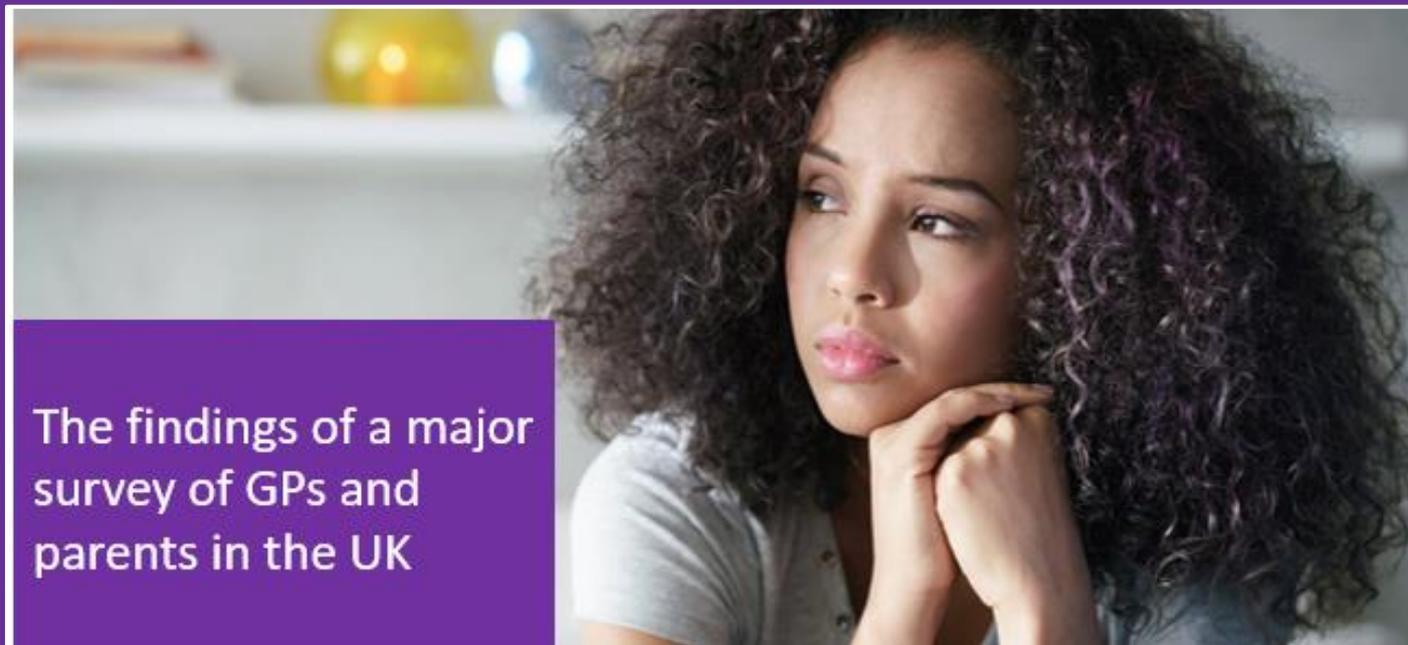




The Failure of Children and Young People's Mental Health Services

2019: Another year in decline

December 2019



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2. Foreword

The Failure of Children and Young People's Mental Health Services 2019: Another year in decline

**Dr Nihara Krause, Consultant Clinical Psychologist
CEO and Founder, stem4**



The findings of this major piece of research confirm that mental health services for children and young people continued to decline in 2019, despite the government's promise to improve services. We hope that the findings from this report will shine a light on what needs to be done if we are going to turn the tide on mental ill health amongst children and young people living in the UK today.

stem4 work with young people, their parents, education professionals and primary healthcare professionals in providing mental health literacy to aid in early awareness and intervention of mental health difficulties. Based on what our user groups have told us of their experiences in asking for help for mental ill health difficulties, we have carried out regular, national surveys to elicit views, to raise awareness of existing need and to provide digital strategies through the use of mobile phone applications as a first step to help.

There is much written about the lack of resource within NHS mental health services which often means that parents and GPs are unable to request support and effective help until the problems are severe. Most families encounter some form of concerning behaviour in their children, but with increasing severity of a mental health condition, families have a hard time in supporting their children, or accessing helpful interventions. GPs who are often the first port of call, are similarly finding it difficult to access support, or to make referral onto specialist services. Whilst the government has started to take welcomed steps to support children and young people's mental health needs, services have been so poorly resourced up to now, that they appear to need to be re-built from 'ground level' up, with less fragmentation. This, third, stem4 survey report includes the findings of our research into the ongoing scale of problems and examines the state of current services for young people and their families.

stem4 have made available a number of mobile phone applications to provide standardised, evidence-based help at an early stage. Although they do not replace assessment and care offered through a mental health professional, these applications offer young people, their families and friends some tools to manage symptoms at an early stage, and a trusted resource that primary healthcare professionals can refer to. Focus continues to be needed for effective, mental health professional delivered treatment of moderate to severe mental health difficulties.

3. Executive Summary

3.1 survey findings

'Mental health services for young people are overstretched and underfunded ... Young patients rejected for treatment ... Long waiting lists ... Few alternative referral pathways ... Limited access to clinical psychologists and psychiatrists ... Community counselling services in schools and the third sector overwhelmed by demand' ... These are the key findings of a new survey of 994 General Practitioners (GPs), conducted for stem4, the charity which works to prevent mental ill health in teenagers.¹

At the same time, a separate survey of 1000 parents was made for stem4 on the issue of children and young people's mental health. 76% of parents report that they worry about their children's mental health, and that they are ill equipped to deal with their child or young person's mental health difficulties (56%), saying they feel as if they have been left to 'fend for themselves' when it comes to the area of mental health. 72% even report that, as a result of access to poor mental health services, they fear for their children and young people's lives.²

Since 2016, the Government has been undertaking initiatives to improve treatment for children and young people experiencing mental health difficulties by 2020/21.* More money has been funnelled into Children and Adolescent Mental Health Services (CAHMS) and also into selected primary and secondary schools with the aim of providing early, preventative and low-level mental health strategies. Be that as it may, 73% of GP's believe that mental health services for children and young people aged 11-18 have continued to deteriorate over the last 12 months, as the survey has found.¹

Only 6% of GPs say that they have seen a decrease in the number of young people aged 11-18 who are seeking their help. Meanwhile, 83% say they are seeing more young patients with mental health problems than they did a year ago.

- 8 out of 10 (83%) GPs have seen a rise in the number of patients aged 11-18 suffering with anxiety;
- 8 in 10 (79%) have seen an increase in young patients with depression;
- 6 in 10 (64%) are seeing more young patients self-harming;
- GPs have also witnessed an increase over the last two years in such mental health conditions as conduct disorders (53%), and eating disorders (35%)

The survey also revealed that, as a result of strict eligibility criteria, more than half of potential patients are being turned away by Child and Adolescent Mental Health Services (CAMHS). GPs say that 54% of 11 to 18-year-olds referred to CAMHS are rejected for treatment, even though most GPs only refer the patients who are most at risk. Nearly a third (29%) of GPs say that over 76% of all patient referrals are now rejected by CAHMS.

Once 11 to 18-year-olds are accepted by CAMHS, 27% wait three and six months between referral to first treatment, and 28% wait up to 12 months or more, as reported by the GPs in this survey.

The survey indicates that there are limited referral pathways for mental health interventions/therapies, and patients are experiencing long waiting times for treatment. As a consequence, 90% of GPs in this survey (90% GPs in the stem4 2018 survey,³ 77% in the stem4 survey in 2016⁴) describe mental health services for children and young people as either extremely inadequate (31%) or very inadequate (59%), while virtually all GPs (99%) fear that these young patients might come to harm while waiting for specialist mental health support.

