



supporting teenage mental health



MENTAL HEALTH PRESSURES PUSH SCHOOLS AND COLLEGES TO CRISIS POINT

JANUARY 2021

THE FINDINGS OF A MAJOR SURVEY OF TEACHERS IN THE UK

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Foreword

COVID-19 pandemic has triggered an epidemic of mental ill health among 5-to-18-year-olds

The many challenges caused by COVID-19 are constantly evolving with increased impact on the mental health of the population. Teachers and parents play a key role in supporting the mental health of children and young people, whilst also strengthening resilience to deal with on-going and future challenges, in young people as well as in themselves.

stem4 was set up 9 years ago in response to a rise in mental health problems among teenagers. We work with supporting the mental health of young people both directly through mental health literacy programmes and the provision of evidence-based and digital intervention tools and through working with their families, education professionals and primary-health care professionals. Since the start of the pandemic stem4 has seen an unprecedented increase in demand for our on-line resources and mental health apps.

With such a clear demand for help from young people during this time and the NHS under enormous strain, stem4 has provided a range of targeted resources for young people. These include hosted on-line conferences and comprehensive teaching materials for parents and teachers on supporting the mental health of young people over the period of the pandemic and beyond.

This survey sets out to explore the current state of mental health support needed in schools and colleges through the eyes of teachers. More importantly, it sets out some guidelines for support and change. Our intention is that it will initiate not only increased understanding of the challenges faced by educational establishments in supporting student mental health but continue to urge a focus on a model of prevention rather than crisis control.

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

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Executive Summary of Key Findings

This stem4 report aims to start a dialogue about the urgent need to action government funding to provide schools and colleges with adequate resources to support a growing need in student mental ill health.

The survey of 500 teachers, working in primary and secondary schools, sixth form and further education colleges across the UK, that forms the basis of this report was conducted between 1st and 4th December 2020.

It provides an important snapshot of the current state of children and young people's mental health in the UK at a time of the pandemic, and confirms the growing problem of mental ill health among children and young people as a consequence of COVID-19, noting a large increase in prevalence, which is negatively impacting students, teachers, schools and colleges.

After reviewing the many government initiatives over recent years to address the growing problem of untreated mental health conditions among children and young people, this report notes that current government prevalence figures under-represent the number of children and young people affected by mental health difficulties, and that existing services are unable to meet the rising tide of the problem. This stem4 report emphasises the crucial and vital role teachers play in tackling mental health difficulties among their students, and who are more often than not left to pick-up the pieces as a consequence of underfunding and lack of referral pathways, as it sets out the results of this important teacher survey. The key findings are:

- Teachers say mental health difficulties among students have risen by 20% in just three months.
 - 54% of teachers say their students' mental health has suffered negative effects as a consequence of the pandemic.
 - Students have been affected by isolation and loneliness (68%), family difficulties (41%), adjustment back to school/academic worries (47%), friendship breakdowns (33.5%), and food poverty (33%).
- Seven in ten (73%) teachers say the pandemic has impacted on their school's or college's ability to deliver on its mental health strategy, leaving some students with little or no mental health support.
- 45% say high volumes of staff absences mean that there are not enough teachers available to respond to students' mental health needs by signposting/referring and then following up with NHS mental health services for appointments.
- 34% of teachers say referrals are rejected by Children and Adolescent Mental Health Services (CAMHS) because they do not meet the threshold of severity; 31% say waiting lists are closed in their area; 29% of say referrals are refused because local NHS mental health services have not resumed to full capacity as a result of the pandemic.

The report recommends that:

- As a consequence of long delays in access to specialist resources, children's and young people's conditions worsen and they are presenting with complex mental health needs. More specialist CAMHS services with 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, taking the burden off teachers, can help monitor and motivate change before young people access treatment. Evidence-based digital support in preparation for face-to-face services may help with this;
- Children and young people who are experiencing mild-to-moderate mental health difficulties require increased access to specialist early intervention services. Teachers are at the forefront of addressing this crisis and they need much more support;
- More than half of children and young people with mild-to-moderate mental health problems do not meet CAMHS thresholds, or wait months to be seen. Waiting times need to be brought down to four weeks.

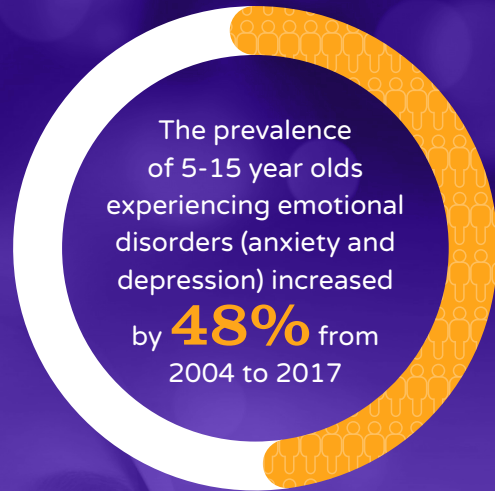
Introduction

The state of Children & Young People's mental health



1 in 6

1 in 6 5-16 year olds with probable mental disorder in 2017 has grown to 1 in 6 by 2020*



Less than

1 in 3

5-19 year olds with a mental health condition get access to NHS* care and treatment

73%

teachers say the pandemic has impacted on their school's or college's ability to deliver on its mental health strategy, leaving some students with little or no mental health support**

COVID-19

will have a negative impact on CYP mental health for both emerging conditions as well as for those with pre-existing conditions



* NHS Digital 2018

** stem4 teachers survey 2020

Introduction

There has been growing information on the lack of mental health support services for children and young people within NHS mental health services³. This leaves parents, educational institutions and primary care professionals unable to request and access effective help at an early enough stage due to strict thresholds for acceptance criteria and depending on locality, some children and young people who are referred can have a long wait to be assessed¹¹. The economic impact of mental health has been calculated as 105.2 billion a year¹. The economic impact on waiting for treatment on NHS services and on education establishments is only known to a lesser extent. Since the Government Green Paper commitment most schools have some mental health provision based on whole school mental health and wellbeing strategy and some, will also be part of a pilot for School Based Mental Health Teams (SBMHTs). These were at an early stage in development prior to the pandemic⁹.

