

Education Select Committee: Children's social care inquiry

*The Children and Young People's Mental Health Coalition submission
January 2024*

Summary

The Children and Young People's Mental Health Coalition is a collaborative network of nearly 300 organisations dedicated to advocating for and influencing policy in relation to the mental health needs of babies, children, and young people. Our Coalition consists of diverse stakeholders, all united by a shared commitment to improving the well-being of children. This response focuses on the mental health of care experienced children and young people and has been informed by evidence from members of the Coalition.

Care experienced children and young people are more likely to have been exposed to trauma and adverse childhood experiences and this, coupled with instability during social care placements increases the risk of poor long-term mental health outcomes. Accessing mental health support is difficult, and pathway planning for care leavers is often poor. It is welcome to see the emphasis within the Stable Homes, Built on Love strategy on improving mental health outcomes, but the strategy remains light on detail on how this will be achieved in practice.

Recommendations:

- In order to improve the mental health support available, the Government should invest in personalised evidenced-based assessments and evidence-based interventions within services, delivered by multi-disciplinary teams.
- The Department for Education should work alongside other key departments such as Department of Health and Social Care, Department for Levelling Up, Housing and Communities and the Home Office to develop a coordinated strategy and action plan to tackle adverse childhood experiences.
- The Government should increase the provision of early intervention support in the community through a national roll out of early support hubs in every local area.
- The Department for Education and the Department of Health and Social Care should commit to and fund the full national roll out of Mental Health Support Teams across all schools and colleges in England.
- The Department for Education should develop a fully resourced, national implementation programme to support every school, college and university to adopt a whole education approach to mental health and wellbeing.
- The Government should prioritise the implementation of a holistic approach to family support, including investing in evidenced-based parenting programmes, alongside the full national roll out of family hubs.
- The Department of Health and Social Care and NHS England should provide additional funding to Integrated Care System to provide comprehensive pathway of support, including the development of a dedicated pathway of support for children in care and care leavers.

- The Department for Education should accept and adopt the recommendations put forward by the Independent Review to improve mental health outcomes and support for all care experienced children and young people.
- The Government should update the statutory guidance on Promoting the Health and Wellbeing of Looked After Children.
- The Department for Education should publish the findings from the mental health assessments pilot for looked-after children and how this work will be taken forward within the Stable Homes, Built on Love strategy.

1. The mental health needs of children in care and care leavers

- 1.1 Care experienced children and young people are consistently found to be more likely to have a mental health problem than the general population (Sanders, 2020). In 2021, 45% of care experienced children aged 5 to 15 year olds had emotional and mental health problems (NICE, 2021). This is compared to a rate of 10% for those who aren't care experienced (Ibid).
- 1.2 There has also been an increase in mental health needs for those on the edge of the care system. Analysis of Children in Need data suggests that in the years 2018 to 2023, mental health concerns identified in children in need assessments for children increased by 52.3% from 57,410 to 87,370 (HM Government, 2023). There has also been a rise in the number of assessments where adult mental health has been cited as a concern, and it is now the most commonly identified factor within assessments, ahead of domestic abuse (Ibid).
- 1.3 Many children in care have experienced significant trauma and abuse. There are strong links between exposure to adverse childhood experiences (ACEs) and mental illness (The Mental Health Foundation, 2002; Education Policy Institute, 2019). Negative experiences in care and of services can further compound early emotional difficulties. For example, research shows that 5 in 6 children in care experience a change of home, school or social worker which can re-trigger feelings of loss and experiences of separation (Sanders, 2020).
- 1.4 Our members Thrive further highlight that children are often taken from struggling families to a system with continued instability, with the misconception that solely being removed from their home is enough to help them. However, the absence of risk is not equivalent to the perception of safety. Our members TwoTen Therapy further note that placement breakdown can have a detrimental impact on the mental health of the young person.
- 1.5 Care leavers are also at higher risk of mental health problems than their non care-experienced peers, yet no national data is collected concerning the mental health and wellbeing of care leavers. A survey by Barnardo's of care leavers suggests that 46% were identified as having mental health needs, with 65% not receiving any form of statutory support (The Care Leavers' Association, 2017; Social Market Foundation, 2018). Care leavers are also more likely to

experience a 'cliff edge' in support once they leave care due to poor pathway planning and information about their mental health needs not always being shared with leaving care teams (Smith, 2017).