'Parents being left to fend for themselves'

In the separate survey of 1000 parents made for stem4 in 2019 on the issue of children's mental health, parents reported that, if they had a child experiencing mental health difficulties, they would be most likely to seek help either from their school (45%) or GP (75%). 72% say they are ill equipped to deal with their child's mental difficulties. Unsurprisingly, however, in view of rejections from CAHMS and limited referral pathways, most parents say they are being left to fend for themselves.

If a child's mental health difficulties are not considered severe enough by the GP, or if the child is rejected for treatment by CAHMS, four in ten doctors (43%) tell parents to pay for their child's treatment if they can afford to do so. This is just one alternative action that GPs take or recommend when dealing with young people's mental health:

- 36% recommend patients contact a local charity;
- 29% provide patients with literature on Cognitive Behavioural Therapy (CBT) to help self-manage their condition;
- 32% refer patients to local NHS-commissioned talking therapy services. (That being said, most doctors reported that these services had been closed down);
- 31% recommend patients use one of the digital apps that have been approved by the NHS;
- 6% refer patients for counselling through their GP practice;
- 45% refer patients for counselling either to the school or in the community. (An increase from 10% in 2018. However, most doctors reported that local services were overwhelmed by demand.)

If a parent is also experiencing difficulty with his or her mental health, 48% of GP would refer the parent for counselling, but almost no GPs knew of services to help support and educate the parents through this difficult time. Instead, GPs reported that they would provide the parent with literature to help support their child (45%) or will tell the parent to contact a local charity (45%).

Dr Nihara Krause, Consultant Clinical Psychologist, founder of stem 4, and creator of Combined Minds, a new smartphone app for families and friends to support the mental health of a young person, said:

"These figures show that not much has changed in the treatment and care of children and young people experiencing mental health difficulties. If anything, the crisis continues unabated, despite efforts to improve Children and Young People's Mental Health Services. What this GP survey really demonstrates is the lack of suitably trained therapists in child and adolescent mental health in the community, who are able to deliver evidence-based treatments. In many local areas talking therapy services have been cut to the bone, or no longer exist. Instead they have been replaced with basic level trained, mental health practitioners who have limited skills in supporting children beyond signposting or basic counselling for life issues. This is disappointing for those who have waited a long time for treatment as well. In short, we now have a complete lack of services for children with moderate problems, that GP's can refer their patients to. As a consequence, CAHMS is completely overwhelmed with referrals, accepting only the most severe cases, while community and school counsellors are overrun by demand and are not the best equipped to deal with children and young people with diagnosable mental health conditions and complex issues. It would be far more cost-effective for the government to offer services to this group to prevent complex interventions from being needed at a later stage. Instead, what we have are patients and their families trying to explore how they might make a change, without access to effective early intervention."

Dr Nihara Krause and stem4 say more needs to be done on a number of different levels to support children and young people with mental ill health issues:

- **As a consequence of long delays in access to specialist resource, children and young people's conditions worsen and they are presenting with complex mental health needs. More specialist CAMHS services with medium to high-intensity specialists are urgently needed.**
- **Children and young people who have been on a waiting list for help will benefit from some sort of intermediate support which can help monitor and motivate change before they access treatment.**
- **Children and young people who are experiencing mild-to-moderate and moderate-severe, mental health difficulties require increased access to specialist, early intervention services. GPs and teachers are at the forefront of addressing this crisis and they need much more support. Although the recent establishment of Mental Health Support Teams (MHSTs) in schools is very welcome, these teams provide low intensity intervention skills, which do not meet the needs of the children and young people who have been waiting for treatment or who have moderate or increasing in severity difficulties.**
- **More than half of children and young people with mild-to-moderate or moderate-severe, mental health problems do not meet CAMHS thresholds, or may wait months to be seen until the difficulties are severe enough to meet threshold for acceptance. Parents are left to find their own coping strategies, and as this survey indicates, many feel ill-equipped to know what to do, beyond turning to their GP, school, or friends and family. More education, support and online resources need to be made available at an early stage to this group.**

**Theresa May's State of the Nation report (2018) on existing services together with an outline of proposed action. In 2015 the Government committed to implementing the 'Five Year Forward View on Mental Health' (February 2016), including specific objectives to improve treatment for children and young people by 2020/21. The Government Green Paper published in December 2017, further highlighted a variety of recommended measures backed by NHS Statistics (NHS Digital, 2017) on the prevalence of reported difficulties. The Government's response published in July 2018, committed to taking forward three proposals made in this paper. These proposals were*

- *To incentivise and support all schools and colleges to identify and train a Designated Senior Lead for mental health.*
- *To fund new Mental Health Support Teams (MHSTs), which will be supervised by NHS children and young people's mental health staff.*
- *To pilot a four-week waiting time for access to specialist NHS children and young people's mental health services.*

3.2 stem4 launches Combined Minds, a mobile phone app based on a Strengths-Based approach

To help relieve the strain on stretched NHS services, charity stem4, provider of evidence-based, clinician created mental health apps, has launched **Combined Minds**. Using a 'Strengths-Based' approach, it is the first mobile phone app designed to help family and friends support the mental health of a young person and is the third app created for stem4 by Dr. Nihara Krause.

Combined Minds helps to create a network of support for young people facing mental health challenges. It does this by supporting people around a young person to effect change using positivity – identifying a young person's strengths and enabling the development of resourcefulness and resilience to counter difficulties, which has been shown to be an aid in recovery through helping a young person effect their own change.

The app covers:

- What is (anxiety, depression, eating disorder, self harm, etc)?
- What you have to do
- Things I can do in the moment
- Further help
- Look after myself
- Safety plan

A Strengths-Based approach is beneficial for all involved, as families and friends search for their own strengths, thus creating a solid connection and supportive network as well as making families and friends also seek support for themselves should difficulties be getting them down.

Dr Nihara Krause, Consultant Clinical Psychologist, founder of stem 4, and creator of Combined Minds, a new smartphone app for families and friends to support the mental health of a young person, explains how digital apps can help and why they are needed:

“I first created Calm Harm, stem4’s first app to help young people manage the urge to self-harm, and then Clear Fear, to help manage the symptoms of anxiety. Whilst all the apps use a clinical framework they are created co-collaboratively with young people. Most recently, I created Combined Minds as many parents approached stem4 saying they felt abandoned, unsupported, and ill-equipped help their children and young people overcome their mental health difficulties, and wanted to be able to support them effectively. In addition, stem4 work with young people who look after their friends, often as the first port of call and who could benefit from some guidance to benefit their friends whilst also looking after their own mental health. Combined Minds was conceived to help family and friends support the mental health of a young person in general but also for those who are unable to access mental health services whilst making sure they also protected their own mental health and were able to signpost appropriately. The funds for developing Combined Minds were raised by parents. Combined Minds is based on a Strengths-Based approach, which has been shown to be effective in a young person’s recovery from mental ill health. It helps friends and family find the right tools in which the individuals they support effect their own changes. This app isn’t meant to replace face-to-face treatment, but it is a positive tool when parents or friends can’t access treatment or just want to support a young person in their recovery.”

In the absence of highly trained therapists in the community, and in view of the consequent long waiting times and patients’ difficulties in accessing effective treatments, 44% GPs say that smart phone apps based on evidence-based strategies could play an important role in the treatment and recovery of their young patients. Of the 994 doctors surveyed, 31% say they currently recommend patients use digital apps recommended by the NHS Library, such as stem4’s **Calm Harm** and **Clear Fear**, to help patients manage their symptoms. 32% would recommend apps that can better support families and friends of young people experiencing mental health difficulties.

