health disorders for children and young people has only risen slightly since 2006–07 and has fallen behind rises in spending on adult mental health disorders (see the figure on the next page).

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<sup>1</sup> Chesney E, Goodwin GM and Fazel S (June 2014). Risks of all-cause and suicide mortality in mental disorders: a meta-review. *World Psychiatry* [online]. Volume 13 (Issue 2), pages 153 - 160

<http://tinyurl.com/j352a0e>

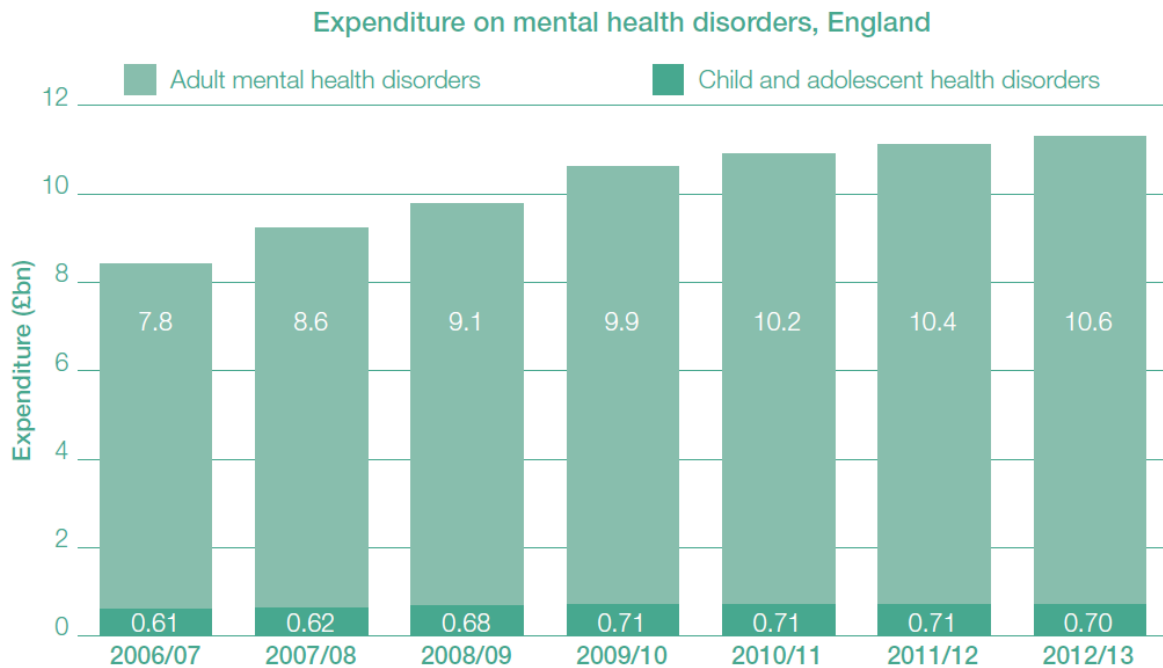
<sup>2</sup> Green H, McGinnity A, Meltzer H, Ford T, Goodman R (2005) cited by Future in mind

<sup>3</sup> <http://tinyurl.com/lej6pej>

<sup>4</sup> Campo (2012) cited by Future in mind

<sup>5</sup> Children’s Society (2008) cited by Future in mind

<sup>6</sup> Friedli L, Parsonage M (2007) Future in mind



**NHS expenditure on mental health - ‘Future in mind’**

‘Future in mind’ areas for improvement:

- Placing the importance on building resilience, promoting good mental health, prevention and early intervention
- Getting rid of artificial barriers between services to improve access
- Linking services so that care routes are easier to navigate and to make sure that people don’t fall between the gaps
- Using information to drive improvements and make sure that services understand how to get the best outcomes for children, young people and families/carers
- Getting a workforce that has the right mix of skills, competencies and experience to keep improving services
- Investing in areas that will make a difference and deciding if the current level of investment is adequate

The research that our Young Healthwatch Newcastle group has undertaken to produce ‘Young people’s mental wellbeing in Newcastle’ will help the people that plan, pay for and provide child and adolescent mental health services in the city. It builds on ‘Future in mind’ and has found local examples of how early intervention and access can help our children and young people to maintain and improve their mental wellbeing.

**Steph Edusei**  
Chief Executive, Healthwatch Newcastle

## Introduction

In June 2015 Young Healthwatch Newcastle, all volunteers aged 16–25 years, designed a mental health questionnaire aimed at young people in the 13–25 age range. The questionnaire was handed out at four different schools and colleges and to people of the appropriate age at a community event in Newcastle. It was also made available online.

The central aim was to get a better understanding of the main issues young people face regarding mental health, and if schools and colleges are offering enough support to young people around these issues.



In total there were 465 responses: 390 young people completed our paper questionnaire and 75 the online version. During the process of analysing the data we found that more females responded to the questionnaires than males: 326 females, 109 males and six transgender young people took part.

There was a lot of interest from young people and they were very keen to give their thoughts on mental health.

Two thirds of the young people who took part in the survey stated that they would like to see information about mental health support available to them in their school or college. We feel that it is highly desirable to make more young people aware of the subject and make more information available within schools and colleges.

