CHAPTER SEVEN

Working with young people with mental health issues

Introduction

You may be a youth worker who is working with a young person who tells you they are experiencing something that is affecting their mental health and well being such as bullying, stress, anger, depression, personal issues etc. You may have concerns about some of the behaviour that a young person is presenting with. You may also know of a young person in your community that is experiencing a mental health issue who could benefit from being involved in a youth group. This section focuses on young people who have a mental health issue or problem. It presents demographics in relation to mental health, explains the varying needs and issues that young people may face and it offers practical advice on working with young people who have a mental health issue. It concludes with a list of resources that will help you in your work.

This chapter was developed with input from Elaine Kelly (Open Your Mind - a partnership project between NUS-USI and MindWise), Kevin O’Hagan and Siobhan Brennan (NYCI’s National Youth Health Programme) for ‘Access All Areas – a Diversity Toolkit for the Youth Work Sector’ published by NYCI and Youthnet 2012
In the Republic of Ireland under the **Equal Status Acts 2000 and 2004**, it is unlawful to discriminate against a person on the grounds of their disability in the provision of goods and services. The definition of disability under the Equal Status Acts is broad. It includes physical, intellectual, learning, cognitive and emotional disabilities and a range of medical conditions. People with experience of mental health difficulties are covered by the disability ground.

In Northern Ireland the **Disability Discrimination Act 1995** and the **Equality (Disability) (Northern Ireland) Order 2000** gives disabled people rights in the areas of the provision of goods and services, education, sports, access to public facilities and accommodation and also in employment. Disability discrimination in education is covered by the **Special Education Needs and Disability (NI) order 2005 (SENDO)**, as amended. SENDO applies to schools, education and library boards, amongst other further education bodies.

**Terminology**

This resource has been developed to be used by youth workers on the island of Ireland. At times it is necessary to make distinctions between our two jurisdictions and we had to choose a terminology to reflect this. We have chosen for the most part to use Northern Ireland (NI) and Republic of Ireland (ROI). At times we also use North and South. Additionally, for clarity, where information is significantly different we have used coloured boxes:  

Republic of Ireland and Northern Ireland

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As a youth leader you will most likely already be working with young people who have a mental health issue but you – and the young person – may not describe it as such. It may be described more particularly as depression, self-harm, mood swings, anxiety, stress, dietary issues, family problems etc. The following section will help you understand what is meant by mental health and mental health issues.

**Good mental health** is about having the skills to deal with everyday life – with relationships, with responsibilities and also with relaxing. When we feel confident, capable and able to cope in these situations we feel that we can live our life to the full and take on the challenges that we face on a regular basis. From time to time events in our life will cause us stress which may result in us feeling down. This is a natural reaction to difficult experiences such as the loss of someone close, being bullied or experiencing a setback in some part of our life. However if we have developed the skills and strategies to get us through these tough times we can learn from these experiences rather than allowing them to completely overwhelm us. We can do a lot of things on a daily basis to support our mental health. We are better able to cope with stress if we are physically healthy so our mental health can be improved by taking a number of practical steps, such as taking care of our diet, keeping physically fit, taking time out for ourselves, giving time to a goal, interest or hobby and spending time with people who make us feel good.

**A mental health issue**, or problem, is where it interferes with a person’s cognitive, emotional and/or social abilities, but to a lesser extent than a mental illness. Mental health problems are more common and less severe than mental illnesses, and generally of shorter duration. Although many young people may experience mental health issues, appropriate support can help them build resilience and overcome difficulties.
**Mental illness** is a clinical term for a diagnosed mental health issue such as clinical depression, body dysmorphia (leading to a severe eating disorder) or schizophrenia.

To understand your role in relation to working with someone with a mental health issue it is helpful to look at the continuum model that describes different possible situations that people might face in their life at different times.

The continuum model shows that a person can have no diagnosable illness but can have positive or negative mental health. This will depend on the circumstances that the person is in at any one time, for instance they may have had a bereavement, be facing a stressful time in school etc. which could put them in a situation where they are experiencing poor mental health. If things are going well however and the person is looking after their emotional, mental and physical health they may be in the good mental health quadrant.