References

1. Survey of 994 regionally representative GP’s across the UK carried out by MedeConnect Healthcare Insight between 17 and 20 December 2019.
2. Survey of 1,000 regionally representative parents across the UK carried out by Survey Goo between 18 – 20 December 2019.
3. Survey of 1,000 regionally representative GP’s across the UK carried out by MedeConnect Healthcare Insight between 14th and 28th November 2018.
4. Survey of 300 GP’s across the UK, A Time Bomb Waiting to Explode, May 2016 <https://stem4.org.uk/wp-content/uploads/2017/12/A-Time-Bomb-Waiting-to-Explode.pdf>. Last accessed 18.12.18

4. Survey methodology

GP survey

The online doctors survey, conducted by MedeConnect Healthcare Insight, questioned 994 GPs in the UK – between 17 and 20 December 2019.

Table 1 Breakdown of survey respondents by role

Job role	Number
GP partner / principal	548
Salaried GP	274
Locum GP	171
Total	994

Table 2 Breakdown of survey respondents by region

Region	Number
London	109
South West	106
South East	136
West Midlands	88
East Midlands	74
East of England	92
Yorkshire and Humber	82
North East	41
North West	107
Scotland	83
Wales	47
Northern Ireland	31
Total	994

Parents survey

The parents survey, conducted by Survey Goo, questioned 1,000 regionally representative parents across of children aged between 11 and 18 the UK – between 17 and 20 December 2019.

4. Analysis – GP survey

How GP's described CAHMS and local commissioned services to support children and young people's mental health needs: "Totally, horrifically, grossly inadequate; underfunded; over-stretched; no referral pathways other than CAHMS; dire; extremely lacking; unstable and poor quality; appalling waste of time; not fit for purpose; non-existent; abysmal; deficient; dangerous; puts patients at risk; obstructive and unhelpful; in crisis."

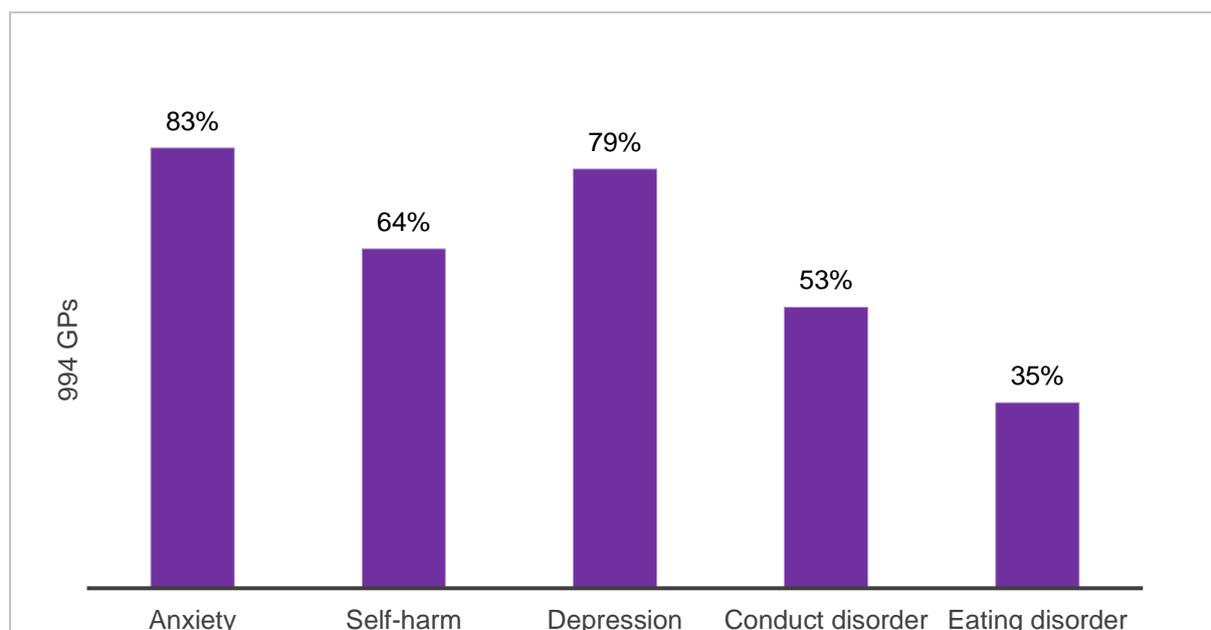
- "I feel I am letting my patients down as they come asking for help, which takes courage, but I know I will have very little to offer them due to impossibility of referring to CAMHS, and lack of local alternatives." GP, Yorkshire and Humber
- "Unfortunately, we have the worst mental health trust, possibly, in the whole country... seeing a psychiatrist is more difficult than seeing the Pope!!!" GP, East of England "
- Appalling service delivery, no money in NHA means mental health gets sacrificed, and the public puts up with all this! Meanwhile we 'show off' to the world how excellent our NHA is. It's only 'excellent' because of the staff who are made ill by working against the odds. Shame on us for not looking after the health of our young ones!" GP, London

4.1 Over the past year, has the number of your patients aged 11-18 with the following mental health problems decreased or increased?

Only 6% of GPs say that they have seen a decrease in the number of young people aged 11-18 who are seeking their help. Meanwhile, 83% say they are seeing more young patients with mental health problems than they did a year ago.

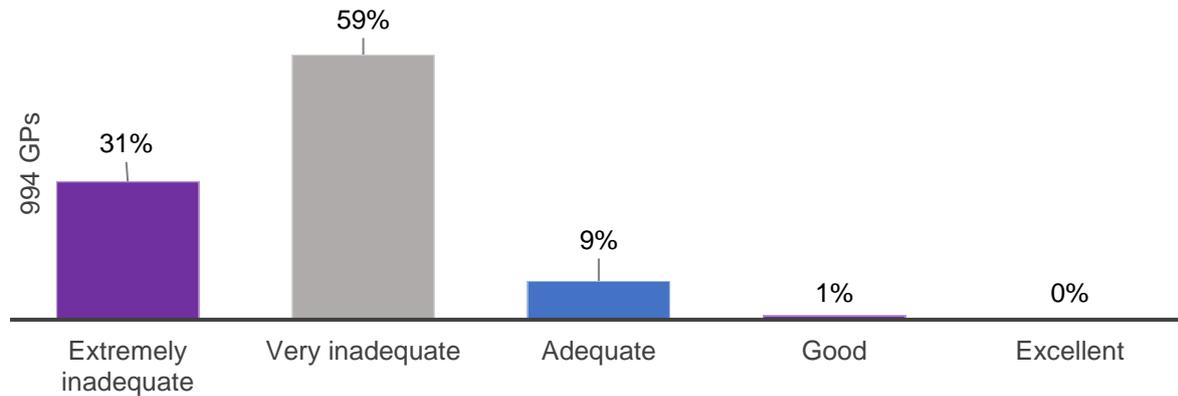
8 out of 10 (83%) GPs have seen a rise in the number of patients aged 11-18 suffering with anxiety;

- 8 in 10 (79%) have seen an increase in young patients with depression;
- 6 in 10 (64%) are seeing more young patients self-harming.
- Doctors have also witnessed an increase over the last two years in such mental health conditions as conduct disorders (53%), and eating disorders (35%)