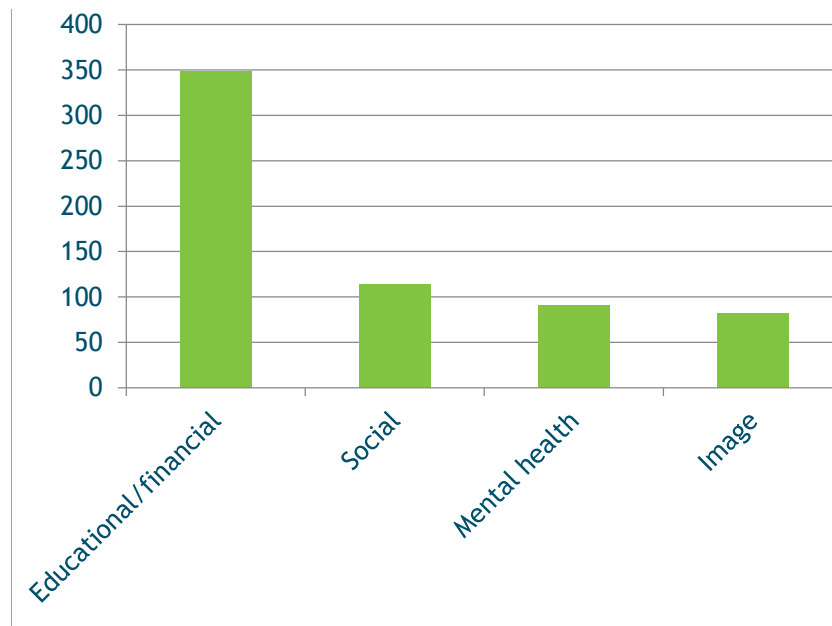
## Questions

The responses to the questions have been analysed and are discussed below.

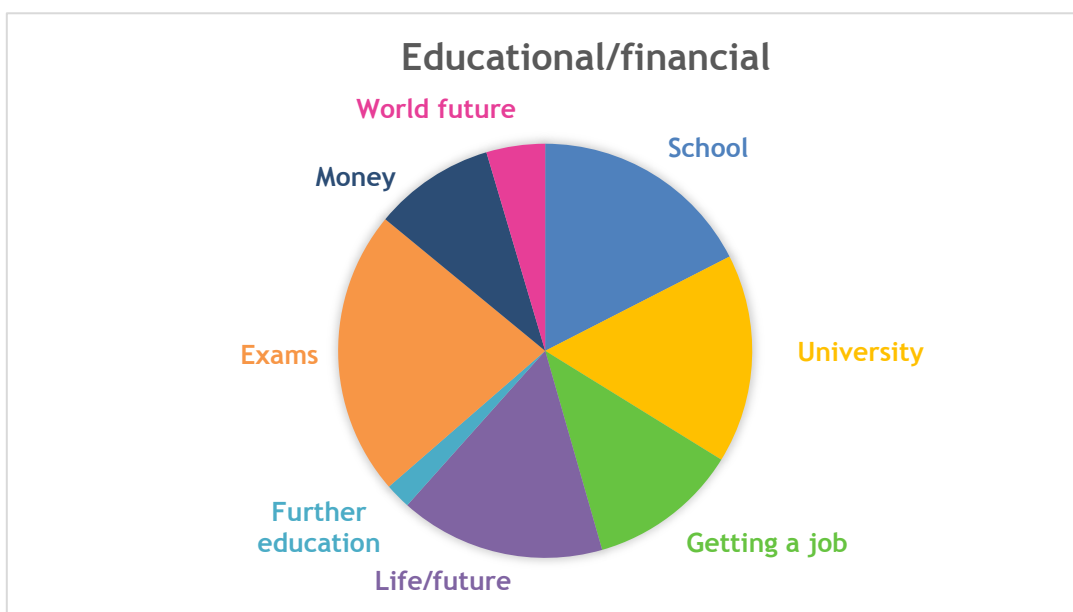
### Question 1: What are the main issues/things that you worry about?

