

**Meeting of the APPG for Young People's Health**

**House of Lords, Committee Room 2a**

**8<sup>th</sup> May 2018, 16.00 – 17.30**

**Attendees:**

<b>Members of the House of Commons and House of Lords</b>	<b>Other attendees</b>
Baroness Massey (Co-chair)	Demi Dawson - RCPCH Archie Hadfield - RCPCH Anne Longfield – Office of the Children’s Commissioner Wendy Nicholson – Public Health England John Coleman - AYPH Emma Rigby - AYPH Ann Hagell - AYPH Vicky Robinson – AYPH Rakhee Shah – AYPH Pat Dawson - RCPCH Carly Vassar - RCPCH Damilola Benbow - Parliamentary Assistant to Julie Cooper John Poyton - Redthread Marian Davies – RCGP Neil Fletcher – Barts Health NHS Trust Nigel Mills – Great Ormond Street Hospital Steve Morton – Public Health England Jenny Barksfield – PSHE Association Sukru Ercan – Northwest Boroughs Healthcare NHSFT Sandeep Ranote - Northwest Boroughs Healthcare NHSFT Joanna Grant – Royal College of Nursing Debbie Fallon – University of Manchester Loretta Sollars – Public Health England Tajkia Uddin – Action for Children Rory MacFarlane – Hanover Communications Arabella Hamilton – Connect PA Joshua Deane – RCPCH Patrick Cullen – RCPCH Luci O’Reilly – British Youth Council Annie Morris – Redthread Barry Williams – Brook Alison Hadley – Public Health England Hana Najsrova –RCPCH Steph Lamb – The Well Centre Mike Foster – NHS England Salma Perveen – St John Ambulance

## 1. Welcome

Baroness Massey welcomed everyone to the meeting.

## 2. APPG business & matters arising

AYPH will be holding a 10<sup>th</sup> anniversary photo competition, which will be open to all young people on the theme of what health means to them.

*Division bell rings, Baroness Massey leaves meeting to vote. John Coleman takes over chair during her absence.*

There was a conference in Parliament on children and young people's mental health and youth friendly justice. A report from the conference will be launched in Parliament on the 19<sup>th</sup> of July.

## 3. Health & wellbeing in early adolescence

Emma Rigby from AYPH gave a brief introduction on the importance of supporting health and wellbeing in early adolescence. AYPH has recently worked with a group of young people in this age range to produce a short film showing what they think an ideal world that would support their health and wellbeing would look like. Early adolescence is a time of transition with increasing access to technology and offers opportunities for prevention. Young people become more concerned about what is happening in the world and there is a conflict between seeking independence and the stresses that this can cause.

Emma introduced Demi and Archie who were attending the meeting supported by the Royal College of Paediatrics and Child Health (RCPCH) to talk about health and wellbeing in early adolescence and what they feel would help support people at this age.

## 4. Young people's views

### Mental health – Demi

Demi is 13 and has multiple health conditions which have meant that she has been absent from her school for 2 years and now feels anxious and scared about returning. Demi spoke to the meeting about mental health stigma and the importance of understanding this to enable change. Primary school is full of pressures, such as SATs, getting into the right school and moving onto your secondary school. Secondary school has its own pressures, such as conflicts with parents, fitting into your new school and extra curricular activities, which can lead to young people making poor choices to fit in. Accessing CAMHS can be hard as lots of young people need to be seen and there are not enough staff to see everyone. There are 6 month waiting lists. This seems like having a leak in your house, wouldn't you want to fix it before it gets worse? There is also a stigma attached to seeking help, CAMHS appointments should be seen in the same way as a dentist appointment. Opportunities to be involved in group sessions and youth groups like Great Ormond Street Hospitals young people's forum are important as they help raise awareness and give young people the chance to speak up.

### Long term conditions – Archie

Archie is 11 and has been diagnosed with Crohn's disease, dyspraxia and anxiety. He has been attending hospital since the age of 5. It is good for young people to have support to work out what feels normal for them. He is not ready to see the Dr on his own yet as he worries that he will not remember what the Dr has said about his health. When he is in hospital he feels like he is in a loop and would like to have all his appointments together, so he wouldn't need to travel so much. Archie would like to see:

- More young people's forums and groups in local GP services, hospitals and schools
- More funding for psychiatric support and to enable long term blocks of support, not just 6 weeks at a time
- Establishment of groups where young people could meet other young people with similar conditions, so you can connect and not feel alone

*Baroness Massey re-joins meeting.*

### **Discussions & Questions**

Emma opened the floor to discussions of the issues raised by Demi and Archie. The film AYPH made with young people aged 10 -12 reflected a lot of the points they made and emphasises why it's so important to hear from a range of young people. They have similar concerns about SATs, moving to secondary school, what's happening in the world, finding their voice and feeling like they belong in society.

