



Creating a place of hope, where young people's dreams are realised

Report on the Outcomes of the YPAR Youth Well-Being Workshop

“Supporting Community Action for Young People’s Well-being”

Ballybough Community Centre

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Forward

YPAR operates in Dublin North Inner City and is an action focused Interagency Network of Statutory, Community and Voluntary partners that work together to improve the health and well-being of Young People at Risk. Our aim is to enable young people at risk to fulfil their hopes and dreams.

YPAR convened this Young People's Mental Well-being workshop in response to the need identified by many local youth and children service workers who have witnessed the difficulties many of these young people are experiencing with their mental well-being. The workshop targeted people working with young people in the North Inner City including mental health services, youth projects, schools and community organisations. The aim is to seek to enable **community action to support young people's well-being**. Together we want to develop a positive coordinated community and interagency response to improve mental health services to young people in our community.

Many individuals, families and communities are struggling with the issues of mental health. Much of this is socially determined by their living conditions such as poverty, poor housing, addiction, family breakdown and abuse. For young people it could be all these plus peer pressure, bullying, the internet, drugs or the pressures of growing up and having to compete in a rapidly changing and technological society. Our hope is that through greater awareness, prevention and early intervention by local services working together we can reduce the numbers of young people having to access acute mental health services.

Today is the beginning of a dialogue on how best we can collectively work together as a community of workers and residents to enable a positive response that will have a tangible impact in supporting the mental wellbeing of young people at risk in the north inner city.

Fergus McCabe
Chairperson
YPAR Mental Wellbeing Group

Introduction and Background to Workshop

The issue of Young People's mental health is an issue that has been identified by many local youth and children's service workers who have witnessed the difficulties many of these young people are experiencing with stress, anxiety and self-harm. Many individuals, families and communities are struggling in dealing with mental health and do not know where to turn. Many families in the North Inner City are experiencing social and economic hardships such as poverty, poor housing, unemployment, addiction, family breakdown and different forms of trauma which can cause and compound poor mental well-being.

In response to the issue the YPAR Steering Committee agreed to convene a series of meetings over the summer (2013) to further explore how the Network could begin to develop a collaborative and interagency response to the issue for young people's mental well-being.

There was a very good and enthusiastic response by local project and service workers from youth projects, schools, family support, addiction and community mental health services to the convening of the meeting around young people's mental health. From the discussions that took place there was general acceptance that there is a consistent and growing problem with young people presenting to local services with mental health issues. It was also felt that the current services, families and communities were not responding adequately to the mental health needs of young people. What emerged from these initial meetings was the need to develop a more effective interagency and community based response. There was a need to open up the discourse around mental health and galvanise existing statutory and community supports to promote awareness and training to enable prevention, early intervention and referrals to relevant youth mental health services and supports. The meetings also identified the need to involve young people and their families in developing appropriate responses to young people's well-being.

The YPAR mental well-being group agreed to convene this workshop to progress a more coordinated response to Young people's Well-being. The aim is to consult with a wider group of statutory, voluntary and community children's service workers to help the group identify a set of tangible actions that as a community of workers we could collectively deliver to improve the mental health of our young people. YPAR is conscious that the language and terminology used in relation to mental well-being can be sensitive and very important particularly in endeavouring to include young people in the discussions. Using the term 'mental health' can be alienating and cause further anxiety. YPAR feel the term 'well-being' is a more embracing term. We felt that the workshop should focus on four key areas; Young People, Well-being, Community and Action. Therefore we came up with the title of "Supporting Community Action for Young People's Well-being"

The workshop was divided into three sessions. **Session one** involved presentations from Mental Health Practitioners and inputs from young people on their experiences with mental health services. Speakers included Dr. Tony Bates from Headstrong, The National Centre for Youth Mental Health who talked about the headstrong Jigsaw programme; Demelza Heneghan CNM 2 who spoke about St Joseph's

Adolescent & Family Service in St. Vincent's Hospital Fairview . Demelza was accompanied by Fiona Glackin and Shannon Murphy two young people who described their experiences with mental health services; Anthony Kerrigan from SWAN regional youth services presented the experience of his friend and finally we had Colman Noctor Doctoral Candidate and Child & Adolescent Psychotherapist with St Patrick's Hospital whose presentation focused on his research into young people views of the mental health services and the effects of the internet on young people's mental health. The presentations are described in greater detail below.