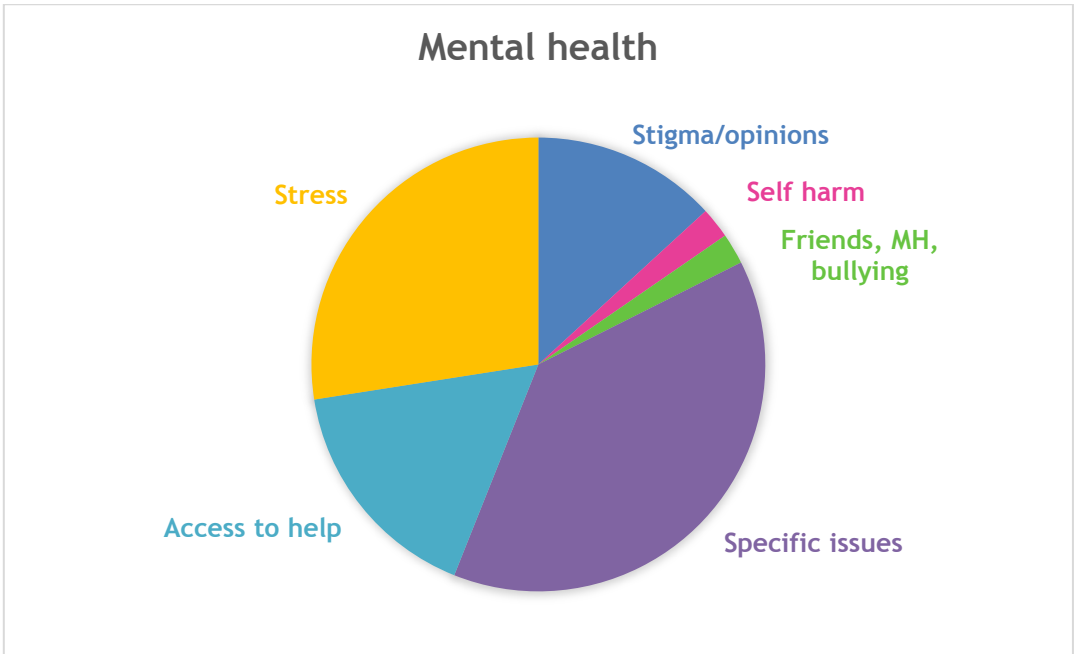
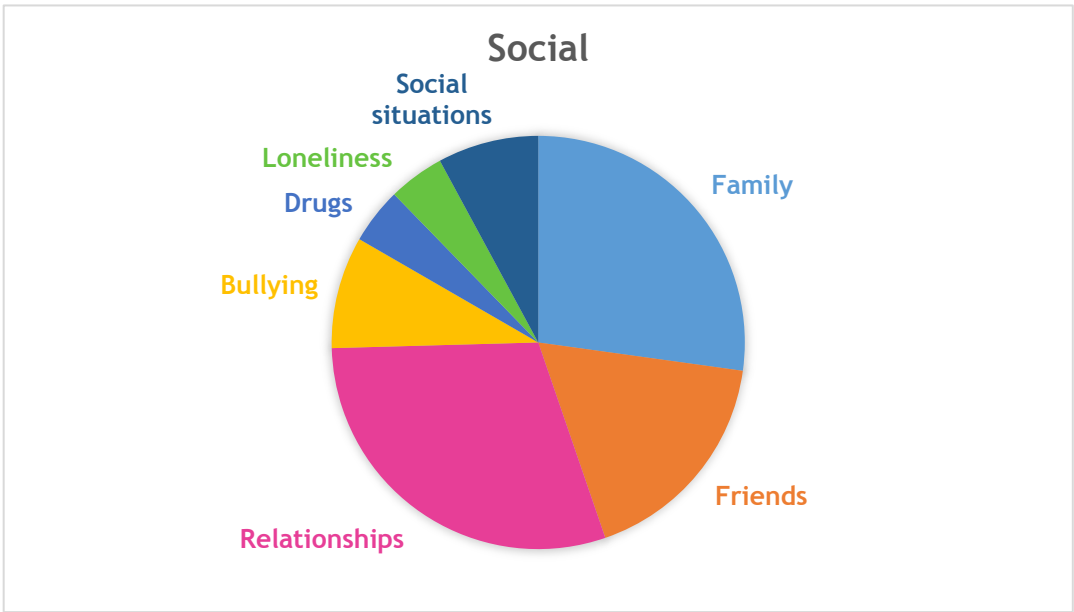
This was an open question in order to find out what worries young people in Newcastle.

Many participants mentioned more than one worry. Young Healthwatch Newcastle analysed each individual answer and grouped them into main issues. The group including educational, financial and 'the future' was by far the most common, mentioned by 349 young people, followed by social (114), mental health (91) and image (82).



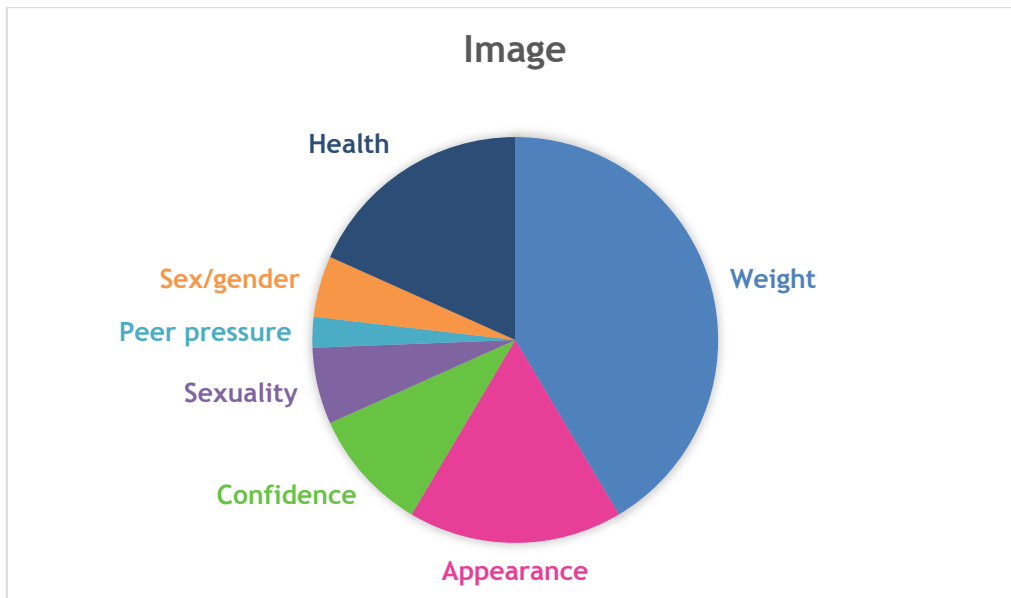
This shows that young people have many worries and we feel that it is very important that they are reassured and will receive any help needed regarding these issues.