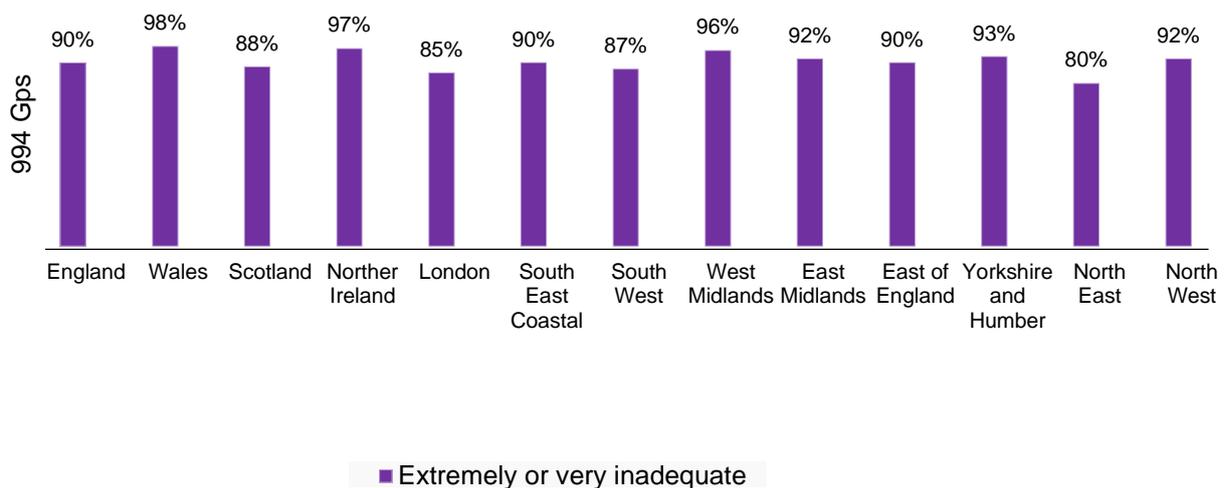


4.2 Which of the following best describes your view on existing health and social care services to support patients aged 11-18 with mental health problems?

90% (90% in stem4 survey 2018³, 77% in stem4 survey 2016⁴) of GPs describe mental health services for children and young people as either extremely inadequate (31%) or very inadequate (59%),

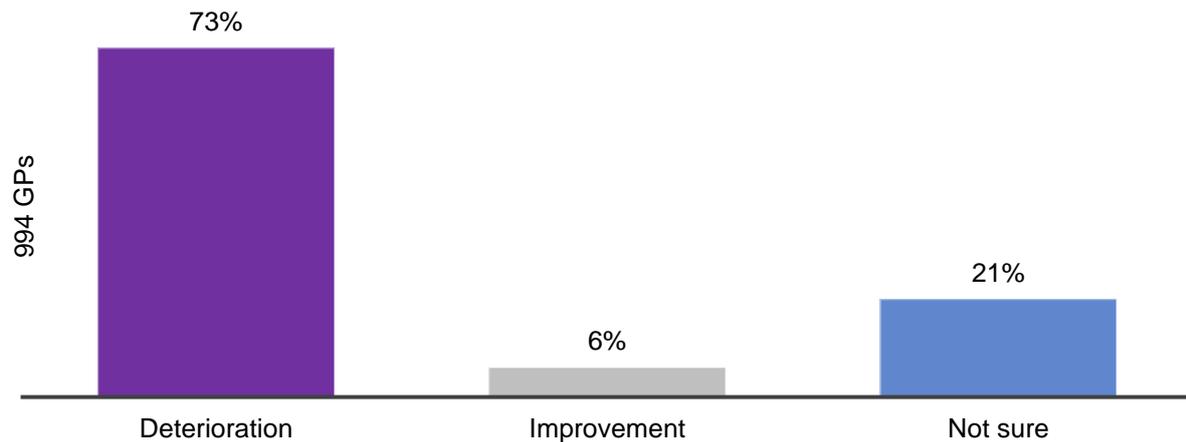


4.3 By region - Which of the following best describes your view on existing health and social care services to support patients aged 11-18 with mental health problems?



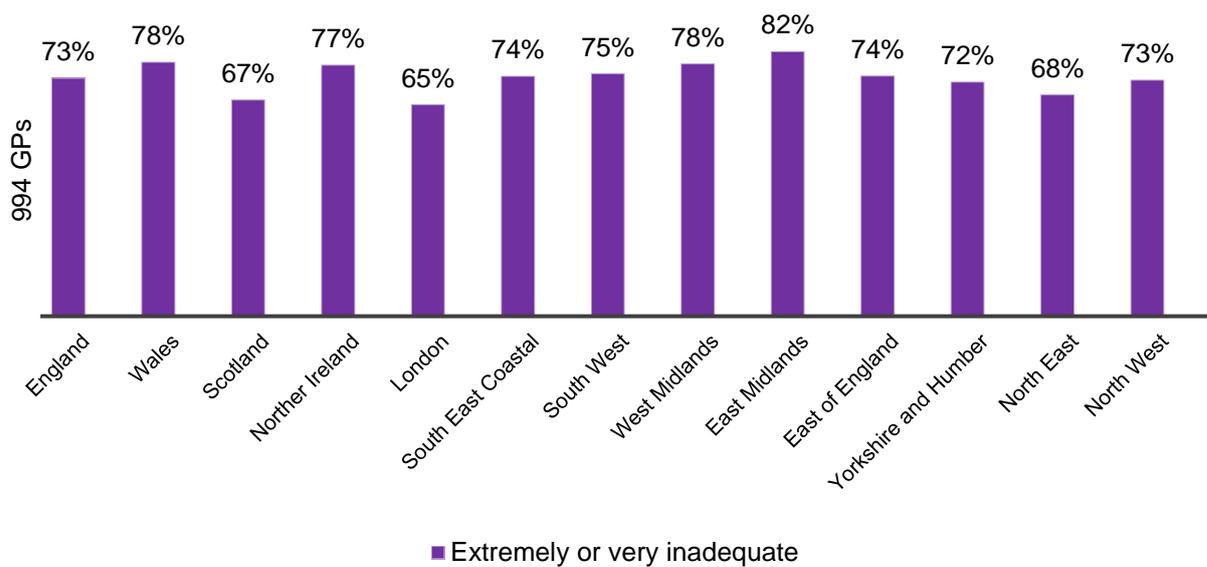
4.4 Over the last 12 months have you seen an improvement or deterioration in existing health and social care services to support patients aged 11-18 with mental health problems?

Two thirds (73%) of GP's say Children and Young People's Mental Health Services have deteriorated further over the last 12 months.



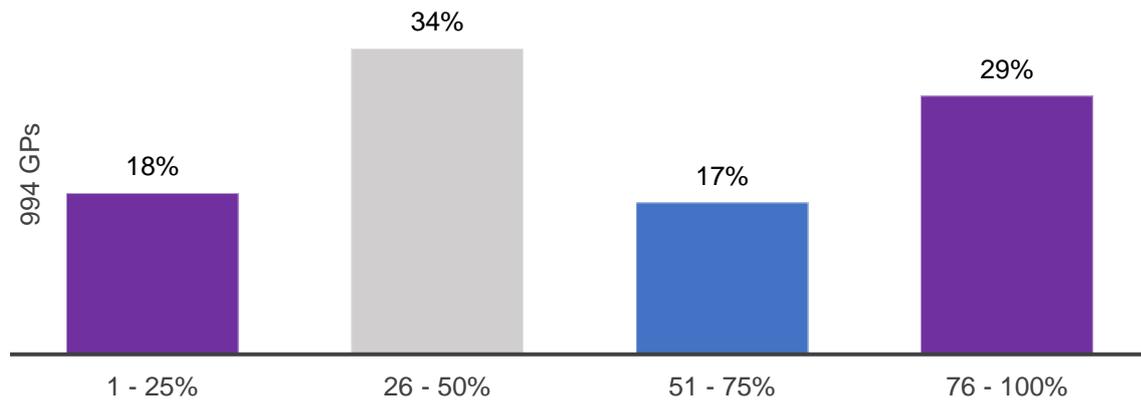
4.5 By Region - Over the last 12 months have you seen an improvement or deterioration in existing health and social care services to support patients aged 11-18 with mental health problems?