Session two; involved the workshop breaking into five smaller discussion groups accompanied by a facilitator and a note taker. Each group were given one hour to address the following questions;

1. What are the experience of Young People of the mental health services
2. Assess the Weakness and Strengths of on existing local Mental Health Services.
3. Suggest positive community actions for breaking barriers to youth and community mental well-being in the North Inner City

Session three: was the final plenary session facilitated by Fergus McCabe the chairperson of the YPAR Mental Well-being Group. This involved feedback for the small group discussion, a sum up and an outline on the next steps for YPAR to progress the issues of young people's mental well-being.

Session One: YPAR Mental Well-being Workshop Presentations

1. Tony Bates, Headstrong Jigsaw Programme (Summary of Presentation)

The theme of Tony's presentation was 'Changing how Ireland thinks about youth mental health'.

There is a high rate of suicide among young Irish people and in particular young males in the 15-25 year olds.

Stress is in all of us and without words tends to break out in physical symptoms and repeated acts. According to Headstrong's 2012 My World Survey on Youth Mental Health, one in five teens report moderate to severe depression in the last year. 21% of 2nd level students are problem drinkers and of these a third drink at hazardous levels.

The lived experience of many of our young people is painfully at odds with what we would all wish for them. We hear on a daily basis of yet another young person's suicide, young people engaging in high-risk behaviour, and unemployed young people at the margins of our society who are frustrated because their futures and their dreams have been taken from them.

Young people tell us they want somewhere to turn to, someone to talk to . . . someone they can trust, who would listen and allow them to 'go at their own pace'

Headstrong works with communities and statutory services to empower young people to develop the skills, self-confidence and resilience to cope with mental health challenges. Our vision is to give every young person in Ireland somewhere to turn to and someone to talk to. We also work with the government, media and direct community outreach to change the way Ireland thinks about youth mental health.

Jigsaw is Headstrong's innovative service development programme, youth-friendly projects that bring community services and supports together to better meet young people's mental health needs. Jigsaw attempts to change the narrative about youth mental health by

- Making it accessible in a youth friendly main street hub
- Coordinates and strengthens existing services
- Engages young people at every level of planning and implementation
- Builds community capacity and ownership.

Why do young people come to Headstrong?

- Anger, frustration irritability
- Alcohol, impulsive behaviour, risk taking
- Lack of interest, hopeless, low energy

- Low social supports, few outlets
- Physical and emotional abuse
- Self-harm, unpleasant thoughts
- Early school leaver, unemployed
- Trauma, victimisation
- School problems
- Family conflict.

Jigsaw has grown from 2 sites in 2008 to 11 in different parts of the country in 2013. It is delivered with fidelity and has supported 4930 young people across a range of ages and gender. Jigsaw operates on the belief that Young people will access supports when a programme or intervention is designed in a youth friendly manner. Young people present with significant and complex developmental and mental health issues however the outcomes of the Jigsaw programme have been impressive and are well in access of what we expected.

Jigsaw is emerging as a significant and integrative component of the system of mental health services and supports.

“This world demands the qualities of youth; not a time, of life but a state of mind, a temper of the will, a quality of the imagination, a predominance of courage over timidity, of the appetite for adventure over a life of ease” (Robert F. Kennedy)

Tony Bates

2. Demelza Heneghan (CNM2) Nurse Manager Day Hospital, St Joseph’s Child & Adolescent Service, St. Vincent’s Hospital.

Summary of Presentation

St. Josephs Adolescent Service provides two services an Adolescent Inpatient Unit for 16-18yrs and a Day Hospital Programme.

St. Josephs Adolescent Inpatient Unit is a 12 bed inpatient unit, currently at 8 with priority referrals from Dublin North East HSE administrative area including;

- Dublin North Central
- Dublin North
- Dublin North West
- Louth
- Meath

The unit also caters for the Cavan / Monaghan regions and also has a national remit ..

St. Josephs Adolescent Day Hospital is an Adolescent & Family Service whom offers assessment and intervention for young people experiencing mental health difficulties which are impacting on daily functioning , family engagement and ability manage day to day activities such as school / vocational training .There is a team of Mental Health Nurses , Child & Adolescent Psychiatrists , Speech & Language Therapist, Clinical Psychology, Chaplaincy , Teaching staff and Volunteers. The Day Hospital provides a triage and observation and intervention service including outreach supports to young people in their communities. St. Josephs works closely with Parents / Carers / guardians/schools /vocational settings as part of the systemic nature of its work . As part of the programme young people have access to the concurrent school programme located on site.