Specific mental health issues included anxiety, depression, panic attacks, mood swings, anger and bipolar disorder.





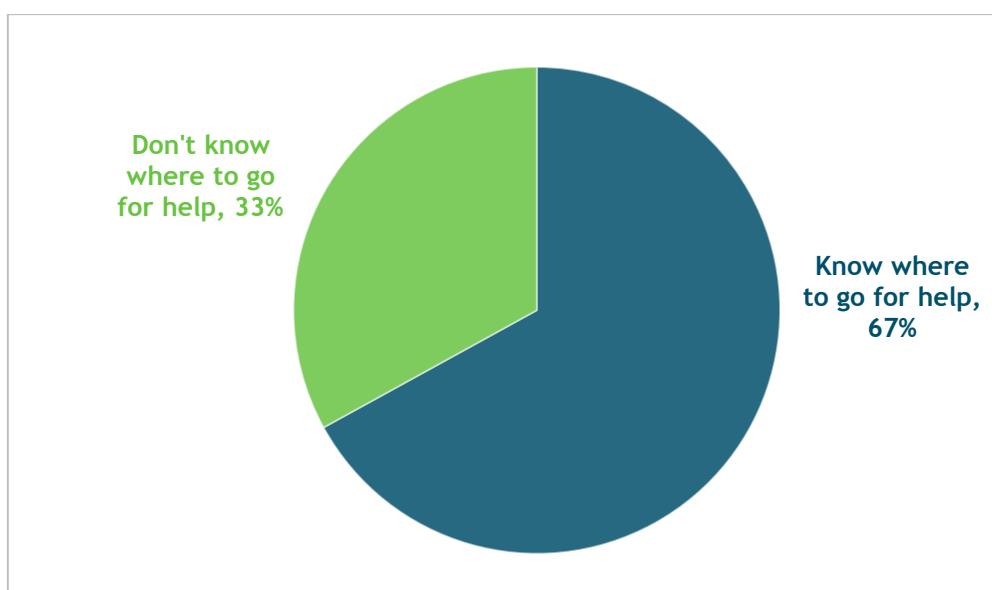
In addition, 14 young people said they 'aren't sure' what they are worried about, ten young people worry about 'everything' and 29 young people said they have 'nothing' to worry about.

A list of comments from respondents is available in the appendix.

**Question 2: Regarding the issues you have listed, would you know where go in school if you wanted help for any of these issues?**

This was a closed question as there was only a choice of two possible answers.

The figure below shows that 67% of respondents stated they know where to go in school if they need help with any issues they mentioned in the first question. We feel that this is encouraging. However, one third of respondents do not know where to go in school if they need help with issues. This shows that more could be done in schools and colleges to make more young people aware of who they can go to talk to about their worries.

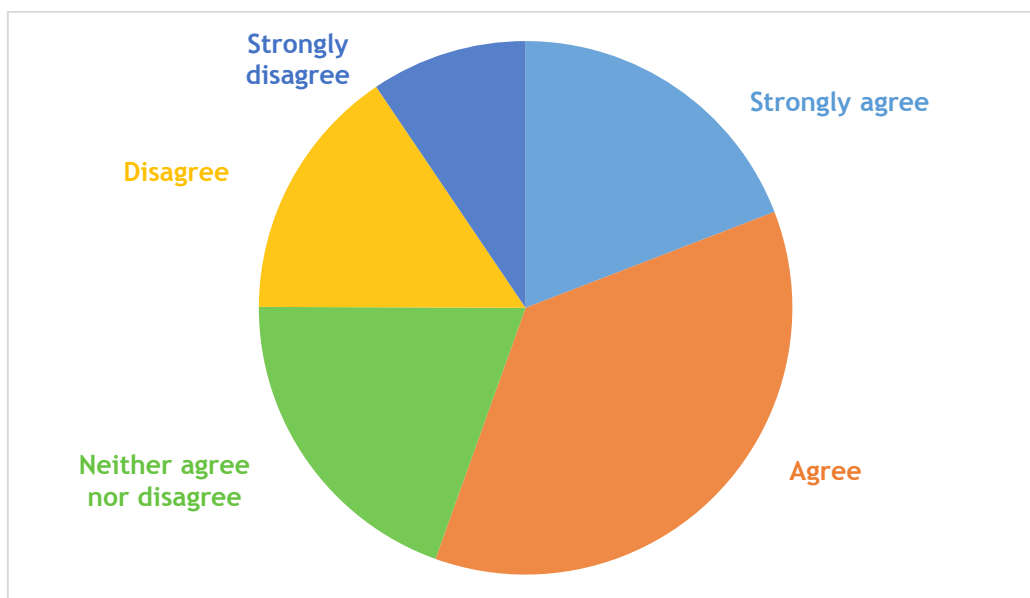


**Question 3: On the scale pick the answer you feel is most relevant to the following statement “There is somebody in my school/college that I feel comfortable talking to about the issues I have mentioned in question 1”**

Answers to question 3 were given using a scale rated 1 – 5 to see how well young people agreed with the statement. The answers were:

- 1 – strongly agree **19.4%**
- 2 – agree **36.34%**
- 3 – Neither agree or disagree **19.57%**
- 4 – disagree **15.48%**
- 5 – strongly disagree **9.46%**

As shown in the pie chart below more people chose the answer ‘Agree’ than any of the other available answers.