GPs in the East Midlands (83%) reported the highest deterioration in health and social care services over the last 12 months



4.6 What percentage of your patients (as a percentage) aged 11 to 18 referred to CAMHS are rejected for treatment as their symptoms are not considered to be severe enough?

GPs report that 54% of all patients aged 11-18 referred to CAMHS are rejected for treatment, even though only the most at risk are referred.

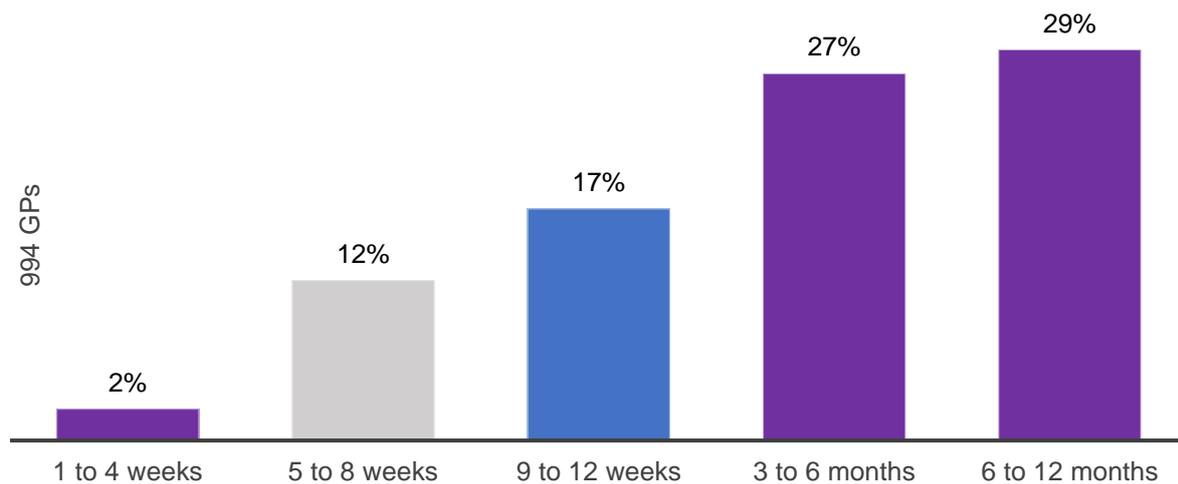


4.7 By region - What percentage of your patients (as a percentage) aged 11 to 18 referred to CAMHS are rejected for treatment as their symptoms are not considered to be severe enough?

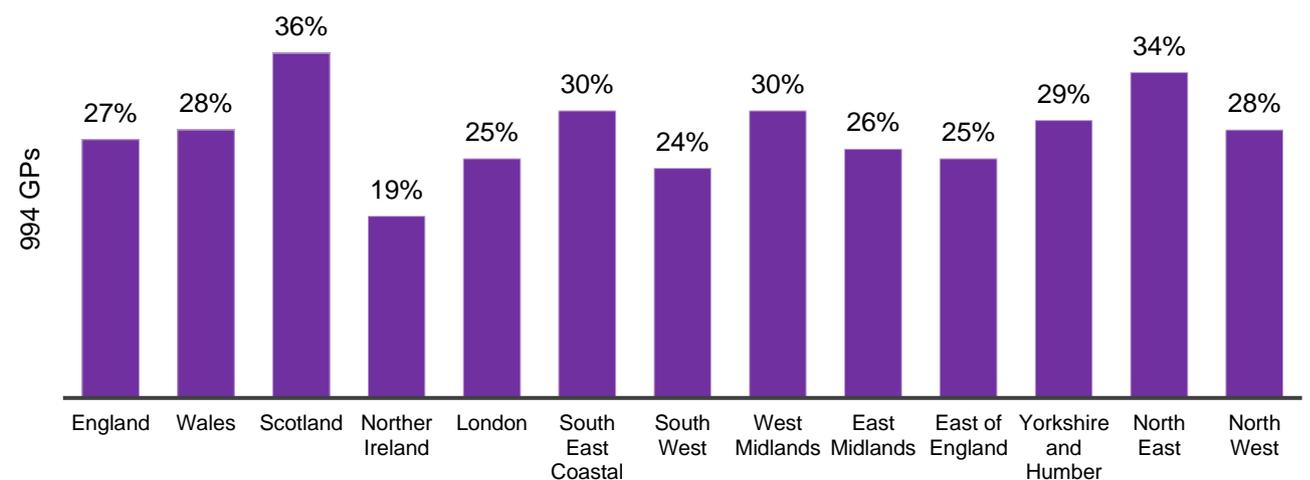


4.8 Of your patients aged 11 to 18 who have been accepted for treatment by CAMHS services, on average how many days do they have to wait from being referred to their first treatment?

Of the 11-18-year-olds accepted by CAMHS, 27% wait at last three to six months to be seen (from referral to first treatment); 28% wait up to 12 months.

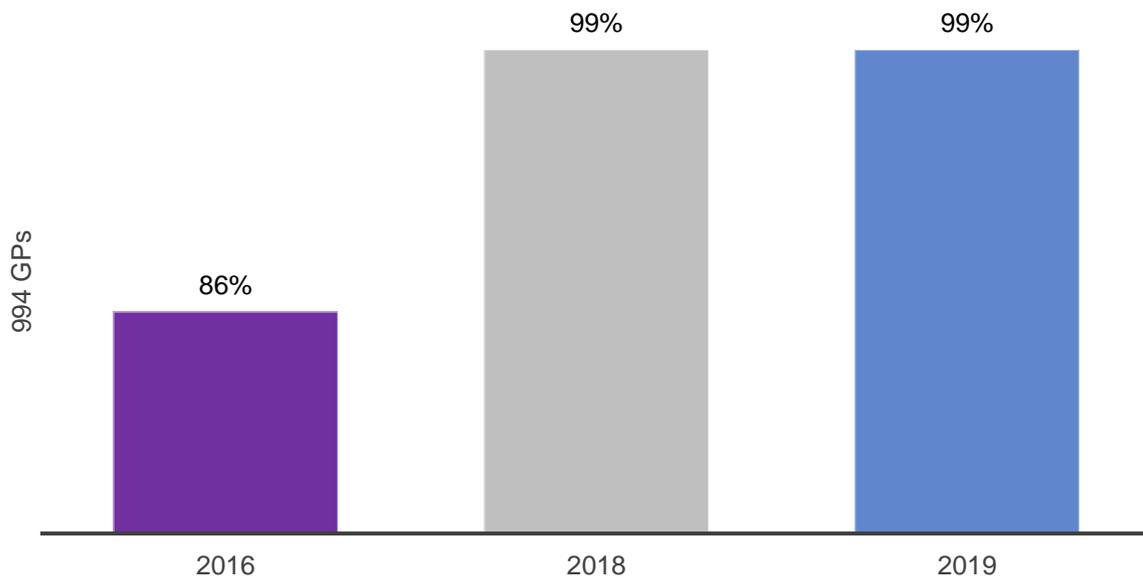


4.9 By region - Of your patients aged 11 to 18 who have been accepted for treatment by CAMHS services, on average how many days do they have to wait from being referred to their first treatment?