NHS Digital⁶ (2020) confirmed a 1 in 6 increase in probable mental health conditions in 5-16 year olds in June 2020 – a rise from 1 in 9 in the same age group in 2017⁸. It can therefore only be predicted that this growing need will place further strain on stretched NHS resources and on teachers having to deal with managing disruption as a result of the challenges of outbreaks of COVID-19 in schools and colleges, together with increased severity in some cases, possibly with pre-existing conditions. In November 2020, the government announced further funding plans to boost mental health services for children and young people’s mental health. However, it is essential that educational establishments must be seen as included in these plans, and therefore receive the funding necessary to provide such support.

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NHS Digital (2020) confirmed a 1 in 6 increase in probable mental health conditions in 5-16 year olds in June 2020

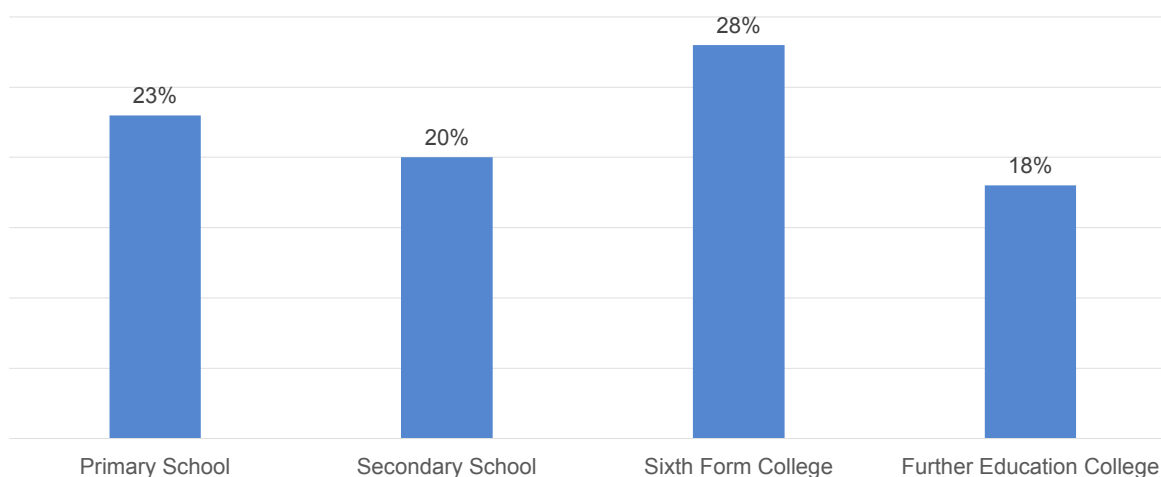
Results of the Survey & Economic Analysis

Results of this major national survey of 500 teachers found that schools were unable to cope with the rising wave of mental ill health among students. Schools' mental health resources were now nearing collapse as the COVID-19 pandemic triggered an epidemic of mental ill health among 5-to-18-year-olds: budgets were reported as both insufficient and inadequately ringfenced; levels of staff absenteeism were high; there were limited referral pathways for the most vulnerable students; NHS waiting lists continued to grow as the cost to schools of children's and young people's untreated mental health conditions mounted up. 18% of teachers described existing health and social care services for students with mental health problems as good, whilst 48% described them as very or extremely inadequate.

Prior to the pandemic, teachers estimated that four students in every class of 22.5 students experienced mental health difficulties. This figure had now skyrocketed, according to the new survey.

Eight in ten teachers (80%) said that, since returning to school and college in September, the number of students experiencing mental health difficulties over the last three months had risen. The average rise across all schools, compared to pre-pandemic levels, was 20% (13% among pupils aged 5 to 11; 24% among students aged 11 to 18).

Table 1: Representation of Teacher's Views to the Question: 'Since returning in the autumn, how many more students in your class are now experiencing mental health issues?'