**Question 4: Would you like to know more about mental health and wellbeing services available in your area?**

A large proportion of young people (330 out of a possible 465) said they would like to know more information about mental health and wellbeing services in their area. Information for young people regarding the services they can access where they live is vital. It is important for them to know the services they can access to talk about any mental health or wellbeing issues they may be facing in everyday life.

**Question 5: If so, where would you like this information to be available?**

There were six options available to answer this question and respondents could choose more than one answer. The top three answers were:

- School/college - **65.38%**
- GP practice - **37.20%**
- Public events - **25.16%**

Although there is a lot of information out there the results show that young people would like to see more information about the services they can access if needed.

## Question 6: If you could change one thing about the mental health and wellbeing support in your school/college, what would it be?

The responses were grouped around the following themes:

### Privacy

“A more interactive service with guaranteed anonymity.”

“Have a private person you can talk to about issues.”

“Teachers not finding out.”

“Services to be external and separate from in-school affairs, so as not to interrupt my outward persona in school.”

“More support you could get privately i.e. break times.”

### Visibility, accessibility, awareness

“Make information for support a lot more readily available, make it a lot more widely known.”

“For mental health to be made more aware about.”

“I don’t believe mental health support services within my school is emphasised enough - not talked about much.”

“Events and groups allowing mental health to be talked openly.”

“Make it easier to talk about and easier to find.”

“People talking about it - assemblies on mental health and getting diagnosed.”

“Have more access and support available.”

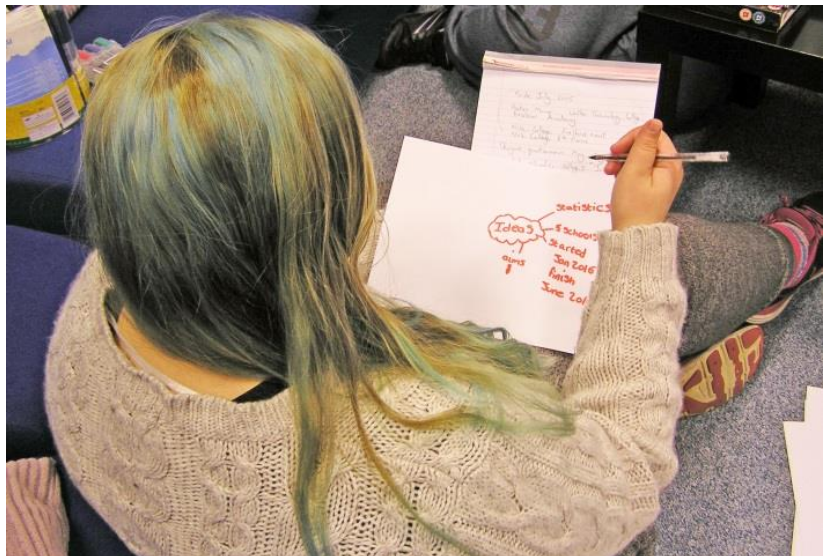
### Stigma

“Make an assembly to make sure that no one feels embarrassed asking silly questions.”

“More accepting and understanding of students who suffer from mental illness.”

“Less stigma - make them sound more inviting, less scary and less isolated.”

“It should be noticed as more of a serious problem with loss of stigma behind it.”



### Counselling

“Access to a psychologist instead of counsellors.”

“Have more people to talk to.”

“Actually existing in my school.”

### More support and understanding

“There should be more awareness in schools raised.”

“Teachers noticing upset students.”

“For it to be more mentioned, teachers to be more approachable.”

“More support - teachers should be aware of students that have any mental issues.”

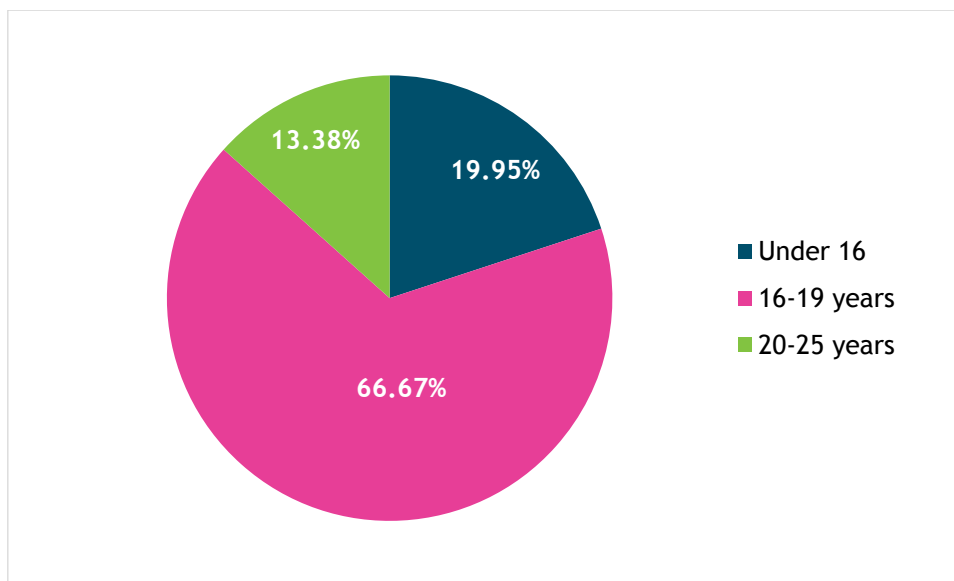
## About the respondents

We tried to involve a diverse group of young people from a range of areas in Newcastle, using both paper and online questionnaires. On the paper questionnaire we asked participants their age, gender, ethnicity and the first part of their postcode. The online version had additional monitoring questions which we felt would be easier to complete with the added privacy offered by this method.