In 2012/2013 the referrals from Adult Mental Health and CAMHS involved 53 admissions to the therapeutic programme. The highest percentage of referrals is one of low mood/ , depression , /anxiety of a social or general nature . Young people are discharged to either Adult Mental Health Service or CAMHS.

In terms of engagement with the wider community in Inner City Dublin it is clear that the service is looking forward to forging a strong link with the current community organisations in order to support young people upon discharge. Into the future it is envisaged that likewise upon admission that any community links the young person has in the community of inner city Dublin and surrounding areas are continued throughout their attendance in the day hospital.

Fiona Glackin & Shannon Murphy –two young people’s Insight into experience of Mental Health Services.

The experience of Fiona and Shannon with the services at St. Josephs was very positive. They developed trusting and supportive relationships with the Key worker. It is important that mental health services keep the young people informed on what is happening and not treat them ‘like they are stupid.’ Services need to let young people know what their options are for treatment. There is a need to support parents and the whole family and have supportive services in the community where people can go to talk if they are feeling anxious.

Things that the community can do to help young people;

- Allow mental health well-being become part of the ‘lingo’ of young people
- Link all services for young people together
- Reduce the stigma of mental health
- Build on the momentum of today’s workshop – working together and sharing our experiences
- Build awareness through Posters in shops/‘chippers’/Bus stops, libraries, pharmacies. Produce ribbons, bookmarkers and hand-outs to young people
- Use young people’s social media, Snapchat, twitter, Facebook, MySpace.
- Use youth clubs, schools and community organisation to talk about well-being.
- Inclusion of YP in advocacy and planning services is essential.

'Life is your adventure – don't let things that don't matter get in your way'

Demelza, Fiona and Shannon

3. Anthony Kerrigan from SWAN Regional Youth Services.

Anthony read the account of his friend and his story of his experience of Mental Health services,

Hi, I'm 21 years of old and from North Wall, I agreed to tell my story because my youth worker asked me and it might help other young people. It started when I was 18 and one of my best friends passed away over drugs. It wasn't expected and it was tragic for everyone. That's when it started and when I began to feel constantly depressed. It made me have a different outlook on life, like everything was going out of its way to get in my way. It was draining every day to get out of the bed coz I knew what way I'd be feeling and I didn't want to put any effort into anything. At this stage I was after pushing all my friends away. One of my friends went to my ma to say she thought I was going around looking like I was on stuff. I was constantly smoking weed and that was like a gate-way drug to sleeping tablets. Sleeping tablets didn't make you feel anything and that's what was brilliant about them.

A few months later my other friend passed away. Things with me got a bit better coz it opened my eyes and I knew I had to be there for my family. I only smoked grass for the few weeks after that. Then coming up to holidays and Christmas, when you're supposed to have all your family and all that business it made me even more deeply depressed and I started taking tablets again except deeper quantities. I felt everyone was against me, family and friends except I didn't really have any left. I felt all alone and that made me pity myself so I wasn't only depressed I was feeling sorry for myself and it only made things worse. That's when I was at my lowest point and I knew something had to change and I was looking for help from non-judgemental people. I knew it was because I didn't deal with the deaths and I had pushed them to the back of my head to try being strong about it. I went up to SWAN [Regional Youth Services] and asked for help coz I knew I needed to change and Angie brought me to Crinan¹. Angie was with me through everything in Crinan and sat with me till I got to know them there and got to the point where I would talk to them. Then they gave me a key worker and the key worker set up times to go see their counsellor. When I was talking to her she made you feel like you were worth well more than going around outa your head and I should be doing something to keep my mind occupied. This helped a lot but I needed more help coz it got to the stage in my emotions that I went out the weekends to do drugs to get happy and then weekdays I'd take tablets and smoke weed to be mellow.

Tablets make you more depressed than anything else and I couldn't think of a proper reason for me to still be alive. I just felt so alone that I convinced myself that if I killed myself everything would be grand and I honestly believed that. My brother noticed the change and dragged me up to the doctor he told the doctor I was suicidal and I was referred to Vincent's. They kept me in for assessment for 2 days. In that place I felt well worse coz of what it's like a metal institution and when I was up there my

¹ Crinan youth project was established in 1996 in response to the heroin crisis and the lack of services for under 18 year olds who were experiencing problematic drug use in the North Inner City.

brother pointed out everything about what I was doing and how I was effecting my ma and the rest of my family.