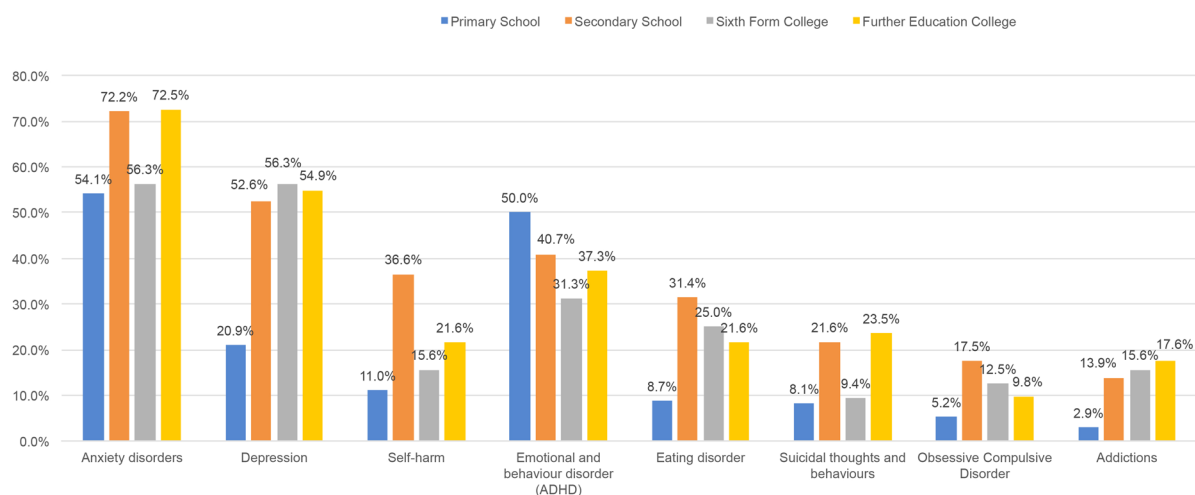


Nine in ten (88%) of teachers said that, over the last three months, they had seen a rise in the number of students with anxiety:

- Nearly half (46%) of teachers had seen an increase in students with depression;
- Four in ten (41%) had seen an increase in emotional and behaviour disorders (ADHD), aggression and concentration issues;
- One in five (21%) were seeing more young people showing signs of self-harm.

Teachers had also witnessed an increase over the last three months in students with mental health conditions such as eating disorders (22%), suicidal behaviours (16%), addiction (12%), obsessive compulsive disorders (OCD) (11%), and post-traumatic stress disorder (PTSD) (8%).

Table 2: Representation of Teacher’s Views to the Question, ‘Which mental health problems have you witnessed in your pupils and students?’



More than half (54%) of teachers said that their students’ mental health had suffered negative effects as a consequence of the pandemic. Students had been affected by isolation and loneliness (68%), family difficulties (41%), adjustment back to school/academic worries (47%), friendship breakdowns (33.5%), and food poverty (33%).

Half (49%) of teachers said their school or college had increased its mental health provision and its capacity to meet growing pupil/student demand, while 40% had increased their mental health budget (of which 9% said that the increase had been ‘substantial’).

“COVID-19 has created a perfect storm of unmet mental health need for children and young people, compromising schools’ and colleges’ ability to deliver on their whole school approach to mental health and wellbeing”.

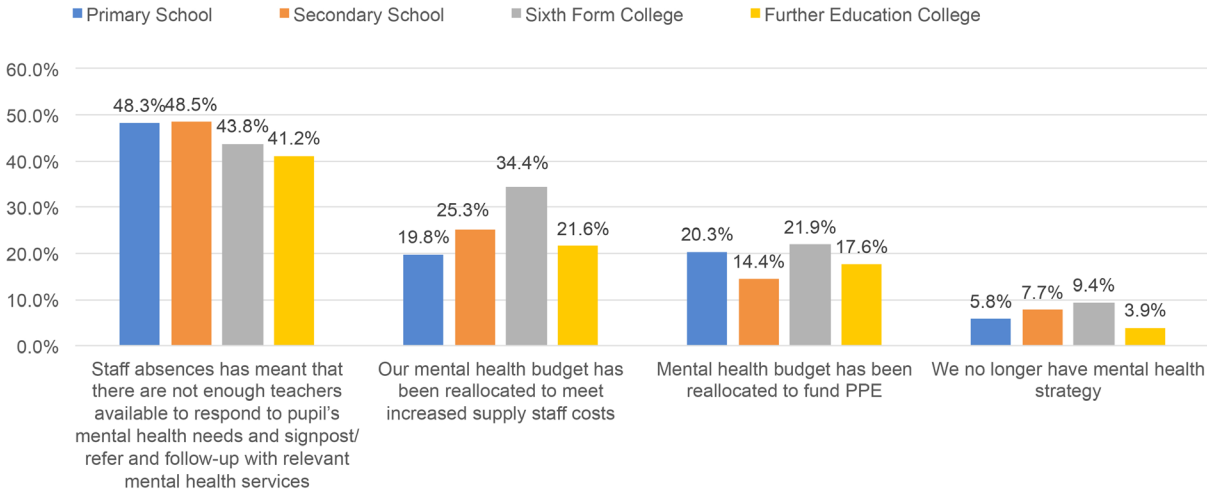
(Secondary school teacher, stem4 survey 2020)

Key factors were: rising levels of mental ill health among students; mental health budgets that are not ringfenced, and the high cost implications for schools when children are stuck on NHS waiting lists for the assessment and treatment of mental ill health conditions for weeks and months.

Seven in ten (73%) teachers said the pandemic had impacted on their school's or college's ability to deliver on its whole school approach to mental health and wellbeing and that some students had been left with little or no mental health support.

- 45% of teachers said high volumes of staff absences had meant that there were not enough teachers available to respond to students' mental health needs, to signpost/refer and then follow up with relevant NHS mental health services for appointments.
- A quarter (25%) of teachers said their mental health budget had been reallocated to meet an increase in the cost of supply staff.
- Nearly one in five (19%) said their mental health budget had been reallocated to fund Personal Protective Equipment (PPE).
- 7% stated that they no longer had a school/college mental health strategy.

Table 3: Representation of Teacher's Views to the Question, 'Has COVID-19 impacted your mental health strategy?'