### What is your gender?

More females answered the questionnaire than males: 326 females, 109 males and six transgender young people.

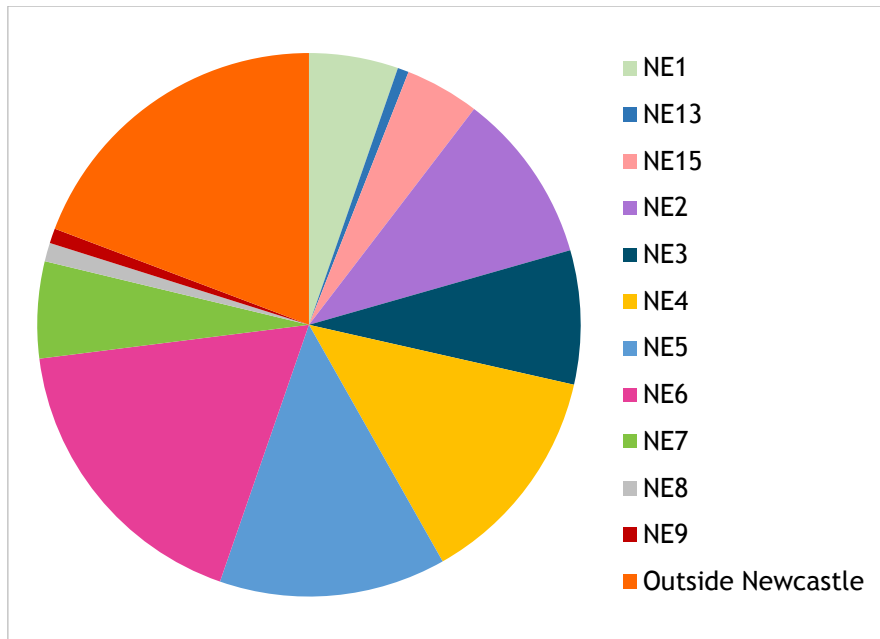
### What is your age range?



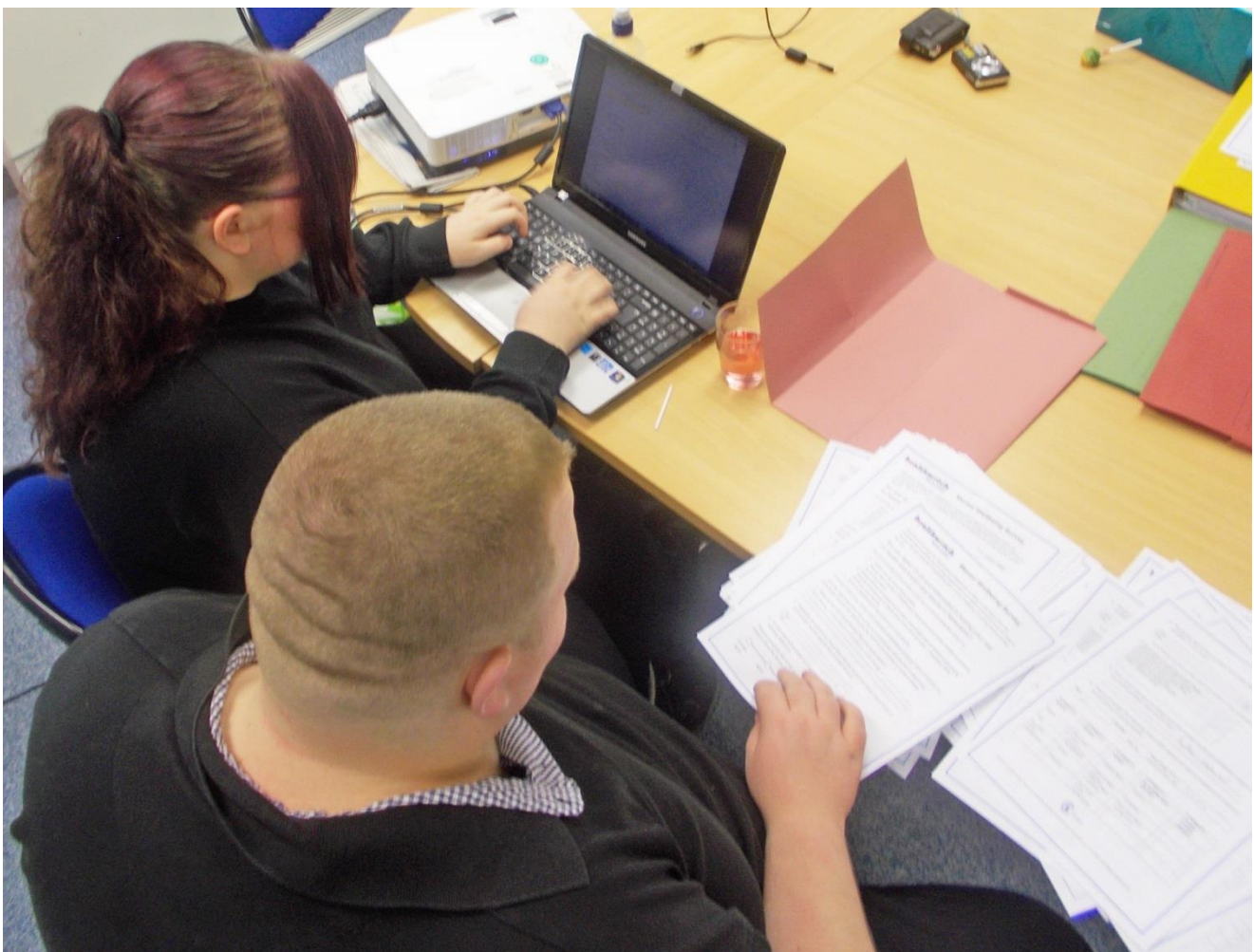
### What is your ethnicity?