Friends and family visited me up there. Then after I realised how much they still wanted me around and I started thinking clearer and they wanted me to be better in myself. It was at this point my family reassured me life was worth living. I know my counsellor was saying the same stuff but when it comes from your family it's like 100 times more comforting and I knew I'd support and that's when I righted my wrongs. When I got out of Vincent's after 3 days I had to attend the day clinic for a few months and I eventually started putting myself back together. I got a course and completed that and did another one and I felt back in control of my life again.

The moral of my story is a counsellor can give you all the advice in the world but support from family is well better than any conversation with a stranger. It probably would a been a lot better if I opened up and talked earlier but I'm a man and I chose not to.

The advice I would give to others is that you should open up to your friends and family and talk about what you're feeling instead of opening up a bag of grass to forget about it.

Anonymous

4. Colman Noctor, Child & Adolescent Psychotherapist, St Patrick's Hospital

Colman outlined the content and findings of his collaborative research, *A Way Forward For Mental Health Services The Perspectives Of Young People*². The aims of which are to;

- Explore from both a service user and parental perspective the experience of accessing mental health care for young people.
- To look at the barriers to accessing services and the enablers to facilitate successful engagement with the mental health services.
- Establish what young people need from services.
- Summarise factors associated with adverse experiences of care and develop recommendations to be incorporated in the model of mental health service provision to young people.

The study method involved a Focus Group format used to collect data. The target area of the study is to gain an understanding of young people's experiences of using mental health services. Overall, 10 focus groups were carried out, 4 with young service users, 2 with parents that had experience of their teenager using mental health services and 4 with transition year students. Overall 24 young service users, 18 transition year students and 3 parents took part. Transition year students participated from Schools who were purposively selected from the database of schools and were reflective of differing levels of deprivation and of urbanisation.

² The Way Forward, The perspectives of young people and parents (2013) Sarah Buckley, Blainid Gavin, Colman Noctor, Catherine Devitt, Suzanne Guerin & The Way Forward Project Team. St Patrick's University Hospital and ESB ElectricAid Ireland

Transition year students on Mental Health issues;

- Initial responses to vignettes suggested attempts to normalise things or incidents by emphasising to the friend that ‘it could be worse... it’s not like the biggest scenario’
- ‘reassure them that they’re absolutely normal, well, like not normal but like...’ with a particular emphasis on distracting the friend, by engaging in activities - for example, ‘distract [the friend] with things you know what she likes,
- Incidents that were perceived as being serious or as a deviation from what was perceived as being normal were given more direct responses, with less emphasis on a waiting period, or the need to distract with activities, and more emphasis on the need to avail of GP services, or speaking with parents

Stigma - Barriers to accessing services – exploring the hidden nature of mental health problems and how this is perpetuated by fear of stigma and fear of being misunderstood

‘I lived just across the road from [hospital] and, but I had to be driven across ... my neighbour would walk me through and I was dragged behind and hidden down, like, a hedge, because they couldn’t see me walk in, and that was kind of hard ...’

‘I couldn’t face my parents, I couldn’t say, “Oh look, I’m after really screwing up this semester, I’m after really screwing up this year.” I was ashamed; I was, you know like, “God, they’re after coming up with so much money for this degree”’

Contributing factors to favourable and unfavourable experiences include the ability to relate to the support environment, the importance of inclusion, and relationships with staff.

‘it’s shocking for the actual person who is going through it when they’re young, because parents are told everything and the child is told nothing ... when I was in hospital, I was asking “why am I here, is this a punishment, what’s happening to me, why are you always giving me tablets?”, the only answer I got back every time was “You’re sick” ... they wouldn’t even tell me what tablets I was taking.’

Establishing what young people need, the concern that schools don’t openly discuss mental health problems contributes to the hidden nature of mental health problems. There are gaps in mental health awareness in schools and having staff who understand their needs.

The ability to relate to the support environment involves the ability to relate to one’s environment was important in providing a more favourable experience of mental health services.

Negative experiences suggest that being able to relate to the wider environment contributes to a sense of normalcy for young service users, by knowing that there are others in similar age groups that shared common experiences.

