

The importance of well-being in children and young people

It is some years ago that, while still in clinical practice as a School Nurse and Primary Care Group Nurse Board Member, I was able to pursue my passion for meeting the needs of young people within the community I worked. Following a piece of stakeholder engagement and research, I was able to lead, with service users, the development and implementation of a walk in advice service for the young people in the local area. We called this WACY (the name the young people it was serving decided was the best and most appropriate). What was most exciting was that it was a service designed by the young people it was to serve and it was multi-professional in its delivery. We were able to engage the local GPs and practice nurses; school nurses and health visitors; social services team; the fabulous local community psychiatric nurses; the educational psychologist; the local police constable and, most of all, the wonderful youth workers. The clinic ran weekly at the local health centre, and we had a rota for all the professionals involved. The weekly sessions always had the school nurse and the youth worker and then a combination of two professionals from the rest of the multi-professional team. We always had access to one of the local GPs and an arrangement that any young person could be referred to that GP (a big step in a complex arrangement of GP provision). I am pleased to say that we always had clients, although one would like to think no-one needed us!

Why am I talking about this, in my first editorial? Well, we expected that most of our “walk ins” would be sexual health related, however, what we had more than anything else, were behavioural and social issues which were resulting in emotional and mental ill health and distress. Fortunately, most of these came to us at a stage before crises, and we were able, for most of the time, to either make an urgent referral to our CAMHs’ colleagues, or “head off at the pass” a serious breakdown in mental health, due to the multi-professional expertise we had at our disposal.

I naively thought that almost two decades on, services like the one I describe above would be mainstream and we would be in a position where early intervention was the norm. Sadly, almost 20 years later research by the Children’s Society (2017), shows that a significant minority of children in the UK have low levels of well-being, which they argue has the devastating potential to have a severe impact on their childhood and life chances, as well as on the families and communities around them.

What is a relief is that there appears to have been a resurgence in public interest in mental health, which has been placed in the spotlight by the Royal Princes Harry and William’s openness on the impact of their bereavement following the sudden and tragic death of their mother Princess Diana 20 years ago in August. They have talked candidly of the subsequent impact on their mental health and well-being.

Personally I prefer the term mental wealth and emphasising the positive aspect of mental health and also the importance of emotional well-being. My own doctoral research exploring the promotion of emotional well-being lays testament to this interest (Coverdale and Long, 2015).

In the policy spotlight too, especially in the run up to the general election, MPs were calling for school children to have more time for the promotion of well-being (WiredGov, 2017). However, in spite of this fundamental right, the findings from the joint inquiry into children and young people’s mental health, the health and education committees found that financial pressures are restricting the provision of mental health services in schools and colleges. They cite that there is little time, resource or opportunity to support emotional and mental well-being in schools

following cut backs on the provision of mental health services, such as in-school counsellors and school nurses, despite a growing prevalence of mental ill health among children and young people.

There is clear evidence that half of all cases of mental illness in adult life start before the age of 15 and that one in ten children aged between 5 and 16 have had a diagnosed mental disorder (WiredGov, 2017). It is also acknowledged that schools and colleges have a front line role in promoting and protecting children and young people's mental health and well-being. The Department of Health (2017) stated that secondary school staff would get mental health "first aid" training through a £200,000 funding to help teachers understand and identify mental health issues in children. The programme is delivered by the social enterprise Mental Health First Aid, and staff will receive practical advice on how to deal with issues such as depression and anxiety, suicide and psychosis, self-harm, and eating disorders.

One in ten school-aged children will have a mental health condition at any time, with half of all mental health conditions beginning before the age of 14, making early intervention and support vital.

Promoting positive well-being for children is vital. The Children's Society (2017) research has shown that external factors play a major role in determining children and young people's life satisfaction and life chances. The society has identified six priorities that promote positive well-being:

1. the right conditions to learn and develop;
2. a positive view of themselves and an identity that is respected;
3. having enough of what matters;
4. positive relationships with family and friends;
5. a safe and suitable home environment and local area; and
6. opportunity to take part in positive activities to thrive.

They further advocate that addressing these will help make the UK the best place in the world for children to grow up, and give every child the best possible chance of having a good childhood and a positive outlook for their adult lives.

NICE has also made substantial recommendations for the promotion of social and emotional well-being for children and young people, in particular for vulnerable children aged under five years and all children in primary and secondary education. The right for children having the best start in life is repeated again and again in policy documentation such as Fair Society, Healthy Lives (Marmot *et al.*, 2010) and objectives outlined in the public health outcomes framework for England, 2013-2016 (Department of Health, 2013).

I am delighted to see this edition having two papers that emphasise the importance of children and young people's emotional and mental health and well-being. Sharon Neufeld's "Child and adolescent mental health services: longitudinal data" sheds light on current policy for psychological interventions in the community" and Lucy Mark's "Overview of challenges to implementation of good practice in perinatal mental health promotion in universal primary care and community services".

References

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