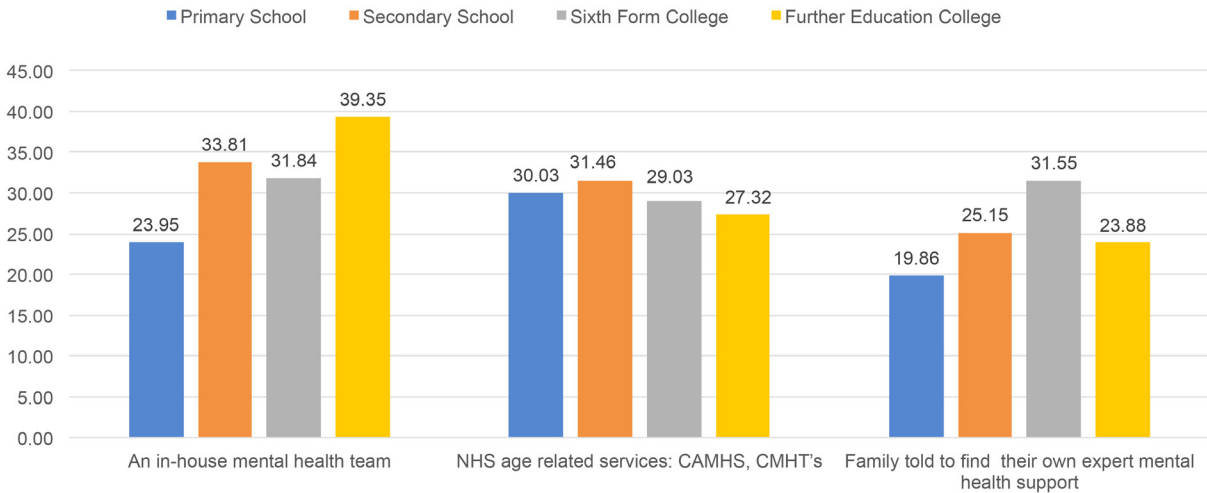


As a consequence, teachers were left with few referral pathways for students experiencing mental health difficulties.

Teachers said that, of young people experiencing mental health difficulties,

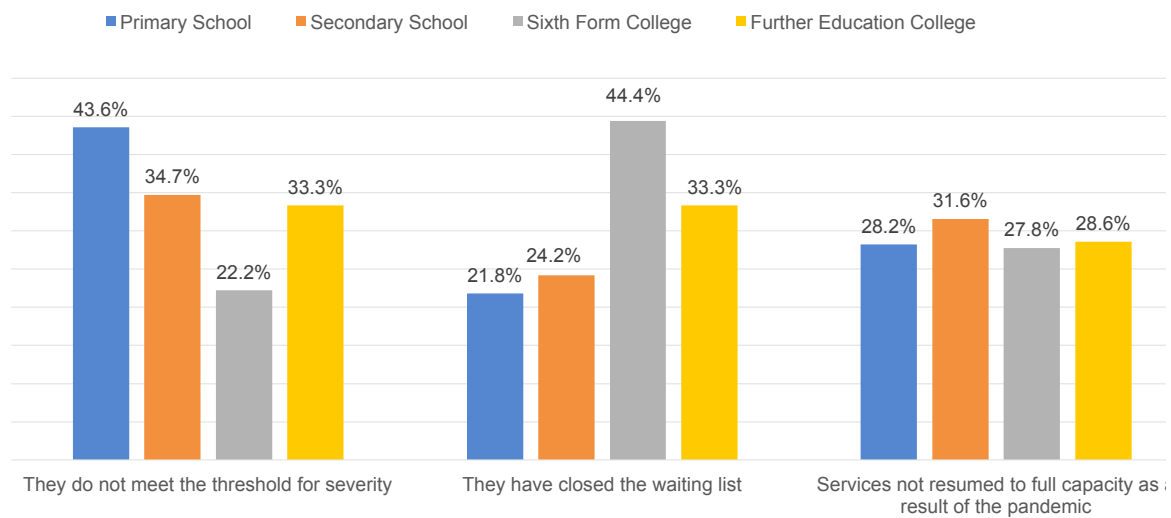
- 32% were referred to in-house school/college mental health teams – of which 16% received group counselling sessions and 27% received one-to-one in-house counselling sessions;
- 25% asked parents to find their own expert mental health support for their child.

Table 4: Representation of Teacher’s Views to the Question, ‘Where do you refer students experiencing mental health difficulties?’



- 29% of students were referred to NHS mental health services [Children and Adolescent Mental Health Services (CAMHS)] for treatment
 - 34% said referrals were routinely rejected because they did not meet the threshold of severity;
 - 31% said waiting lists were closed in their area;
 - 29% said referrals were refused because local NHS mental health services had not resumed at full capacity as a result of the pandemic.

Table 5: Representation of Teacher's Views to the Question, 'Of those pupils referred to NHS mental health services, what are the main reasons given for referrals being rejected?'



With reference to the children and young people who were accepted for treatment by CAMHS (380,000 treated by CAHMS in 2018/19), teachers said that 30% of their pupil referrals were stuck on waiting lists for 9 weeks or more (5-to-11-year olds = 26%, 11-to-18-year olds = 33%, 16-to-18-year olds = 40%).

The physical impact on schools of supporting children experiencing mental health difficulties.

Teachers told the survey that every child and young person with an untreated mental health condition required extra help from teachers, while their parents required support.

- Teachers were now spending 3.6 hours (average) per week dealing with the mental health difficulties of their students;
- 48% of teachers said they had to monitor children currently on waiting lists and those whose referrals had been rejected by CAMHS to make sure their conditions did not worsen;
- 57% of teachers feared that students at their school with mental health problems would come to harm while waiting for treatment.

