



**CHILDREN'S
MENTAL
HEALTH
COALITION**

MANIFESTO

FOREWORD

Children have a right to enjoy the highest possible standard of mental health: they have a right to enjoy a sense of well-being, control over their lives and the ability to realise their potential. Good mental health comes from having a balance between all aspects of life – social, physical, spiritual and emotional. To vindicate the right to mental health, children need supportive environments for themselves and their families, and appropriate supports and services when they experience difficulties.

But in Ireland today, a child's right to mental health is far from vindicated. In a shocking violation of their human rights, children continue to be treated in adult inpatient units. Children face unacceptably long waiting lists for mental health services. There is patchy service provision across the country, responses that fail to meet basic needs and a lack of focus on early intervention and promotion that could prevent future problems. With no national directory of services, navigating the system can, in itself, be a nightmare for children and their families. Insufficient supports are provided for Ireland's most vulnerable young people: those in the care and youth justice systems. The mental health system fails to effectively link with the education and early years sectors, the first point of contact for children outside of the family: a critical missed opportunity.

Now it's time to take a stand. Children's rights must be respected so that each and every child is able to reach their full potential. This is not a pipe dream, but a vision that should now become a reality. It is for this reason that the Children's Rights Alliance and Amnesty International Ireland have come together to establish the Children's Mental Health Coalition. The Coalition, which comprises more than 35 groups from a range of backgrounds and sectors, will advocate for the mental health rights of children and young people under 18 years of age in Ireland. The Coalition's work will validate and build on the excellent work of the Coalition members and others who work tirelessly to support children's mental health around Ireland.

Over the next two years, we will lobby the Government for action in four key areas prioritised by Coalition members, namely: mental health services, the education system, the criminal justice system and the care system. This manifesto outlines the gaps in mental health support for children and the solutions. Its immediate implementation will truly make a difference.

In the long-term, the Government needs to support best practice and move towards the provision of mental health services for children from early childhood up until early adulthood. We believe in an Ireland that strives for a better future for all our children. Today's children are tomorrow's workers, parents, teachers, and leaders. We need to invest now in their well being to do otherwise violates their rights and makes little economic sense.

Our manifesto calls on the Government, political parties, State agencies and all those working with children to use their budgetary, political and legislative powers to realise the right of each child to mental health. Our aim is to breathe life into the State's mental health policy – **A Vision for Change**. Will you join us?

Jillian van Turnhout
Chair, Children's Mental Health Coalition

OUR VISION

Our vision is that Ireland should be one of the best places in the world to be a child, where every child's right to mental health is realised. Not only does the Government have a legal and moral obligation to improve the lives of children in Ireland, it has the power to make this happen.

WHAT CAN BE DONE?

A Government policy on mental health exists – **A Vision for Change**: what is needed now is political action to put that policy into practice. The urgent delivery of child mental health services and supports must now become a political priority. Failure to do so will cost more in the long run. It is impossible to put a price on health, and too many in our communities have experienced the pain of mental health problems and suicide. And yet the economic argument is clear: early intervention to promote mental health and address childhood mental health problems will reduce, in later life, devastating ill-health and consequences such as social exclusion, addiction, deliberate self-harm and suicide.

“You don't know who to turn to... and when you go to talk to someone they don't take you seriously.”

Headstrong focus group

“If youth is a journey, then youth mental health is the feeling that the road ahead is clear, that you can negotiate whatever obstacles may arise, and that you're on your way to a final destination.”

Headstrong focus group

A VISION FOR CHANGE

In January 2006, the Irish Government published a national policy for mental health, **A Vision for Change**. It has respect for human rights as an underlying core value. It makes important recommendations for children: for improving and expanding mental health services for children, including addressing the glaring gap in provision for 16 and 17 year olds; for promoting emotional well-being and the prevention of mental health difficulties; and for cross departmental action, in particular regarding the crucial role of the formal and informal education system.

Regrettably, nearly four years after the publication of this ambitious policy, mental health services for children remain widely unavailable, fragmented, and severely under-resourced.

OUR CHALLENGE TO THE GOVERNMENT

We call on the Government to urgently take the necessary steps to ensure that:

- Children are provided with child-appropriate mental health services and inappropriate placements in adult inpatient units are ended;
- Schools are equipped to engage in mental health promotion and provide early supportive interventions;
- Multidisciplinary forensic mental health services are provided and children with mental health difficulties who come into contact with the law are, where appropriate, diverted into mental health services; and
- Children in care who experience mental health difficulties are assessed and receive necessary follow up services and supports.