‘The most therapeutic thing ... is actually, sitting down and talking to people and realising “oh you know what? You’re just normal, you’ve just, you’ve had a couple of knocks and you’re the exact same as me”,

There is no national advocacy service available for young people with mental health problems in Ireland. This needed to be addressed as a matter of urgency as it would help young people express their views about their treatment and help them advocate for better quality services.

Way Forward Study: Conclusions and Reflections

The issue of stigma and accessing appropriate help seems to be an on-going concern with service users and their parents. Young service users have recommended that they should have access to staff that understand their needs and ideally should be admitted to a ward with other young people in it.

Transition-year students have asked for more help in schools to raise awareness of mental health problems and how to seek help, as currently mental health problems are often hidden and can lead to feelings of isolation in school. Stigma-reducing interventions should be made part of mental health promotion strategies in schools.

It is important that the feedback from this study is reported and also acted upon. It is unethical to solicit the views of young people without young people having an explicit understanding of the extent of the capacity to meaningfully act on the views expressed. There needs to be a commitment and information needs to be disseminated widely so as to effect change amongst policy makers and service providers.

Young people and their parents want to have more say in the planning and development of youth mental health services in Ireland. The project team would like to advocate that including service users' views and working collaboratively with them is indeed as the name of this report suggest 'the way forward'.

Colman Noctor Doctoral Research, *Points of interest of mental health online and online mental health*

In what way and why has online activity impacted on our lives? What do we know about young people and their relationship with online activity and what are the minefields that lie ahead and the outstanding questions that remain?

Problematic engagement as a means of coping: These phenomena can often be excused as purely a case of 'excessive use' but in most cases the origins run far deeper psychically. It is far more useful to view obsessional behaviour as an attempt to control or manage an internal anxiety or unhappiness. Our understanding of our mental lives shows that where there are gaps in our emotional lives, we often find substances or activities to meet these needs.

My doctoral research and interest in the area relationship between mental health and young people's online activity is to explore - 'how does being online effect my mental health in terms of Status Anxiety, the need to manage myself online and the need to support me to manage this space'.

Colman Noctor

End Workshop Session 1

Session Two: YPAR Mental Well-being Workshop Discussion Groups

Introduction

After the presentations the workshop broke-up into 5 smaller discussion groups. Each group included a facilitator and a note-taker who would record the discussion and feed this back to the final plenary session. The brief of the groups was to;

- Relate Young People's experience of mental health services
- Analyse and identify the weakness and strengths of existing local services and supports for YPs mental well-being and
- Suggest positive community actions for breaking barriers to youth and community mental well-being in the North Inner City.

Below are the generic outcomes from the group discussions.

1. Young People's Experiences on Current MH Services

- Peer support/education for young people in schools – positive for young people
- MH Services can empower young people with coping skills to deal with stressful issues in their lives
- Mild/Moderate/Clinical – children often do not fit into categories
- Feeling different/isolated
- Stereotyping attached to using mental health services- Stigma - Fear
- They may speak a little to adults around them but they cannot seem to do anything but show sympathy
- Feeling isolated in school as it is not addressed at all
- Control taken from them – adults making the decisions
- Lack of information - no feedback from services
- Feel lonely with all the grown ups
- Don't think I deserve to be in a place as beautiful as this
- Isolation afterwards not equipped with how to talk to others outside of the services
- Difficulty with transition back to normal life
- Very off putting if you don't click with the therapist – ask the young people what qualities they like in a person and try to match
- Young people need services/youth centres to go to
- Families need to be better equipped
- Relationships are important
- Clinical/therapists do not always work
- Matching young people to the correct service
- Mental Health services are too professional
- I am stigmatised and labelled as weird or different
- Peer pressure if they say they are attending services
- Young people unaware of where to go
- Chaotic first contact
- Labelled as being sick
- Services not youth friendly
- Afraid to go
- Not being listened to
- Given too much medication
- I need to get much worse/more sick before I am entitled to any help
- Nobody understands me I am the only one going through this
- Not given enough time
- Young people often enter the mental health service in a vulnerable state and leave with a worse disorder
- Not visible
- Not enough support especially post 18 years
- Facebook - A cry of loneliness – virtual friends

- Young people in the system have been sent to so many services and asked to retell their story over and over
- I never knew who I was meeting or why
- They couldn't relate to me – didn't listen – used words that meant nothing to me – out of touch
- Friendships are key
- Young people are referred without the young person being consulted