2. Mental health support for care experienced children and young people

- 2.1 The Education Policy Institute (EPI) have previously highlighted concerns with mental health provision for children and young people with social care related needs (Crenna-Jennings & Hutchinson, 2020). EPI found that whilst specific mental health services for looked after children exist in over half of areas in the country, there are significant inconsistencies in provision due to fragmented commissioning across agencies. As a result, these children do not receive the specific support they need and can fall through the gaps in support (Ibid).
- 2.2 The Independent Review of Children's Social Care further highlighted a number of barriers hindering the delivery of effective mental health care for children in care (MacAlister, 2022). This includes finding that therapeutic input cannot be provided without a stable placement, the transient circumstances of many children in care may mean they lose contact with services whilst waiting to be seen, and that children do not always receive the ongoing support and care they need once discharged from the service (Ibid).
- 2.3 What is more, the type of therapy provided by services may not always be suited to the needs of care experienced children and young people due to experiences of trauma and complexity of need (Smith, 2017). A consultant psychiatrist specialist in this area told us that to access appropriate treatment, there must be accurate identification of psychiatric disorders (not only those related to the label of "care" like attachment and trauma related ones) and to avoid a one size fits all approach for these children. They emphasised that these children need access to services skilled in differential diagnosis across a wide range of possible presentations, alongside knowledge of the specific issues of being a child in care.
- 2.4 They further note that once mental health disorders have been identified, children should receive evidence-based interventions. Some interventions may need to be tailored, or personalised, to the specific child's needs, which can be done effectively and reliably alongside appropriate outcome measurement.

Recommendations:

- In order to improve the mental health support available to care experienced children and young people, the Government should invest in personalised evidenced-based assessments and evidence-based interventions within services, delivered by multi-disciplinary teams.

3. Measures to improve early intervention

- 3.1 Early intervention is key in preventing problems developing later in life, however it is often under-prioritised and under-funded. A Pro Bono Economics report found that local authority spending on early intervention support services declined by 48% between 2010/11 and 2019/20, whilst expenditure on late interventions has increased by 34% (Williams & Franklin, 2021). As a result, the proportion of children's services budgets now being spent on preventative early interventions has declined from more than a third of total expenditure in 2010/11 to less than a fifth in 2019/20 (Ibid).
- 3.2 In order to prevent escalation of need, capacity needs to be built in the system by investing resources upstream in mental health, family, youth, and community services. The British Association of Social Workers (BASW) has noted that they are seeing an increase in urgent cases because there's fewer voluntary, community and preventative organisations to identify and pick up need at an early stage (BASW, 2023).
- 3.3 The early support hub model has been recognised as an effective mechanism for providing early help to children and young people aged 11-25 in the community, providing a youth-led and accessible approach. Early support hubs offer easy-to-access, drop-in support on a self-referral basis for young people with emerging mental health needs, up to age 25.
- 3.4 Schools and colleges have an important role to play in promoting and protecting children and young people's mental health and wellbeing. Evidence from Place2Be shows that children with experience of the care system are over-represented within their school-based mental health provision. In 2022/23, around 1 in 5 young people referred into any of Place2Be's targeted interventions in primary and secondary schools had social care involvement with their family. This is a total of 1,609 children and young people.
- 3.5 Coalition members, TwoTen therapy, also told us how a large proportion of the care experienced children they have worked have had poor experience of education due to moving schools often or early attachment difficulties affecting relationship development with teachers and pupils.
- 3.6 It is vital that mental health support is available in all schools and colleges in order to provide early support. Whilst the Government has taken steps to roll out Mental Health Support Teams (MHSTs) within education settings, there have been concerns and challenges regarding the long-term sustainability and widespread accessibility of this support. Initial targets set for the roll out of MHSTs were limited meaning that not all children and young people will have access to this support, and funding for MHSTs beyond 2023/24 is still yet to be decided. This means there is no guarantee on how much further, or how quickly, MHSTs will be expanded.

3.7 We believe that there should be full roll out of MHSTs to all schools and colleges to ensure all children and young people can access this additional support. This should be coupled with full implementation of whole education approaches to mental health and wellbeing across all education settings to ensure that all parts of the culture actively promote, protect and support mental health.

3.8 Adverse childhood events lead to a substantially higher risk of mental ill health, and other negative outcomes during the whole lifetime of the person affected (Lippard and Nemeroff, 2019). Preventing and minimising adverse childhood events through poverty-reduction, effective support of families and early intervention as well as taking a 'trauma-informed' approach to supporting those who have experiences ACEs will help reduce the harmful mental health consequences, which many care experienced children and young people face.

3.9 In addition, prioritising holistic approaches to family support, including evidence-based parenting programmes, should be considered as one of the most effective early intervention measures that can be taken. Evidenced-based parenting programmes equip parents and carers with the skills they need to tackle issues before intervention is required, subsequently reducing child emotional, behavioural and social problems and promoting effective parenting. For example, Coalition members, Triple P, provide evidence-based parenting programmes. Their programme was used by North Somerset Council as part of an edge-of-care service, which had a positive impact on diverting children from social care, improving outcomes for families.