- Asian/Asian British - Bangladesh 0.92%
- Asian/Asian British - Other 1.37%
- Asian/Asian British - Chinese 0.00%
- Asian/Asian British - Indian 0.23%
- Black/Black British - African 2.75%
- Black/Black British - Caribbean 0.23%
- White - British 84.67%
- White - Gypsy or Irish traveller 0.69%
- White - Irish 0.46%
- White - Other 1.60%
- White and Asian 0.92%
- White and Black African 0.46%
- Other 4.58%

What is the first part of your postcode, for example NE4?



When carrying out the research we found that 108 of the young people that took part lived outside Newcastle. All of these young people either attended school/college or community events in the city.



### Do you consider yourself to have a disability?

Seventy five people answered this question:

- 13 people considered themselves to have a disability
- 62 people did not consider themselves to have a disability

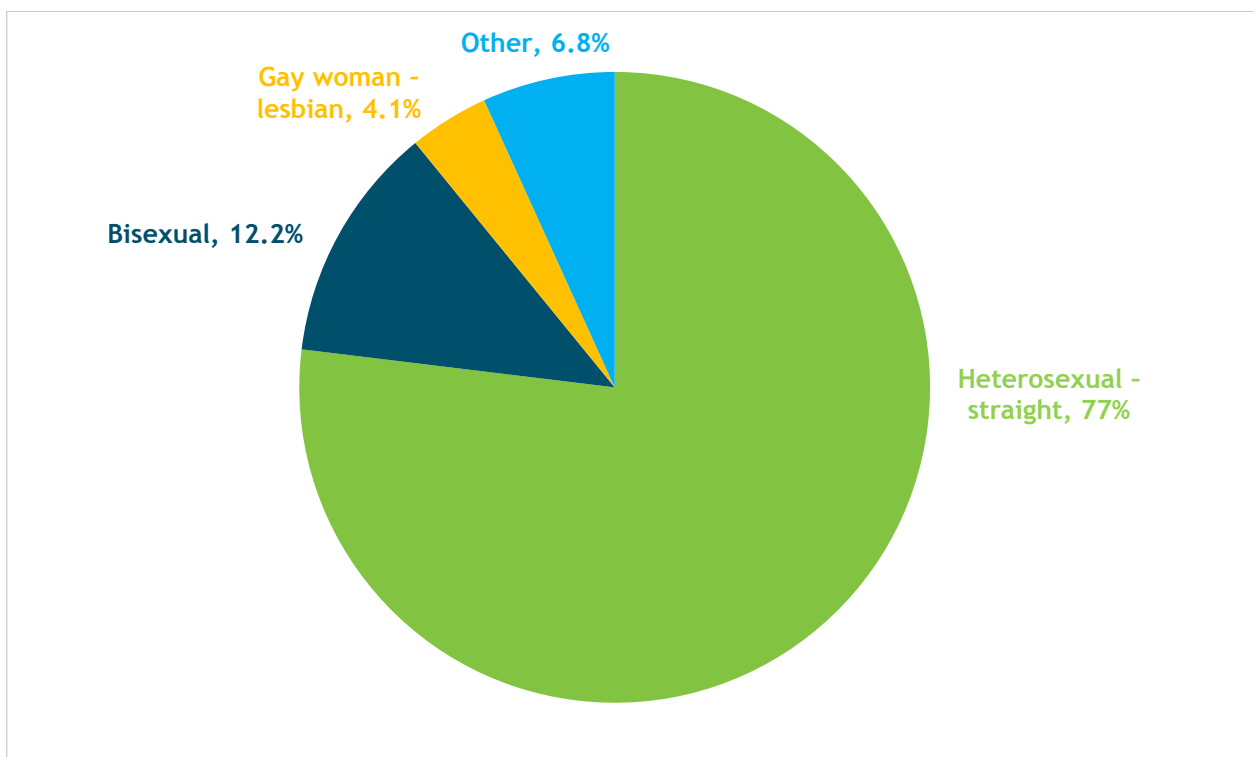
### Are you a carer?

- Yes - 3 people
- No - 72 people

### What is your education/employment status?

Sixty three out of 75 young people were in full time education and the other 12 were either employed, self-employed or unemployed.