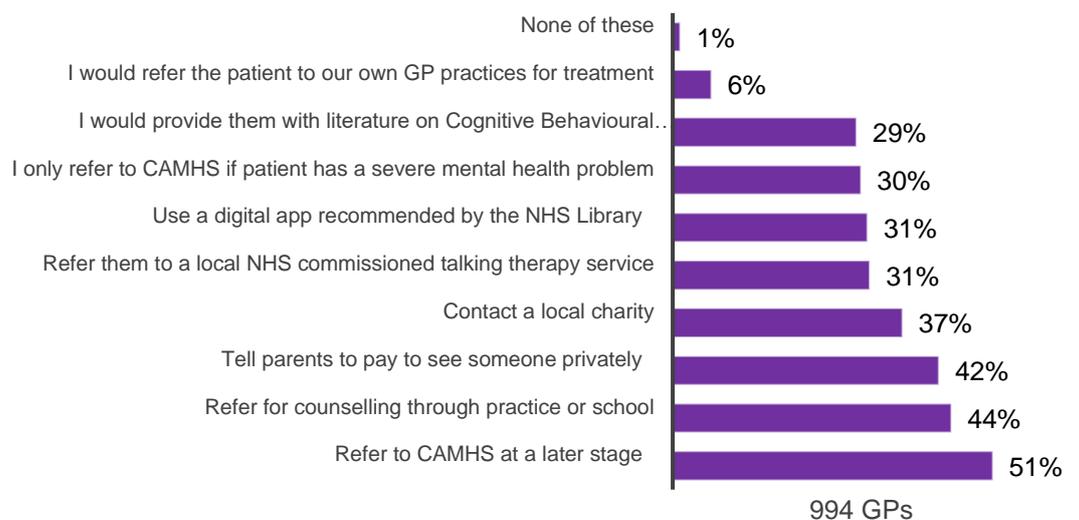
4.10 To what extent, if at all, do you fear that patients aged 11-18 presenting with a mental health condition will come to harm through lack of access to the treatment they need?

99% of GPs fear that these young people may come to harm while waiting to access treatment.



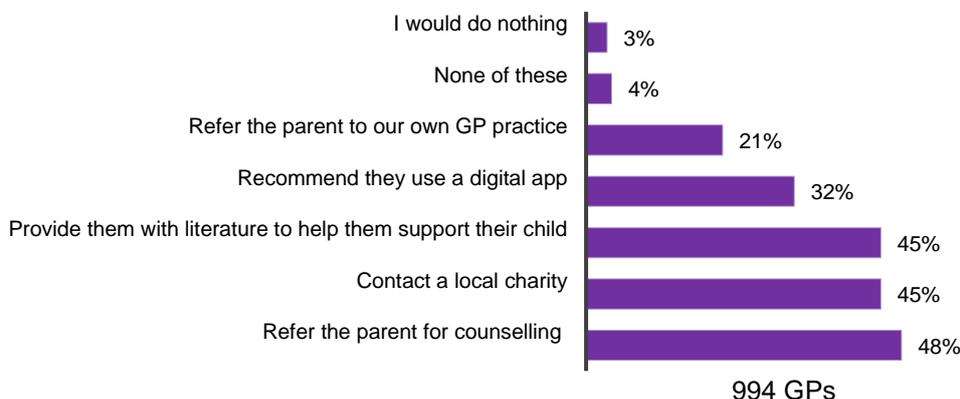
4.11 If a patient aged 11 to 18 is rejected by CAHMS for treatment what next steps would you recommend to the young person or their carer/parent?

Only 31% of GPs say they are able to refer young patients rejected by CAMHS to other NHS-commissioned services, such as talking therapies; most refer the patients back to their school or local charities, which are now overwhelmed by demand.



4.12 Of the patients aged 11-18 who present to you with mental health problems, what type of support and help do you offer to parents?

If a parent is also experiencing difficulty with his or her mental health, 48% of GP would refer the parent for counselling, but almost no GPs know of services to help support and educate parents through this difficult time.



4.13 A sample of the 862 comments received from the doctors surveyed:

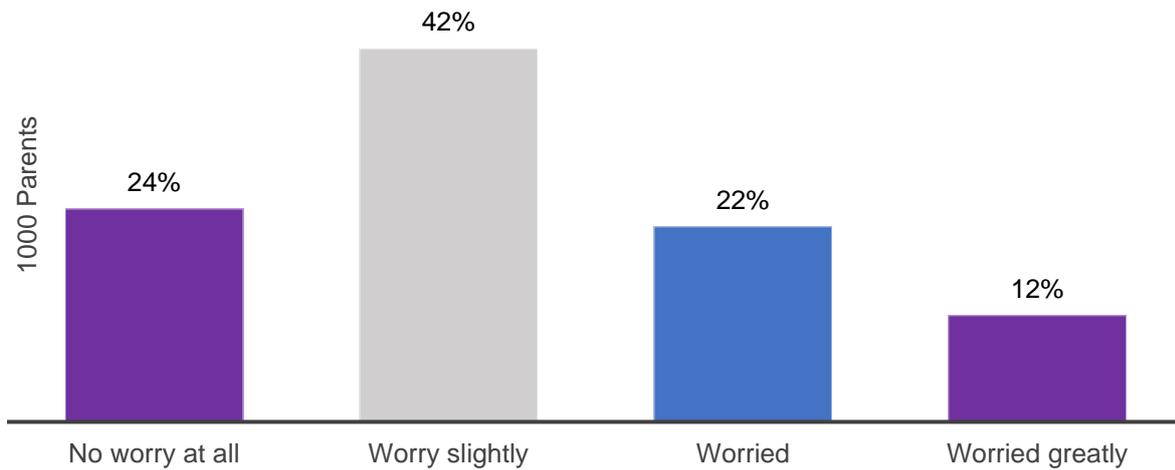
- "I feel I am letting my patients down as they come asking for help, which takes courage, but I know I will have very little to offer them due to impossibility of referring to CAMHS, and lack of local alternatives." GP, Yorkshire and Humber
- "Unfortunately, we have the worst mental health trust, possibly, in the whole country... seeing a psychiatrist is more difficult than seeing the Pope!!!" GP, East of England "
- Appalling service delivery, no money in NHA means mental health gets sacrificed, and the public puts up with all this! Meanwhile we 'show off' to the world how excellent our NHA is. It's only 'excellent' because of the staff who are made ill by working against the odds. Shame on us for not looking after the health of our young ones!" GP, London
- "It's better if young patients have cancer than mental health difficulties. At least with cancer there are treatment pathways. CAMHS just say self-refer counselling e.g. CHUMs. Do CAMHS actually see patients!!!" GP, East of England
- "It is woeful. The last person I referred ended up having a phone call with a school nurse via a new scheme to help adolescents with mental health issues. She was dismissed without further help or offer of counselling despite a history of abuse for which she needs support." GP, South West
- "Services are dire in Northern Ireland. NHS-funded mental health services for young people are essentially non-existent. We are relying on the charity sector or hoping that parents/guardians can afford private help." GP, Northern Ireland
- "CAMHS is terrible in our area. Ridiculously long waits and often rejected referrals. No help at all to patients and parents when they really need it. Often the only way to get them seen is via A&E which then clogs up the system and is not what it is meant for." GP, West Midlands
- "I feel I am letting my patients down as they come asking for help, which takes courage, but I know I will have very little to offer them due to impossibility of referring to CAMHS, and lack of local alternatives."
- "Unfortunately, we have the worst mental health trust, possibly, in the whole country.... seeing a psychiatrist is more difficult than seeing the Pope!!!"