3.10 Family Hubs aim to provide families with a single access point to integrated support services for early help with social, emotional, physical and financial needs. To date, funding has been provided for 75 local authorities in England to set up new or transformed family hubs. However, no further information has been published on when Family Hubs will be universally distributed across all areas of the country.

Recommendations:

- The Department for Education should work alongside other key departments such as Department of Health and Social Care, Department for Levelling Up, Housing and Communities and the Home Office to develop a coordinated strategy and action plan to tackle adverse childhood experiences.
- The Government should increase the provision of early intervention support in the community through a national roll out of early support hubs in every local area.
- The Department for Education and the Department of Health and Social Care should commit to and fund the full national roll out of Mental Health Support Teams across all schools and colleges in England.

- The Department for Education should develop a fully resourced, national implementation programme to support every school, college and university to adopt a whole education approach to mental health and wellbeing.
- The Government should prioritise the implementation of a holistic approach to family support, including investing in evidenced-based parenting programmes, alongside the full national roll out of family hubs.

4. Mental health assessments

- 4.1 When a young person enters the care of a local authority, an initial assessment should take place of their physical, emotional and mental health needs. To assess emotional wellbeing needs, local authorities are required to use the Strengths and Difficulties Questionnaire (SDQ), however, the effectiveness of such assessments has been questioned. The Education Select Committee has previously identified that a significant number of local areas fail to identify mental health issues when children enter care (Education Select Committee, 2016). Variable, and frequently inadequate, identification of mental health problems is one of the key barriers for children in care receiving the right services in a timely way. There is an urgent need for early assessments and intervention in order to improve the mental and well-being of children in care, reduce placement breakdowns, and reduce extra costs on specialist placements and residential care.
- 4.2 In response, the Government committed to pilot a new approach to mental health assessments for children in care in nine local authority areas over two years, with delivery running from July 2019 to March 2021 (Department for Education, 2021). An evaluation of the pilots found that they developed a new child centred approach to the mental health assessments, yet concluded further evidence is needed to demonstrate effectiveness of the new approach to assessments (Brown et al., 2021). It remains unclear what the next steps are for the looked-after children pilot assessments and how they will fit into the Government's future plans around social care.

Recommendation

- The Department for Education should publish the findings from the mental health assessments pilot for looked-after children and how this work will be taken forward within the Stable Homes, Built on Love strategy.

5. The Stable Homes, Built on Love strategy

- 5.1 A key ambition of the Stable Homes, Built on Love strategy is to decrease the mental health and physical health disparities faced by children in care and care leavers. However, the strategy remains light on detail on how this will be achieved in practice and how access to mental health support will be improved for these groups.

- 5.2 Furthermore, many of the pledges relating to mental health are reliant on existing NHS plans to expand support, rather than placing additional expectations on services to provide specific support for care experienced children and young people or setting out commitments to new support services. This is despite the fact that the Independent Review concluded that the NHS Long-Term Plan and other strategies that aim to improve access to services were not enough to meet the mental health needs of children in care and care leavers (MacAlister, 2022).
- 5.3 We believe that the strategy could go much further to improve the mental health outcomes for all care experienced children and young people. This should include adopting the recommendations put forward by the Independent Review, such as investing in mental health services, upskilling social care professionals in mental health in order to aid better identification of needs, and placing greater responsibility on Integrated Care Boards to develop and publish plans for improving the physical and mental health of children in care and care leavers. The Government should also fulfil their commitment of updating the Statutory Guidance on Promoting the Health and Wellbeing of Looked After Children.
- 5.4 Alongside this, our members have emphasised the importance of greater joint working between health, education and children's services. Through their work, Place2Be practitioners facilitate interactions between relevant authorities, including education, health, social care, and police. For example, Place2Be is carrying out a project in Dundee and Glasgow creating reflective practice spaces that bring schools and social work together – breaking down siloed working and building new networks of professional support.
- 5.5 Finally, our members consistently highlight the importance of collaborative decision making with children, young people and their families, and amplifying their voices in order to ensure that support is designed meaningful. We would welcome clarification on how the voices of children and young people will be integrated into accountability structures (nationally and locally) going forward, especially the voices of young people with multiple and complex needs.

Recommendations

- The Department of Health and Social Care and NHS England should provide additional funding to Integrated Care System to provide comprehensive pathway of support, including the development of a dedicated pathway of support for children in care and care leavers.
- The Department for Education should accept and adopt the recommendations put forward by the Independent Review to improve mental health outcomes and support for all care experienced children and young people.
- The Government should update the statutory guidance on Promoting the Health and Wellbeing of Looked After Children.

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