2. Analysis of Current Mental Health Services in the North Inner City

- CAMHS – positive short waiting lists.
- Parents/Headstrong etc. go into schools to help raise awareness etc.
- Schools need to /must be open to looking at these issues and how they can respond proactively.
- Need to help peers who want to give support to friends but don't know how? Buddy system Sign posting - Help by giving them advice on; what to do? How to do it? Who to go to? Who might help?
- Need to help give young people language/articulate issues etc.
- Age appropriateness of approaches; primary more general focused, (Like programmes put in place in local NS schools which has successfully helped address bullying).
- Need to support the families who are key to help YP overcome issues. Can impact on them most directly.
- YP do best with family support or other significant carers.
- Need to create an open environment to help YP identify issues.
- Talk to young people at their level - Group sessions – refer on afterwards
- Difficult to get young people in there – lack of staff – shortage of beds
- A lot of the local services are free
- Referral form (20 page) need to be easy to understand, in plain English and shorter
- Family support services are key too
- Good supports in schools – Garda
- Public health nurse are a major factor (they are amazing)
- Someone on the end of the phone if you're at a loss
- Can provide overview and support and identify needs
- More holistic approaches
- Good relationships (GPs, Nurses, Family, Youth service etc
- Use of alternative therapies and use of creative arts
- Ask young people what they want
- Crisis rather than intervention
- Focus – for child development rather than focus on mental health
- Lack of knowledge of services
- No social worker – no support in training centre
- Waiting list and assessment too long

3. Weaknesses in Existing Mental Health Services

- Lack of communication between services and professionals
- Not sufficient information on what services are available
- Young person often in crisis before they present - Being told “not sick enough”
- Services not advertised enough
- MH generally not “talked about”
- Not enough people in contact with young people know how to refer them on
- Difficult to access services – Non-Medical model
- Long waiting lists for appropriate services
- Not located in accessible/youth friendly places
- Stereotyping attached to using mental health services, stigma - Fear
- Language used too jargonistic
- Lack of weekend services
- Services difficult to access for over 15s – It is the 16+ who most need it and the adult services is not appropriate
- Stereotyping of a mental health hospital
- Not enough specifically focused services for young people
- Too quick to prescribe tablets

- Long periods between appointments
- Irregular appointments cases are closed after a missed appointment
- Paperwork is tough to fill in (not being able to understand or read what is being asked)
- No links between services
- Only become aware of difficulties when there is a crisis such as suicide
- Services can be Alienating and Intimidating
- Asked too many direct questions without having a relationship with the young person
- Staff are not trained to process mental health concerns
- GPs not informed enough of services to treat young people with mental health issues
- Age brackets – restricting services for young people
- It is reactive – What does the HSE do to promote a healthy mind?
- Lack of information – Needs to be more mainstreamed (Media)
- Having to leave a message on an answer machine
- Cannot give young people the time they need
- Not enough staff to talk to
- Services do not always connect information lost – young person lost
- Very slow in response
- Services functioning separately no joining up
- Lack of resources available for services due to funding
- No relationship with the psychiatrist
- Professionals not knowing where to direct young people
- Not much awareness in the area
- GPs over medicating young people “quick fix” (up to the services to be more proactive)
- Young people should have more choice if something doesn’t work
- Feel the adults are talking over and making the decisions
- Not enough links or communication or sharing of skills with parents, agencies and the young people
- No centralisation – not one universal phone number
- Limited coordinated response

4. Strengths in Existing Mental Health Services

- Energy and openness to develop services for young people
- Service excellent once child/teenager is finally linked in
- Beginning to combat stigmas
- Let people talk anonymously without having a fear of people slagging them about their problems
- Recognition that mental health needs addressing – like physical health
- More diverse MH services available St Josephs – St Vincents – Mater CAMHS – Crannog Childline, Samaritans, Pieta House . . . accessible and tailored to the needs of young people
- Open access keeps young people off the streets in SWAN youth service
- Youth services give me someone to talk to when I have no one else
- Youth services provide support to young people and activities that enhances their mental health
- Youth services are friendly and approachable and competent
- The commitment of the young people to access the services and ask for help
- Services can help the young people begin the process of change
- Having someone to talk to that understands – no judgement and is free
- People who have a genuine interest and empathy for young people working in services - some GPs
- Local services are easily accessible to young people
- St Joseph’s Adolescent centre – As a past patient they are not given enough credit for the amazing work they do
- Some services help you to feeling a bit better and not different
- There are many people who care out there
- There is a lot happening in the area to help young people.
- Increase collaboration between services