Table 6: Representation of Teacher’s Views to the Question, ‘How many hours do you spend each week dealing with the mental health difficulties of your students?’

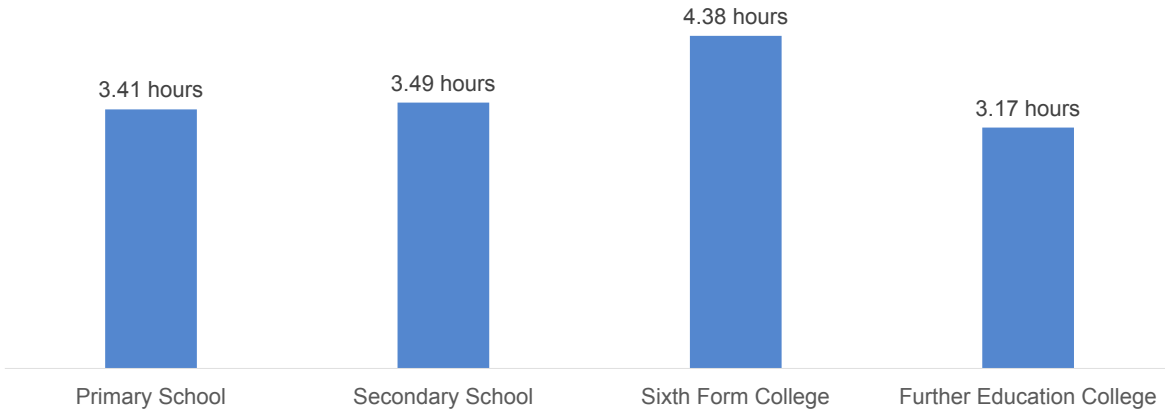
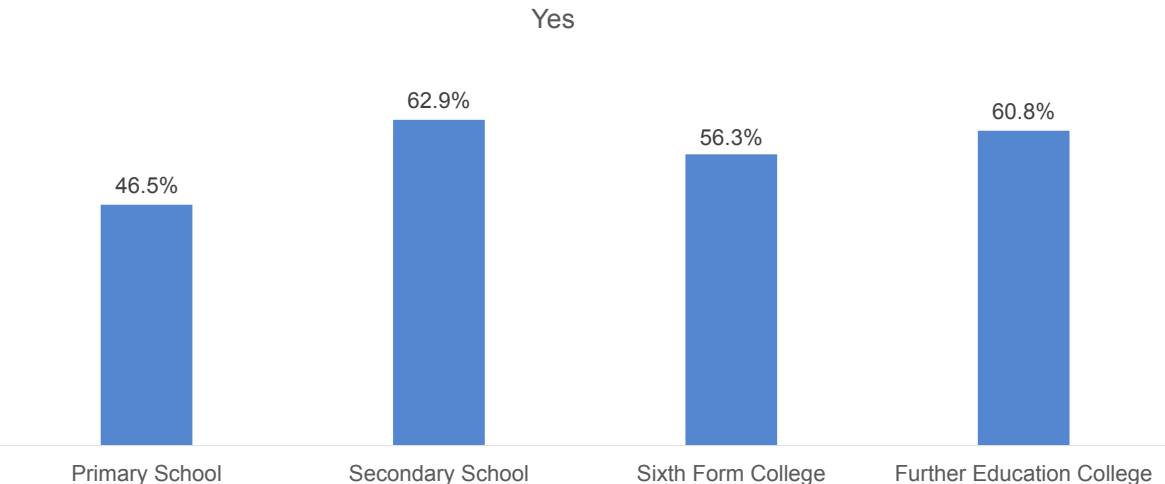


Table 7: Representation of Teacher’s Views to the Question, ‘Have you had fears that pupils at your school with mental health problems will come to harm while waiting for treatment?’



What teachers are saying

Teachers' views on mental health provision in schools and colleges, CAMHS and local commissioned services designed to support children's and young people's mental health needs:

"Woefully inadequate and not fit for purpose when the threshold for treatment from CAMHS is so high - you have to be suicidal before they will do anything." Further education college, Yorkshire & The Humber

"We are fighting a losing battle. There is never enough time to deal with the mental health of students, we can't afford extra counsellors, the NHS waits are too long." College, South West

"Mental health provision in schools has been cut drastically for a number of years and the current restrictions have made the situation come to crisis point." Primary school, West Midlands