- “Appalling service delivery, no money in NHS means mental health gets sacrificed, and the public puts up with all this! Meanwhile we ‘show off’ to the world how excellent our NHS is. It’s only ‘excellent’ because of the staff who are made ill by working against the odds. Shame on us for not looking after the health of our young ones!”
- “It’s better if young patients have cancer than mental health difficulties. At least with cancer there are treatment pathways. CAMHS just say self-refer counselling e.g. CHUMs. Do CAMHS actually see patients!!!!”
- “It is woeful. The last person I referred ended up having a phone call with a school nurse via a new scheme to help adolescents with mental health issues. The patient was dismissed without further help or offer of counselling despite a history of abuse for which she needs support.”
- “Services are dire in Northern Ireland. NHS-funded mental health services for young people are essentially non-existent. We are relying on the charity sector or hoping that parents/guardians can afford private help.”
- “CAMHS is terrible in our area. Ridiculously long waits and often rejected referrals. No help at all to patients and parents when they really need it. Often the only way to get them seen is via A&E which then clogs up the system and is not what it is meant for.” GP, West Midlands
- “I am extremely worried about the lack of services and the significant over stretching of existing services. We have had loss of funding and therefore the loss of in surgery support and counselling in schools.” GP South West
- “I wish I knew what CAMHS actually did as they never seem to take on referrals! For medication for young patients their help is needed but they won’t see anyone for this.” GP, South West
- “I have undergone additional training myself to help me provide more support for patients who have fallen between services. Parents come asking for help and I have to refer to the school nurse/counsellor before CAMHS will accept them. Often this is appropriate but when children are seriously ill and I have assessed them as needing intervention, I get frustrated that my assessment as an experienced GP isn’t good enough.” GP, Wales
- “Local mental health services for this age group in West Norfolk is abysmal. There is no clinical psychologist or psychiatrist even available in secondary care at present!” East of England
- “We have no locally commissioned counselling services for under 12s, so we cannot refer children under 12 anywhere except their school if CAMHS reject them. Most local schools do not have counselling services or tell us that they are unable to access them. There is one service for over 12s but it also deals with adults so is generally overwhelmed.” GP, East of England
- “It’s difficult to get CAMHS input. They are not able to access “ordinary NHS counselling” under the age of 18 so they fall into the gap between two services.” GP, East Midlands
- “Terrible, patients have to be actually suicidal to be seen soon otherwise it is over a year to wait.” GP, Scotland

5. Analysis – Parent survey

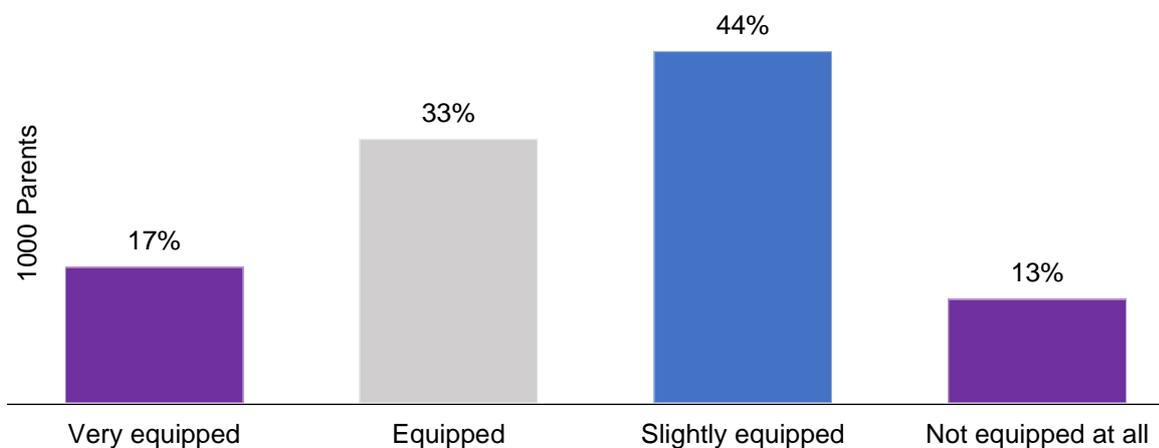
5.1 Have you every worried about your child/young person’s mental health?

76% of parents report that they worry about their offspring’s mental health



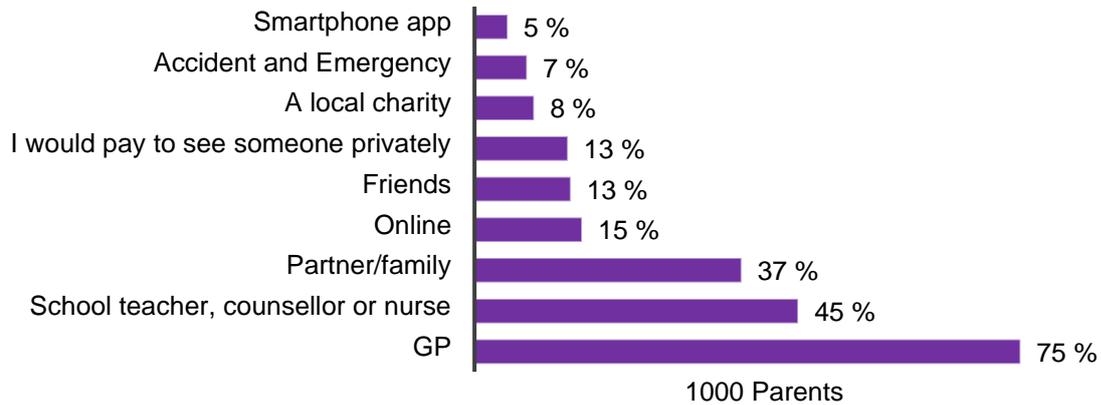
5.2 If your child/young person was experiencing mental health difficulties, but he/she was unable to access services as their mental health difficulties were not considered severe enough to receive treatment, how equipped would you be to help and support them in their recovery?

56% of parents say they are ill equipped to deal with their offspring’s mental difficulties if they were unable to access mental health services.



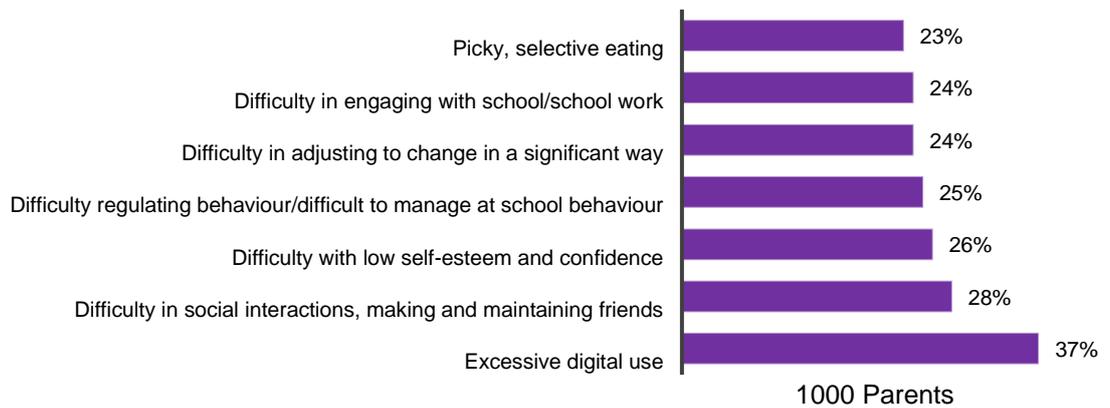
5.3 Who are you most likely to turn to for help and support if your child/young person/children were experiencing mental health difficulties?

75% of parents say they would seek help from their GP if their child/young person was experiencing mental health difficulties. This was followed by a school teacher, nurse or counsellor (45%).