THE PROBLEM

Headstrong, the National Centre for Youth Mental Health, found that almost two in three young people in Ireland say they are “unable to cope well with the problems they face”.

Inappropriate inpatient treatment:

247 children were admitted to adult inpatient units in 2008, some as young as 12 years of age – a shocking violation of their human rights. The placing of children in adult wards is due to a lack of child and adolescent places and to the lack of adequate community based care.

Lack of community based services:

Only 54 of the 99 promised Child and Adolescent Community Mental Health Teams (CMHTs) have been delivered to date, and those that are operating are not properly staffed, with on average a third less staff than needed.

Waiting lists and inconsistency:

A total of 3,117 children were on waiting lists for child and adolescent mental health services in November 2008, many of whom were under 16. For those without support their problems may worsen as they wait. The availability of services is patchy across the country. Because there is a lack of mental health services for 16 and 17 year olds in particular, hundreds of these children may never even appear on waiting lists.

Suicide:

According to the World Health Organisation, Ireland now has the fourth highest rate of suicide in people aged 15 to 24 in the EU.

Inequality:

Certain groups of children experience mental health difficulties due to inequality, social exclusion or discrimination, in particular lesbian, gay, bisexual and transgender young people, Traveller, ethnic minority and refugee children, children with disabilities, children with special educational needs and those living in poverty.

Lack of capacity in schools and early years settings:

Schools and early years providers are not equipped to adequately support children with mental health problems.

Policy failure:

Despite **A Vision for Change** acknowledging that early intervention and prevention are essential, these approaches remain woefully under-resourced. The development of mental health services at a local level – comprising health promotion, preventive and early intervention initiatives – to equip families and communities to support children’s mental health needs is crucial.

Significant unmet needs among children in the youth justice system:

Children detained in the youth justice system have worryingly high mental health and substance dependence difficulties. A 2007 UCD study found that 83 per cent of children in a sample group met diagnostic criteria for at least one psychological disorder; and 18 per cent of these had reported experiencing suicidal thoughts.

Inadequate response to children in care:

The State has a duty to ensure that children in its care receive adequate mental health supports and services – both preventive and remedial – when they need them. Children in care are at higher risk of experiencing mental health problems. This is because many children in care have experienced stressful life events, including abuse and neglect, prior to their placement in care. Others are new to Ireland, having arrived as separated children, some of whom have experienced war and trauma in their countries of origin.

Funding deficit:

Only five to 10 per cent of the mental health budget is spent on children’s mental health services, despite children making up one quarter of the population. In 2006, €11m provided to the Health Service Executive (HSE) for new CMHTs was delayed and diverted elsewhere.

Voice of the child:

Under Article 12 of the UN Convention on the Rights of the Child, children have a right to be heard, however children and young people were not consulted in the development of **A Vision for Change**.

YOUTH PARTICIPATION

Involving individuals in decisions that affect them is a core element of the UN Convention on the Rights of the Child, as well as a key human rights principle. The Government has also recognised the right of children to be consulted and set this as one of three national goals in the **National Children’s Strategy**.

We are clear that children are part of the solution and the Coalition’s approach and activities will be informed by the advice and input from children and young people. **To date, the Coalition has consulted directly with more than 150 young people, some of whom have direct experience of mental health problems.**

VOICES FOR CHANGE

A number of high level national and international experts have consistently highlighted gaps in current child and adolescent mental health services, including the Joint Oireachtas Committee on Health and Children, the Ombudsman for Children, the Mental Health Commission, the Inspector of Mental Health Services, the Independent Monitoring Group for A Vision for Change and the UN Committee on the Rights of the Child.

Furthermore, young people are challenging the stigma and taboos associated with mental health and recognising it as a key issue on which they need to be listened to and supported. Dáil na nÓg, the National Youth Parliament, nominated mental health as one of its two priority areas in 2008, 2009 and again in 2010. There have also been recent positive developments in the creation of online and other supports for youth mental health.

The establishment of the Office for Disability and Mental Health in 2008 is a positive development; this office has a remit across four departments Health, Education, Employment and Justice. The Office of the Minister for Children and Youth Affairs' and the Office for Disability and Mental Health's recent consultation with young people on mental health was also a welcome step. The Mental Health Commission has also published the **Headspace Toolkit** for young people on what to expect when they go into hospital, what their rights are, who they can talk to and how to speak up for themselves.