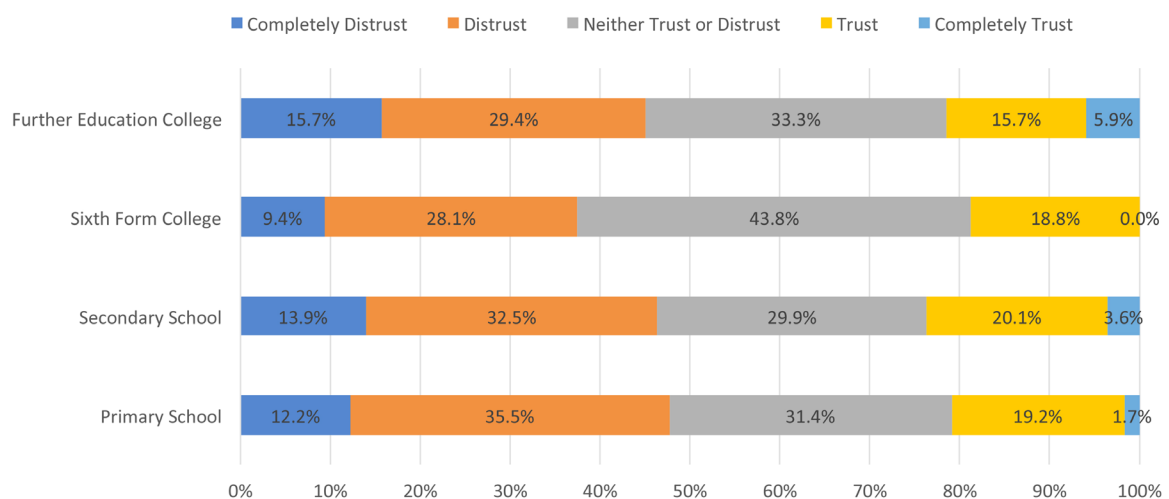
"The government have failed children with mental health issues. Teachers have been left with the additional task of treating mental health issues for children in schools. We have no training for this, no additional time given and no money." Primary school, Scotland

"Teachers have needed to become front line social workers and mental health specialists as well as educators and this is not sustainable or healthy for the young people or staff." Secondary school, South East

"CAMHS is very understaffed and overused, and NHS mental health provision is simply not available." Secondary school, London

Nearly half (44%) of teachers do not trust the government to deliver on its promise to allocate funding specifically for school based mental health support in line with the growing number of young people experiencing mental health difficulties. By comparison just 21% of teachers trust the government to deliver on its promise.

Table 8: Representation of Teachers' Views to the Question, Do you trust the government to deliver on their promises outlined in the pre COVID-19 green paper to allocate funding specifically for school based mental health support in line with growing mental health needs.



Case Study

Rachel Fraser, Assistant Headteacher, Queens Park Community School, Brent

“We are finding that students who have never presented with any form of mental ill health are now approaching us for help with anxiety and depression. With those students who we have already been supporting, they are now in need of more help. Our limited resources are now stretched beyond being effective in many cases. We have provided an extra day a week of therapeutic support, thanks to the Brent Centre for Young People. Nonetheless we are struggling to meet the needs of all our students. As we have an increasing amount of referrals to student and family services and child protection as the term has gone on and resources are stretched, students go on a waiting list and we have to be creative using other services offered by Brent and the community. We refer students through the usual channels but are finding that wait times are longer than usual. As a result some parents have chosen to seek private treatment. However, as private treatment can be expensive it means some of our most vulnerable students either miss out or have to wait a long time before being seen.

Although schools do their best to be as efficient as possible with all levels of funding and support, the nature of COVID-19 has meant we are needing to adapt and respond more than ever before. We have lost quite a lot of mentoring time, the wellbeing practitioner and CAMHS worker resources have been reduced and resources have been further stretched this year with the backdrop of the pandemic. The government has not given schools any more funding to deal with the effects of the pandemic, for example, to pay for hand gel, masks or mental health support. We are struggling to cope, both in terms of time and money.

Teachers have been fantastic role models in showing students how to adapt and adjust quickly and effectively in these uncertain times. Teachers are human too and it remains critical that they too are supported and valued. We do our best, but teachers are now taking on more than ever, the emotional burden of dealing with students increased stress and anxiety as well as managing their own stress of an increased workload due to students isolating and catch up work. There are quite a lot of staff who have been struggling with their mental health, many feel isolated as the social contact has been reduced and they have been struggling with all the pressures and changes they have had to cope with. Staff have accessed local services and talking therapies or have sought support via their GP. Staff are also worried about their own health when having to continue to work through lock down and the risks that this involves.”

stem4 statement about the results of the survey:

Dr Nihara Krause, Consultant Clinical Psychologist, founder of stem 4, and creator of apps Calm Harm and Clear Fear, says:

“Just last month the NHS reported that the number of 5-16-year olds presenting with a probable mental disorder has increased by a third in three years – from 1 in 9 in 2017, to 1 in 6 in 2020⁷. This survey suggests that this official figure under represents the reality of what is happening in schools and colleges nationally. By default, key government policy and funding decisions – which are likely to be based on this data – are not keeping pace with the mental health crisis that is happening right now across the country.

“By contrast, stem4 is in a position to track the mental health crisis in real time as it unravels. Since the start of the pandemic, stem4 has closely monitored daily downloads of our mental health apps: Calm Harm, which helps manage the urge to self-harm, and Clear Fear, which helps manage the symptoms of anxiety. What we see is mental health distress on an unprecedented scale, often as a direct consequence of policy decisions, without the needed interventions in place to minimise their negative effect.

“If this government is serious about turning the tide of mental ill health in this young generation, it needs to keep promises made, act decisively by ring-fencing funds for mental health treatment and take urgent action now.

“Firstly, the government needs to clear the backlog of delayed referrals in specialist NHS mental health services for children and young people. Secondly, it needs to deliver on its promises to reduce unnecessary treatment delays, while simultaneously increasing access to treatment as laid out in the Green Paper⁴ and the NHS Long Term Plan¹⁰. And thirdly it needs to ensure that the £500 million earmarked for children’s and young people’s mental health in the 2020 Spending Review⁵ is used specifically to fund school-based mental health support, in line with growing need. That money must also be ring-fenced to ensure that hard-pressed schools and colleges do not channel it elsewhere.