The young people were asked what they felt schools could do to support young people who have been absent due to health issues to return to school.

Demi thought that young people should more involved by the schools. When you are absent you don't see your friends and returning with lots of new people is difficult and causes a lot of anxiety. It is like being taken to another country where you don't speak the language.

Archie felt that his school did not respect the fact that he would be very tired as he had to deal with school, hospital appointments and rehabilitation courses. He was expected to keep up with homework and felt like he was always doing something. His dyspraxia means that he cannot write as well as other people in school and this was not recognised or supported, and he felt like he was being punished for something that he cannot help.

## **5. Impact of social media – Anne Longfield OBE, Children's Commissioner**

Anne Longfield addressed the meeting about the impact of social media on young people and the research carried out for the report: Life in Likes.

Today's young people are in 24/7 communication which can feel unrelenting. There is pressure on the way you look, most people use social media use filters which do not reflect reality and if you don't fit in this can add stress. Lots of young people in the research said that they wouldn't put photos online without using filters, they feel they have to curate their lives and worry if they are not included in group photos. There are constant commentaries on celebrities, body image, etc.

The internet can be a force for good, but it is not designed for children and they are one of the biggest user bases. Social media companies need to be more transparent. They do nothing to prevent young people under 13 from using their platforms. They have new technologies to verify if people are 18 to use certain services, this could be utilised to prevent young people accessing services that are not appropriate for them. They also need to take it more seriously when young people report things, such as taking down inappropriate content or photos posted without permission, etc.

The move to secondary school is a crucial time, young people describe an avalanche of pressure. Before secondary school the internet is fun, but when you move on it becomes intrusive and you feel like you can't be offline. New apps come out all the time which are not appropriate, and parents are often way behind on what's going on. One girl described receiving 500 WhatsApp requests on her first day of secondary school.

Digital literacy training (i.e. digital 5 a day), peer teaching in year 6 & 7, online safety education and emotional literacy are all tools that could be utilised to support and protect young people and parents. We also need a whole school approach. This is a key time and it's vital to push for a better balance of power for young people online.

### **Discussions & Questions**

Discussion included:

- What are the long term effects? This technology is fairly new, where will we be in 30 - 50 years? Jeremy Hunt has asked the Chief Medical Officer to carry out some research on the potential impacts. Studies say that the more time spent online, the higher your anxiety. There is a debate on how much time is OK, the resilience of children & young people and what they are doing online.
- The influence of fake news & sensationalised content. CYP in the report felt confident that they could spot fake news and question it.
- Brook has carried out similar research and raised the fact that although social media carries risks for young people it also has positive aspects, especially for isolated young people who live in rural areas or experience loneliness.
- Archie raised the intrusive nature of social media at school, where hate storms can erupt from a small event like a person not following or friending someone and this can spread through the class, school and outside into extra curricular clubs involving lots of people.
- Demi thought that the research should be widened out to include older young people as social media can have a big impact on mental health.
- Schools could take a whole school approach where all pupils attend sessions at the same time, so everyone gets the same messages and discussions.
- Bradley from the NHS Youth Forum raised the fact that young people are often avid users of social media and that it is a small part of a bigger issue. Issues around image and fitting in already exist for young people and did so before the advent of social media. This makes education important, young people can be worse at detecting what isn't real, especially images where things have been filtered and photo shopped. You don't get to see how many versions of a posted picture have been taken and how much they have been processed and edited.
- Gabrielle from the NHS Youth Forum suggested looking back at research that was carried out on the rise of TV and other aspects of pop culture (things like smoking being promoted as cool). What are the parallels when something new appears and how do things move on so fast. The difficulty is that impact is so quick that research cannot keep up which makes the validity of the research difficult.
- Marian spoke about the importance of guidelines. Parents have not been exposed to social media whilst growing up and don't understand how it can follow you home and can find it difficult to deal with. Young people involved in the report were clear that they were often careful with posting too much information online and did not like "sharenting", where parents post photos of young people at home or in their school uniforms where they can be more easily identified. Parents often don't know how to change defaults on the internet that can be used to protect young people. The new GDPR legislation coming in is a good opportunity to opt out. Terms and conditions must be easy to understand and fit for purpose, especially if children will

be accessing services and content. This lets children and young people take more control of how they use the internet.