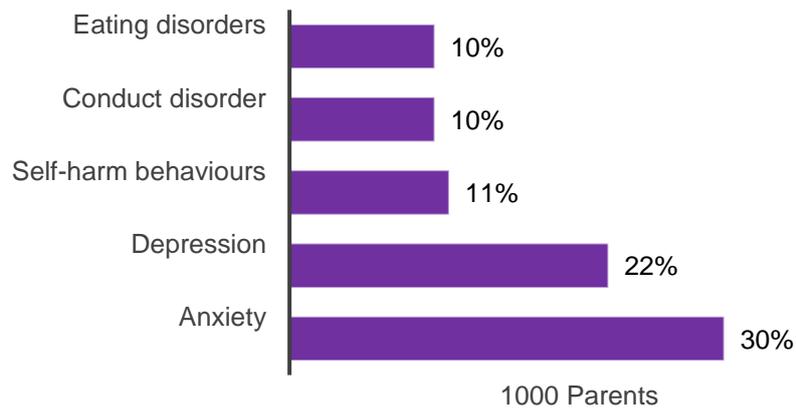
5.4 Has your child/young person/children ever shown any of the following difficulties?

68% of parents report that their offspring experience moderate to severe difficulties in everyday life.



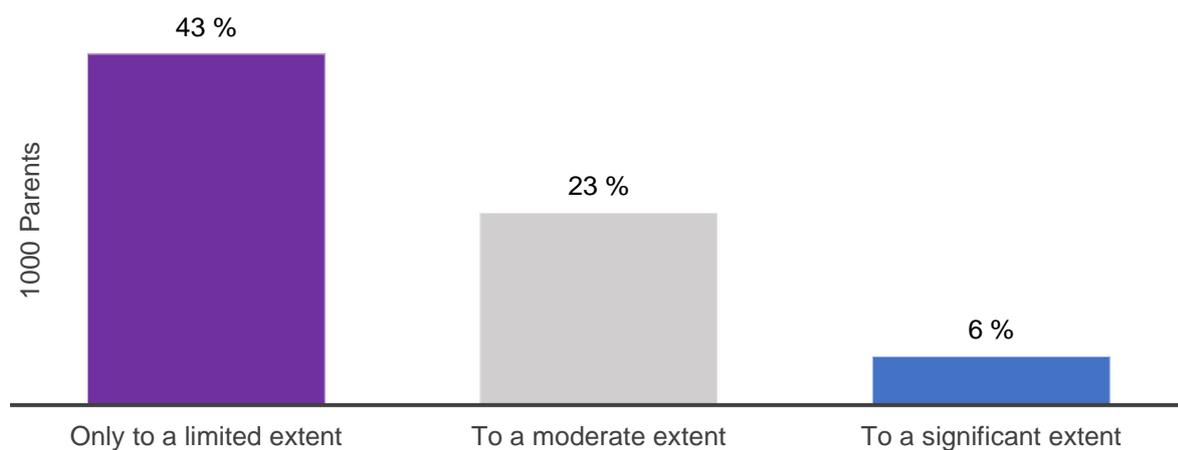
5.5 Which, if any, of the following mental health difficulties have your child/young person/children experienced?

This has led to 52% of parents reporting that their offspring have experienced mental health difficulties, including:



5.6 To what extent, if at all, do you think smart phone apps using evidence-based strategies could play an important role in the treatment and recovery of children or young people with mental health difficulties?

29% of parents say that smart phone apps using evidence-based strategies could play an important role in the treatment and recovery children and young people with mental health difficulties



5.7 A sample of the 408 comments received from the parents surveyed:

- "I have been waiting 6 months for my daughter to see a psychologist through the NHS. Apparently, she is in the system. I have tried to deal with the situation myself through online help. Its very emotionally exhausting."
- "I waited a year and a half for a CAHMS appointment, only to be told that maybe my son was the "type of child who doesn't want to talk about his feelings. I only saw the woman once and had two phone calls, then she decided they couldn't help me and discharged my son."
- "I was sent to A&E with my daughter when she was having an episode, but waited 5 hours and wasn't seen."
- "It appears that doctors and schools are concerned about the mental health of children but there is only very little that can be done unless the symptom are extremely severe. This is isn't right and there should be measures in place to stop symptoms getting worse."
- "It was hard to get help, and we experienced a very long wait. The school told me that if I wasn't able to keep my daughter safe get her to A&E quick but that's not a solution."
- "It's difficult to access services and as a parent you feel abandoned."
- "It's so heart-breaking that there isn't enough support and help for kids and their parents. It's so hard when your child has mental health issues and there's no one to turn to. It's been exhausting for us and with very little help we take each day as it comes. We can't afford any more private therapy so just trying our best. My daughter's father took his own life 4 years ago and I constantly worry about the effect this has had on her on top of already having mild mental issues she has to live with this on a daily basis, and I live with the knowledge that suicide can run in families."
- "My transgender daughter has suffered severe anxiety, depression and confidence issues. She has attempted suicide and has been unable to access any serious help. I trained as a Mental Health First Aider through work because of this, so that at least I could help her effectively."
- "My child has been waiting to see a psychiatrist through child and adolescent mental health team at local hospital for 15 months and I have been told it will be approximately another 3 - 5 months before she will be seen."
- "My daughter has been on the CAHMS waiting list for over a year. Which is ridiculous and has added to her problems, leaving her feeling as though she wasn't important enough for the NHS to care about her."
- "My GP told my daughter to go for a walk."
- "My son has in the past taken an overdose. He said the counselling he received was inadequate."
- The GP didn't take my daughter seriously I had to self-refer to Mind. They were brilliant and helped loads, but disappointing from the GP who said "all teenagers say they may as well be dead."
- "In my experience there are a lack of suitable, local beds for children with more challenging mental health issues. Separating them from family and friends to access a bed, a significant distance away is wrong and only increases the child's anxieties and feelings of isolation. Health and social care providers need to get together and address this."
- "There is definitely not enough help for kids. In my area over the past 3 to 4 years so many have taken their own life."
- "Mental health services are overloaded and seem to spend so much time avoiding seeing patients." "They are understaffed they do not have sufficient places, they have too long a waiting time. When a child is in crisis, they need to help them immediately."
- "We got referred to CAMHS through our GP. They were useless and no help at all. I now have to wait until my son is over 18 to see a counsellor."

6. About stem4

stem4 is a Wimbledon-based, award-winning charity that supports teenage mental health through mental health promotion. It provides evidence-based mental health education, builds resilience, enhances motivation to change and signposts the way to early intervention. stem4 focuses on commonly occurring mental health issues in teenagers, including eating disorders, anxiety, depression, self-harm and addiction. The charity works with students, parents and teachers in secondary schools, and with health professionals such as GPs and school nurses through its conference programme and through digitally-delivered workshops suitable for PHSE in schools. stem4 is also included in the Royal College of GP toolkit.

Over the last 18 months, over 1.5 million young people have sought to overcome their urge to self-harm and to deal with anxiety by accessing stem4's NHS- approved mobile phone apps. These apps – which have been funded by charities including the Paul Hamlyn Foundation and Comic Relief, and by generous donations from individuals – are free to use, and do not collect any personal data. They include:

- **Clear Fear**, which uses the evidence-based treatment Cognitive Behaviour Therapy (CBT) to help manage the symptoms of anxiety;
- **Calm Harm**, which uses the basic principles of an evidence-based therapy Dialectic Behaviour Therapy (DBT) to help manage the urge to self-harm;
- **Combined Minds**, which uses a Strengths-Based approach that has been shown to be effective in recovery, providing practical strategies for families and friends to support teenage mental health

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