5. Positive Actions to Support a local response to Young People's Well-being in the North Inner City.

- Need for a Youth Café - A designated Space (or spaces?) or hang out for young people - A strategy team from YPAR might be needed to identify possibilities.
- Need to positively promote services (such as Jigsaw) and other services - Get positive message about what supports are already there.
- Need to find youth friendly ways to raise awareness raising events across all schools and projects to develop dialogue with young people in schools and youth projects ;
- Need to get all members of the school community on board - Principles, HSCLO, Schools counsellors, teachers, care group team members to become more aware of Youth MH and skilled up to respond to the issue of MH - how to bring a positive message to young people in schools; give them the language to express their issues and refer where necessary (outreach/Workshops).
- Help young people themselves to organise events themselves (events such as MH week) to enable young people to de-stigmatise and demystify the issue - use student councils where they exist
- Greater connections between services - YPAR to connect (join-up all the MH services in the area and make links with National Parents Association)
- Creative piece by young people to display at future mental health weeks, Drawing/Art exhibitions, Community Discos
- Developing consistent trusting relationships. Weekly support group – for young people leaving mental health services to meet and share/discuss (space needed) no adults needed - Peer group outside – “Light at the end of the Tunnel” Hopeful on-going support from someone who has had similar experiences and share what worked for them
- Highlight the problem of 16 year olds accessing adult services, this is not acceptable
- Mental Health Directory
- Brown Bag Lunch – Where different services talk about what they do – Maybe run a few that are mental health related – Highlight mental health
- Need to develop a non-judgemental, non-jargonistic and child- friendly language around mental health
- Need for YPAR to provide links with groups people who can give inputs to schools and youth groups.
- Need a jig-saw project in the area
- Professionals need to be educated/up skilling
- More promotion of the youth work services
- Youth mental health conference
- Awareness using social media to promote services already in the area, Develop universal Logo – informing to de-stigmatise, Free phone number that will be answered by a real person (not an answering machine)
- Produce a local Mental health strategy on a local level
- Educating parents develop sustainable tools for families and young people e.g. Marte Meo
- Promote youth friendly holistic therapies alternative Mindfulness, Yoga/relaxation for children
- Mental Health professional – located in youth friendly services
- Access to schools from a primary level
- Mental Health professionals – located in youth friendly services (Jigsaw Hub)
- Promote national health and wellbeing e.g. workshops, talks with peers, physical activity, music, art therapy and alternatives
- Formal commitment from all agencies to promote young people's mental health
- Consultation with young people on committees.

Final Remarks and Follow up: Fergus McCabe

YPAR convened this workshop in response to the need identified by many local youth and children service workers who have witnessed the difficulties many of these young people are experiencing with their mental well-being. The workshop is the initial steps in identifying how best we can collectively work together as a community of workers and residents to enable a positive response that will have a tangible and lasting impact in supporting the wellbeing of YPAR in the North Inner City. The ethos and values of YPAR as a Network of Statutory, Community and Voluntary partners is to work together, pool our resources and coordinate services to improve health and well-being of Young People at Risk. The vision of YPAR is to enable every young person in the North Inner City to fulfil their potential, their hopes and their dreams.

YPAR would like to thank all the participants for their contributions and engagement in the workshop and with this topic. There were lively and stimulating discussions that took place in the small groups with lots of very good ideas and suggestions for actions emerging. This report of the presentations and discussions will be sent out to each of the workshop participants and members of the wider YPAR network. The report will also go to the YPAR Mental Well-being Group who will assess its outcomes and ideas for action. The group will then decide how best to progress the issues and actions identified. However, it is important to understand the strength and effectiveness of YPAR as a network relies on the commitment to interagency collaboration of organisations working for the betterment of young people at risk. If we are to have a significant impact on improving the mental health and wellbeing of young people in our community it will require all the organisations and agencies that are part of the YPAR network including those in attendance at the workshop on the 9th of October to commit to work together to share their expertise, knowledge and resources. By doing so, we can start to make a real difference to the lives of young people trying to improved their mental and physical well-being.