THE AGENDA FOR CHILDREN'S SERVICES

In 2007, the Office of the Minister for Children and Youth Affairs published a policy handbook, **The Agenda for Children's Services**. It sets out the strategic direction and key goals of public policy in relation to children's health and social services in Ireland. It aims to assist policy makers, managers and front-line staff, particularly HSE staff, to engage in reflective practice and effective delivery of services to children and families. It promotes a whole child/whole system approach to meeting the needs of children, and a focus on better outcomes for children and families. The principles of the Agenda should underpin the delivery of mental health services for children and their families.

UNITED NATIONS CONVENTION ON THE RIGHTS OF THE CHILD

The UN Convention on the Rights of the Child is the most widely ratified human rights treaty in history. Ireland ratified this Convention in 1992. The Convention sets out children's civil, political, economic, social and cultural rights. The Convention contains four key principles, namely: non-discrimination (Article 2), best interests of the child (Article 3), the right to survival and development (Article 6) and respect for the views of the child (Article 12).

In relation to mental health, Article 24 of the Convention recognises the right of every child to the enjoyment of the highest attainable standard of health: this is considered by the UN Committee on the Rights of the Child to include mental health. In addition, Article 27 of the UN Convention provides that every child has the right to a standard of living adequate for his or her physical, mental, spiritual, moral and social development.

THE UN COMMITTEE ON THE RIGHTS OF THE CHILD

The UN Committee on the Rights of the Child comprises independent experts who examine the progress of States in implementing the provisions of the Convention. In 2006, the Committee undertook an examination of Ireland. In its Concluding Observations, the Committee criticised the Irish mental health system, highlighting concerns that children with mental health problems do not access existing programmes and services for fear of stigmatisation; and that children under 18 years are treated with adults in inpatient facilities.

"Parents should be told more about mental health issues."

Young people's consultation

WHAT THE COALITION WILL DO

Our manifesto is the product of consultation and discussion within the NGO sector and with children and young people themselves.

While there is a lot to be done by the Government, we have identified immediate steps it can take in the next two years that will lead to real and positive change in the lives of children and adolescents with mental health problems.

The responsibility for mental health is cross-cutting and requires an integrated response. Our manifesto requires actions from the Departments of Health, Justice and Education in particular; it also will require coordination and action from the Office for Disability and Mental Health, the Office of the Minister for Children and Youth Affairs, the HSE, the youth work sector and the Irish Youth Justice Service. The Children's Mental Health Coalition will collectively lobby the Government to ensure these changes are delivered.

“Children should not be drugged up to their eyes if they have a mental problem or locked in a secluded room as that will only make them worse.”

Young people's consultation

“I feel that there should be specific wards for children and this is extremely important that they are treated correctly in a child-friendly manner.”

Young people's consultation

OUR MANIFESTO

THE GOVERNMENT MUST DELIVER ON THE COMMITMENTS IT MADE IN ITS MENTAL HEALTH POLICY, **A VISION FOR CHANGE**, FOR A COMPREHENSIVE MENTAL HEALTH PROMOTION PROGRAMME AND APPROPRIATE MENTAL HEALTH SERVICES.

“There's just nowhere to go. I've had friends who were suicidal and who did go on to take their lives. They were admitted to adult wards that sent them on a downward spiral... they were on wards with adults and chronic mental illness and disability...they thought they must be losing it themselves. We need somewhere to go, to get professional help without feeling like that.”

Headstrong focus group

01. MENTAL HEALTH SERVICES

The Coalition calls on the Government to provide age-appropriate mental health services for children, by:

Ending the use of adult inpatient beds for children. This can be achieved by prioritising the development of appropriate child services, including inpatient beds, day patient services and community based care.

Providing adequate supports and services:

- Child and Adolescent Community Mental Health Teams (CMHTs) must be available nationally to all children in need under 18 years. They must be appropriate, accessible and of good quality. They must be **full** teams.
- Legislation to drive the development of community-based services recommended in **A Vision for Change** should be introduced. Currently, there is no statutory obligation on the HSE to deliver the CMHTs.
- Inappropriate referrals must be ended and no child should be on a waiting list for mental health services for longer than six weeks.