“stem4’s research clearly shows that schools and colleges are fighting the COVID-19 pandemic on two fronts: physical and psychological. The time for action is now and what children and young people need is access to evidence based services at all levels, from early prevention through to expert NHS help.”

stem4 recommendations:

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 resources, children's and young people's conditions worsen and they are presenting with complex mental health needs. More specialist CAMHS services with 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, taking the burden off teachers, can help monitor and motivate change before young people access treatment. Evidence-based digital support in preparation for face-to-face services may help with this;
- Children and Young People who are experiencing mild-to-moderate mental health difficulties require increased access to specialist early intervention services. Teachers are at the forefront of addressing this crisis and they need much more support;
- More than half of Children and Young People with mild-to-moderate mental health problems do not meet CAMHS thresholds, or wait months to be seen. Waiting times need to be brought down to four weeks.

New Pro Bono Economics (PBE) Study on the cost of mental health to schools

Untreated mental health conditions of children stuck on NHS mental health waiting lists are costing schools and specialist education services £69 million a year.

Pro Bono Economics key findings from the 'The impact of waiting lists for children's mental health services on the costs of wider public services', November 2020.

1 in 8 children and young people in the UK suffer from at least one mental disorder. However, many have to wait weeks or months to access mental health services. This report, commissioned by teenage mental health charity stem4, assesses the cost to the wider public sector that results directly from the untreated mental health difficulties of young people while they are on the waiting list for children's mental health services. The analysis finds that:

- The 380,000 children and young people treated by specialist NHS Children's mental health teams in England in 2018/19 waited an average of just over 7 weeks for treatment.
- The untreated mental health issues for these children and young people whilst on waiting lists are expected to cost public services an estimated £75m per year, the equivalent of around £200 per child receiving treatment. However, an estimated 87,000 (23%) of these children have to wait more than 12 weeks, costing public services an average of nearly £500 per child.
- £48 million of that cost is borne directly by schools and colleges and £21 million by specialist education services (90%). The remaining £6 million falls to social care and other health services.

- The above analysis does not take into account 35% (250,000) of children and young people who had their referrals closed before they received treatment, since their condition was not seen as severe enough. This means that the costs of children's untreated mental health conditions could be significantly higher than these estimates. If the analysis includes those cases that are closed before treatment, then total costs could increase to around £210m, which suggests that the £75 million figure is conservative.

Jon Franklin, Chief Economist at Pro Bono Economics, says:

“Our work highlights that funding decisions for NHS children's mental health services cannot be made in isolation. Where children are waiting for weeks and months for NHS services, of course there are consequences for the individuals and their families. But schools and teachers are also picking up the tab. The hidden consequences for school costs of lengthy mental health waiting lists for children and young people could be significant.

Meaningful public debate on this issue is currently hampered by a lack of clear data and information on what different parts of government are spending and how effective that expenditure is. If, as a society, we want to tackle the serious and growing problems with the mental health of the UK's children then we need more transparency from NHS, schools and other children's services so that we can see the full picture and deliver coordinated action in an effective way.”

About Pro Bono Economics

PBE is a research charity that uses economics to support the social sector and to increase wellbeing across the UK. It combines project work for individual not-for-profits and social enterprises with policy research that can drive systemic change.

About the Survey

Between 1st and 4th December 2020, stem4 conducted a survey (with Survey Goo) of 500 regionally representative teachers across the UK.

Table 9: The Regional Distribution of Teachers Surveyed Across the UK

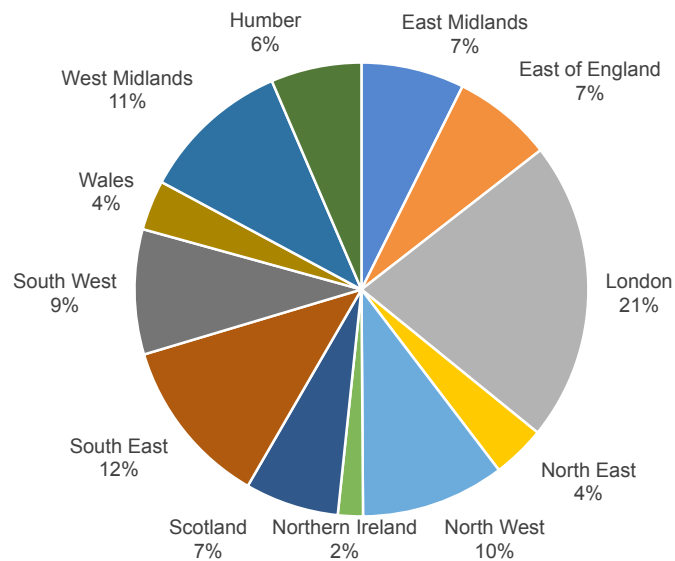
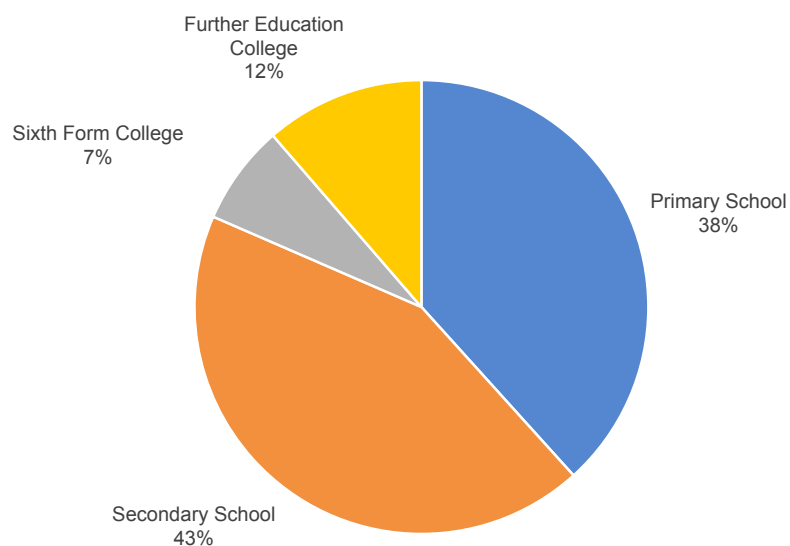