YPAR October 2013

Appendix 1

Thanks and Acknowledgements

A big thanks to;

Workshop Speakers

Fiona Glackin, Shannon Murphy, Anthony Kerrigan, Demelza Heneghan, Tony Bates and Colman Noctor.

Those who helped with the Group discussions

David Little, Elizabeth Watson, Frank Mulville, Niamh Bruce, Paul Flynn, Sinead McCauley, Deirdre McDonagh, Irene Quinn, Catherine McCarn and John Peelo.

Fergus McCabe who Chaired the Plenary Session.

To the Staff of YPAR Mary Meehan, Frank Mulville and Pat Gates in organising the Workshop.

To Tracey Byrne and her staff in the Ballybough Community Centre for their support in enabling the workshop to be held in the Centre.

Appendix 2.

Workshop Supporting Community Action for Young People's Well-being 9th October 2013

List of Participants

NAME	AGENCY	NAME	AGENCY
Adam Atouani	O'Connell's	Kate Lennon	Marino College
Adam Kavanagh	O'Connell's	Kayleigh Meehan	
Amy Smith	St Vincent's CTC	Lisa Goss	Central Model School
Andrew Sexton	CDETB	Liz Walsh	NYP1
Angela Moore	St Patrick's Hospital	Lorraine Cronan	FSW Summerhill
Angela Roe	FSW Summerhill	Louise Grogan	Streetline
Anna Miller	NYP1	Maeve Geraghty	Streetline
Anthony Kerrigan	SWAN	Maighread Greene	D7 SCP
Aoife Duffy	Connolly Norman House	Majella McEvoy	Marino College
Brenda Fetherston	FSW Summerhill	Marie Yvonne Hegarty	HSCL Marlborough St
Catherine Groves	Central Model Infants School	Martin Maloney	Gardai
Catherine McCann	St Vincent's CTC	Mary McGagh	YP Probation
Catriona Doyle	Ozanam House	Maureen Dunne	CYC
Christine Gormley	MYMIND	Michael Kilbride	O'Connell's School
Christine Henderick	Ballybough Youth Project	Nassen Mossy	O'Connell's School
Clare Caruthers	Streetline	Niamh Bruce	Sanctuary
Clíodhna Manory	Ballymun LDTF	Paddy Ormond	NYP1
Colman Noctor	SPMHS	Paul Flynn	Crosscare
David Byrne	Ballybough Youth Project	Paul Madden	NYP1
Deirdre McDonagh	HSE	Paula Mills	NYP1
Deirdre Mellett	Mater CAMHS	Pauline Dolls	Daughters of Charity
Demelza Heneghan	St Joseph's Adolescent Centre	Peter O'Connor	Community Policing Forum
Dolores Quinn	FSW Summerhill	Phil Carr	Streetline
Eibhlin Harrington	SWAN	Phil Duffy	Focus Ireland
Elizabeth Watson	DOCCS	Ramona Riley	HSE FSS
Elle Doyle	Streetline	Reidin Dunne	EPIC
Emma O'Brien	Marino College	Ruth Breen	CASPr
Emma Shanahan	Crosscare	Sean Stevenson	O'Connell's School
Enda O'Flaherty	HSCLRutland Street NS	Shannon Murphy	St Joseph's Adolescent Centre
Esther Twomey	NYP1	Shaun Byrne	YASS Crosscare
Fina Doyle	Teen Counselling	Shelia McBrearty	SWAN
Fiona Glackin	St Joseph's Adolescent Centre	Simon Molloy	Teen Counselling
Fiona Meaney	FSS Summerhill	Sinead McCauley	SWAN
Frances O'Brien	Marino College	Sr Rosaleen Crossan	St Joseph's Sec School
Ger Nugent	AOSOG	Tanya Cleen	Streetline
Hugh Greaves	Ballymun CDTF	Tony Bates	Headstrong
Irene Quinn	Psychotherapist Vol	Tracey Douglas	AOSOG
Jackie Mulligan	Geraldstown House		
Jannette Pun	SW Dept Nth Great Georges St		
Jenny Goodwill	Daughters of Charity		
Joanna Seery	EPIC		
Joanne Adams	NYP1		
John Peelo	HSE		
Jolene Whileey	St Vincent's CTC		
Jonathan Forrestal	NYP2		
Jordan	SWAN		



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