### Which of the following options best describes how you think of yourself?



## Recommendations

1. Schools, colleges and universities to work with health services to provide students with information about mental health, covering the wide range of worries identified by young people
2. Schools, colleges and universities to offer classes about coping with exam stress, budgeting and other issues identified by students
3. Schools, colleges and universities to work with health services to reassure young people that they will receive help regarding mental health concerns, and work to reduce the stigma attached to mental health
4. Providers of mental health services to offer opportunities for peer support for young people who have a mental illness through group work/mentoring
5. Mental health services to offer more support for young people around self-image/physical appearance, confidence and self-esteem in the form of workshops in schools, colleges and community settings

## Acknowledgements



Healthwatch Newcastle would like to thank all the young people who took part in this survey – who did so with enthusiasm and openness.

We also wish to recognise the staff at participating schools and colleges, Children North East, and to thank Mark Deverill for help with the questionnaire design.

The core Young Healthwatch Newcastle group who designed, carried out and presented this research project are: Chantelle, Connor, Jade, Leo, Rachel and Ryan with support from Aliya, Charlie, Hollie, Mark, Sian and Soph.



## Appendix – comments from respondents

### What are the main issues/things that you worry about?

#### Educational/financial

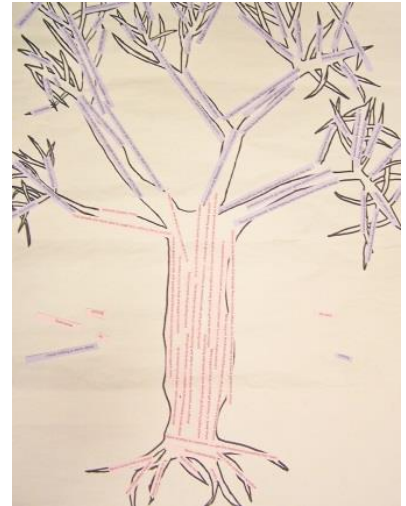
- The stress of exams the teachers don't really care if it looks like you are having a panic attack because of stress
- Grades, university, career.... everything
- My work not being good enough and not doing as good as I want to
- All things educational, grades, university
- GCSEs (new GCSEs), family issues, a lot of learning
- I worry about education, GCSE's and life. Also, I have panic about death.
- Stress, teachers being harsh/unfair/treating badly, teachers not caring about wellbeing, my image, my future, overwhelming feeling pressure/stress, losing friends, growing up, failing at school
- Exams, my future, going out alone
- That I have so much work to do and I won't get it done and how grown up people are compared to me
- Failing school, disappointing my friends/family, disappointing myself. Not doing well in my other hobbies.
- Where I'm going to end up in life. Trusting people.
- Pressures of school and terrorism
- Finding a job to do that I actually like doing. Being constantly told that I pretty much have to go to university and now I know nothing about apprenticeships I want to do.
- Grades, I worry about balancing my social life with work. I worry about doing coursework and not being motivated enough.
- The treatment of women in society not having a stable job
- University fees, ISIS, the government
- Failing in life, death
- Meeting new people, starting new schools college
- The future, jobs after graduation, therapy outside of university
- Uni, money, my body and confidence

#### Image

- My weight and social communication
- Gender identity
- How hard it is for young people
- Weight and eating troubles. Confidence boosts and self-esteem.
- Weight and Appearance
- Putting on weight
- Physical appearance, self-esteem
- Uni and gym (excess weight)
- Appearance/weight, mental health/self-harming
- Every day things, small things like saying something wrong or not doing choices how people view me
- Failing, disappointing people, not being good enough, not being wanted
- Eating and body image
- Whether I'm good enough

## Mental health

- I have an anxiety disorder so life in general
- Improper support for sufferers of mental health, also removing this stigma around asking and realising help
- Young people with worries being disregarded or ignored
- Mental health stigmas-people getting uncomfortable when it's discussed, assuming its attention seeking worries me that I can't talk about how I'm feeling school work. Panic attacks during exams.
- Not be able to maintain a happy life
- Stress, not being able to achieve what I want to do
- Students getting bullied
- People going unnoticed that may have problems but don't seek help
- PEOPLE BULLYING OTHERS FOR MENTAL HEALTH
- Bullying for race
- Having regrets for not doing all I wanted when I'm old and being forgotten
- People knowing what to do if they have problems
- Anxiety, failing in front of people
- My depression and anxiety and self-confidence
- You don't get taken very seriously until something drastic happens, and only children get much help
- Stigma from professionals, surrounding my diagnosis of bpd
- Additive tendencies and unhealthy coping mechanisms
- Awareness of mental health and ease off access to treatment
- Not being respected/taken seriously in the mental health service
- The stigma surrounding mental health and the inability to anything about it
- That I will always be upset
- Not enough mental health services available or very short periods of therapy
- That I might be depressed



## Social

- Being unloved by the people I love
- Meeting new people and getting help if needed
- Arguing with family
- Not being taken seriously/getting respect as a human being. Not fitting into the gender binary and society expecting me to breed.
- Safety for young people on night out, sexual health and gender concerns, mental health, male access to GP services. Getting sexual diseases.
- Losing my virginity
- Pregnancy, drugs, depression
- Deadlines, family problems, moods
- Sometimes I feel like people think they have to be careful with what they say to LGBT people and often they feel awkward as they're almost baddies/labelled
- Being on my own
- Homesickness, paranoia with friends, Uni work, driving

## Contact details

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