Table 10: The Institutional Distribution of Teachers Surveyed



About stem4

stem4 works with young people, and those who support them including teachers, parents and healthcare professionals, to provide mental health literacy and early digital intervention. As part of stem4's ongoing work, they have carried out regular, national surveys to highlight the views of those dealing with issues related to mental health, and raise awareness of the need to provide digital strategies to solve such issues as part of the help process.

Digital support provided by stem4 includes the availability of a number of mobile phone applications to provide standardised, evidence-based help at an early stage to those young people who are waiting to access help or who may not need thresholds for referral or want to access formal help. Although they do not replace assessment and care offered through a mental health professional or qualified support at school, these applications offer young people, their families and friends some tools to manage symptoms at an early stage.

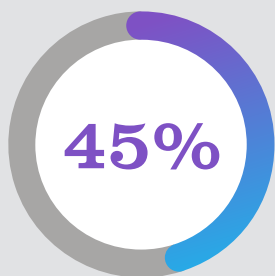
stem4 Apps

Calm Harm is a free app to help teenagers manage or resist the urge to self-harm. Calm Harm is based on an evidence-based approach called Dialectic Behaviour Therapy (DBT) which is a form of Cognitive Behaviour Therapy (CBT) and aims to support young people, either as part of on-going treatment or as an interim measure whilst they wait for specialist help.

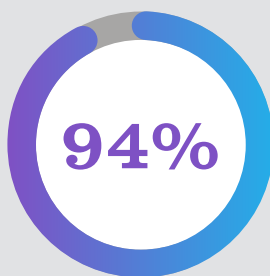


Over
1.7+ Million
downloads globally
(December 2020)

71% of users are
not undergoing any
formal treatment



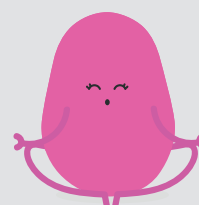
of users are
under 19



of users report a
reduction in urge



increase in Calm
Harm usage over the
COVID-19 period

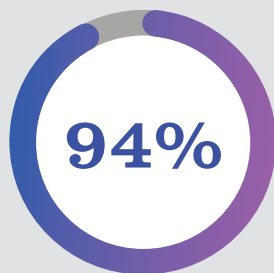
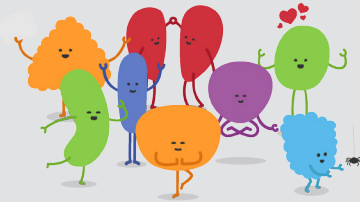


Clear Fear is a free app to help young people manage the symptoms of anxiety. Clear Fear uses a Cognitive Behavioural Therapy (CBT) framework to help change anxious thoughts and emotions, alter anxious behaviours and calm fear responses.

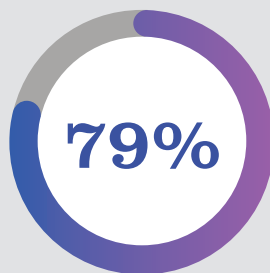


Over
440,000+
downloads globally

(December 2020)



of users report a reduction in anxiety



of users provide anonymous demographic information

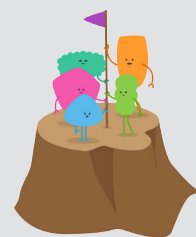
Over 13,00 hours spent using the app
(UK users)

which equates to full-time NHS Clinical Psychologist carrying out consultations for anxiety over a period of 10 years

Combined Minds is a free app to help families and friends provide mental health support. The app uses a 'Strengths-Based' Approach which has been shown to be effective in recovery and focuses on the positive attributes of the person and builds on resourcefulness and resilience.



COMBINED MINDS



Move Mood is a brand NEW free app, to help teenagers manage symptoms of depression. The app uses principles of Behavioural Activation Therapy to improve your mood. Increase your motivation to carry out a variety of tasks in order to help you to move forward, take control and feel positive.



MOVE MOOD



Download today



Please note that none of the stem4 apps substitute for seeing a mental health professional/GP, see a suitably qualified professional for assessment and advice on treatment.

What stem4 does

Our Vision

To protect the mental health of teenagers, enabling them to live happy and healthy lives.

Our Mission

To foster the development of good mental health in teenagers through enhancing early understanding and awareness by providing mental health literacy, shared early detection and early digital intervention.

Our Values

Informative

Clinically accurate, solution focused and educational

Positive

A focus on strengths, resilience and change

Friendly

Non-judgemental and relatable

Inclusive

We work together and put young people at the heart of what we do

Responsive

We listen and act iteratively

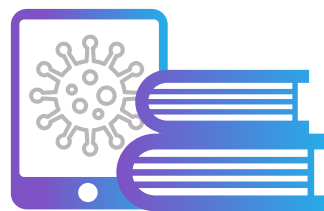
Effective

We deliver change

What we have achieved to date



4 evidence based mental health apps



A library of **COVID-19** resources



Worked with over **600** schools and colleges in the UK



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