Establishing a national directory. A national directory with comprehensive information on the types of services available, and what each service provides, at a regional level is needed.

02. EDUCATION SYSTEM

The Coalition calls on the Government to take steps to ensure schools and early years settings engage in mental health promotion and provide early supportive intervention by:

Extending the existing Social Personal Health Education (SPHE)

Support Service. The service should have a specific role in supporting teachers by providing training on mental health and how to appropriately respond to students who are presenting difficulties, including making appropriate supportive interventions. This extended service should develop recommendations for schools on effective mental health promotion in consultation with stakeholders, including children and young people.

Ensuring that SPHE has a dedicated and mainstreamed focus on mental health and well-being for students in every school year. SPHE should be delivered to all students in every school year. Some schools are delivering it but the focus on 'emotional well-being' needs to be strengthened to have a dedicated mental health promotion focus.

Developing guidelines for schools on mental health. The guidelines should provide clear procedures on how teachers can raise concerns about individual students' mental health difficulties, along the lines of the **Children**

First guidelines. A designated member of staff should have responsibility, based upon reasonable judgement, for raising such concerns to the appropriate agency, parent or family member. Training should be provided for this designated liaison person.

Using the National Educational Psychological Service (NEPS) more effectively. NEPS is a key cross departmental initiative, and so it is essential that the Government addresses ambiguities about appropriate referral to, and the role of, NEPS, including as a point of referral to children's mental health services.

03. CRIMINAL JUSTICE SYSTEM

The Coalition calls on the Government to provide forensic mental health services to children with mental health difficulties who come before the courts, as envisaged in **A Vision for Change**. They can do this by:

Ensuring adequate services for children in detention. A national assessment standard for children in detention should be developed and for all those with an identified need, follow up support and treatment, both in detention and/or at community level post release must be provided.

Establishing a diversion system. In some cases it may be appropriate to divert a child with mental health difficulties away from the criminal justice system into specialised mental health services. Diversion at the point of sentencing must be provided for in law and specialised forensic services, either residential or community based, should be made available to cater for the child's needs.

04. CARE SYSTEM

The Coalition calls on the Government to develop a national framework for mental health assessment for children in care and to ensure that the HSE delivers the necessary follow up services. It can do this by:

Developing a national assessment standard for children in care. For all those with an identified need, follow up support and treatment should be provided. The delivery of the Ryan Report **Implementation Plan** by the Office of the Minister for Children and Youth Affairs' will be central to the success of this action. It is only when every child in care has a care plan and a social worker that their needs, including their mental health needs, can be adequately identified, regularly reviewed and met whilst they are in care and on leaving.

THE CHILDREN'S MENTAL HEALTH COALITION

Alcohol Action Ireland
Amnesty International Ireland
The Association for Children and Adolescent Mental Health, Ireland Branch
Association of Secondary Teachers Ireland (ASTI)
Barnardos
The Base, a Youth Health Programme
Blanchardstown Youth Service
Bodywhys
Children in Hospital Ireland
Children's Rights Alliance
Dáil na nÓg
Educate Together
The Faculty of Child and Adolescent Psychiatry of the College of Psychiatry of Ireland
Family Breakdown Support Services
Headstrong, the National Centre for Youth Mental Health
Home-Start Ireland
Inclusion Ireland
Inspire Ireland
Irish Association of Young People in Care (IAYPIC)
Irish Congress of Trade Unions (ICTU)
Irish Mental Health Coalition (IMHC)
The Irish National Council of ADD Support Groups (INCADDS)
Irish National Teachers Organisation (INTO)
Irish Penal Reform Trust (IPRT)
Irish Primary Principals Network (IPPN)
Irish Second-Level Students' Union
Irish Society for the Prevention of Cruelty to Children (ISPCC)
Mater Child and Adolescent Mental Health Services
Mounttown Neighbourhood Youth and Family Project
National Association for Parent Support
National Association of Principals and Deputy Principals (NAPD)
One in Four
Pavee Point
Psychiatric Nurses Association (PNA)
The Psychological Society of Ireland (PSI)
St Patrick's University Hospital
Society of St Vincent de Paul
SpunOut.ie

TO FIND OUT MORE

We need your support! To join the Children's Mental Health Coalition, or to find out more about our work, log on to www.childrensmentalhealth.ie or contact: Karol Balfe at kbalfe@amnesty.ie or on 01 8638300.

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