**6. What roles can professionals play – Wendy Nicolson, Nursing Lead for Children, Young People & Families, Public Health England**

Wendy Nicholson addressed the meeting about the role of professionals and the potential impact it can have on early adolescence.

*Division bell rings, Baroness Massey leaves meeting to vote. John Coleman takes over chair during her absence.*

It's important to consider this age range as there is lots of emphasis on early years, 14-16-year olds and above, but not this age. It is an important phase of young people's lives, where rapid brain development occurs as well as opportunities to set foundations for healthy lifestyles and establishing good health behaviours for now and the future which can have a real impact.

Professionals can lack understanding of what young people need and want. Health professionals and the social care and voluntary sector need to make every contact count. School nurses, GPs and practitioner nurses don't work together, separating young people up into different age groups or conditions rather than taking a holistic view. School nurses are often a key route for young people, providing universal services, helping to remove stigmas and reduce waiting times to access services. It's important to make sure teachers and schools understand the difficulties and needs young people face. We should consider how services in local communities can support young people, what the assets in local communities are that can help young people and meet their health needs. We need consistency and advocacy for young people, with key professionals who can help young people navigate the health and social care system. We need to move away from Google diagnosis and towards evidence based practice, making information accessible in a way that is useful. We also need to be better at engaging young people in service design and review, across organisations. Prevention is important, we should increase health literacy, understand stresses, avoid stigma and empower health professionals to increase health literacy. We need to identify gaps and the money that is saved from crisis interventions.

*Baroness Massey re-joins meeting.*

We need to work in partnership to provide better access to guidance and non judgemental services, working upstream to embed preventions, listening to young people and giving them a voice.

**Discussions & Questions**

Discussions included:

- Joanne Grant raised concerns around the shortage of paediatric nurses and how only 11% of community nurses are affiliated with GPs. It's important to think about how we work with local commissioners to link with nurses and leading nurse professional groups and show commissioners how we can make a difference. We should think about the skills mix we need and how we can achieve this using local needs assessments. There are lots of different employment models, such as social

enterprises, etc. We need to think differently on how we deliver this, using return on investment models, etc.

- Sandeep Ranote said that mental health appointments should be treated like other health appointments, there are not enough staff and psychiatrists and CAMHS are well placed to facilitate peer support. There is an opportunity with the green paper on mental health to support teams for schools which could be developed with young people and include VCSE youth workers not just around health, but also looking at sport, the creative arts, etc. There is a mentally healthy schools pilot in Manchester which she is happy to share. The work around social media would be pivotal to this. PHE is keen to work with everyone and look at learning from projects and research and how we can develop these into case studies to share good practice.
- Bradley from the NHS Youth Forum raised the issue of body image for young people and how large the impact is. Psychiatrists include questions on social media in their structural assessments and take this through to their therapeutic work. He also raised the possibility of developing a public health safety/education campaign, similar to the Green Cross Code to help young people and parents. A good resource is the Rise Above campaign which has been developed by young people for young people.
- Damilola raised the issue of lack of long term funding for youth organisations and projects, which makes it difficult to carry out care within the community and effects prevention work. Young people who develop low level mental health conditions cannot get a CAMHS referral until they are at crisis point. If projects and workers are only funded in the short term it is difficult to provide measurable outcomes which support prevention work. There are NHS and PHE frameworks that can be used to measure impacts and outcomes. Local areas can also develop their own frameworks and impact measures. There are a number of toolkits being developed, such as the fingertips data tool, we need to get better at showing how we are making a difference, that is what speaks to commissioners and will secure further funding.

## **7. Any other business**

Baroness Massey thanked everyone for attending and for the productive discussion. If anyone wishes to share links to resources or research that had been raised it was agreed they would send them to AYPH. We will consider how to bring this together and take it to parliamentarians.

Baroness Massey extended particular thanks to the speakers and to Demi and Archie for addressing the meeting.

**End of meeting 17.30**