Similarly, someone can have a diagnosed disorder but be experiencing positive or negative mental health depending on the supports, treatment and appropriate interventions that are in place. Youth work can play a significant role in offering timely supports.
Given that people experience mental health problems in different ways and at different times in their life it is possible for someone to move within all the quadrants.

Recognising the changing nature of mental health can help us to look after our own well being and to play an understanding and supportive role to those who are experiencing poor mental health.

**Stigma associated with mental health**

In Ireland (North and South) mental health has traditionally been a topic not openly discussed. Due to the history of how people with poor mental health were treated and branded as outsiders, services and supports for mental health have been stigmatised. When discussing issues relating to mental health and well being, people often think of it only in the context of mental illness, particularly adults. Stigma surrounding all aspects of mental health, therefore, can be a major factor for young people accessing services or telling others how they feel. Stigma can inhibit an early diagnosis.

In **Northern Ireland** (NI) two thirds of 16-19 year olds responding to a survey did not want people to know if they had a mental health problem, although, 70% said they would avail of services if they were experiencing a mental health issue.\textsuperscript{ii}

In the **Republic of Ireland (ROI)** a number of agencies have started addressing the issue of mental health and young people. They have shown that young people are keen to
explore how to improve their own mental health as well as improving mental health services and supports.

Simple approaches, such as opening up discussions around mental health, making it part of normal and ongoing conversations, and passing on relevant and up-to-date information, can have a positive impact on how mental health is viewed by young people.

**Demographics**

Evidence suggests that 20% of children will develop a significant mental health problem.iii This can be understood as being that, at any given time, one in five young people are experiencing serious emotional distress. However, the numbers of those that will need highly specialised support delivered by a multi-disciplinary team and in acute cases, hospitalisation is roughly 2% of the population. As described earlier, the positive role that youth workers can play in supporting the 20% in distress is significant.

However, Republic of Ireland research shows that of the 20%, only a small minority are in contact with anyone from a helping agency.

Headstrong’s pilot of ‘It’s My World’ survey (in 2008) which asked a series of questions relating to young people’s mental health and wellbeing, indicated that one in five young people have no-one to talk to about their problems and only 40% felt that they could cope well with problems. Furthermore, when young people do talk to someone research shows that it is mostly likely to a friend (63%).iv Youth leaders need to let young people know that they are there to support young people through a mental health issue.

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Similarly, ‘Prince’s Trust’ reports carried out in the UK stated that 12% felt that life was meaningless, 47% were often or always stressed and 37% were often or always anxious. The main reasons for this were family relations and relationships with friends.\textsuperscript{v}

In 2008 the Republic of Ireland had the 4\textsuperscript{th} highest rate of youth suicide (15-24 yrs) in the EU\textsuperscript{vi} and almost half of all presentations in Irish hospitals resulting from deliberate self-harm in 2005 were by people under 20 years of age.

In Northern Ireland 15-19 year olds are one of the main high risk groups for suicide and young people aged 15-25 are most likely to self-harm. Between 2000 and 2010 there has been a 69% increase in recorded suicides in Northern Ireland\textsuperscript{vii}.

Northern Ireland is a region emerging from conflict which impacts on the mental health of young people, particularly in areas of social deprivation.

Other factors such as child poverty and the impact of the economic downturn are likely to have an impact on young people’s mental health, particularly with regards to career progression and job opportunities.

For instance, in a recent survey conducted in Northern Ireland it was found that 50% of people between the ages of 16-25 who were unemployed had experienced mental health problems triggered by joblessness. More than one fifth admitted to self-harming, one in three suffered from insomnia and a fifth had panic attacks. 15% said they were depressed all or most of the time.\textsuperscript{viii}
Needs and issues for young people with mental health problems

Mental health issues aren’t necessarily long-term. If a problem occurs after a traumatic event or experience, if offered prompt and appropriate support, many problems can be dealt with. However, delays in getting support because of stigma, lack of knowledge about services or a lack of suitable services being available can hinder a fast recovery from a mental health issue.

Adolescence is a critical time of development in terms of social and emotional well-being. Youth is not just a passing phase where young people learn to be adults. Young people have to negotiate this time to explore who they are and also develop the skills and knowledge which will support them in adulthood. Challenges in developing a sense of identity during this period can pose particular questions for young people which impact on their mental health.

It is also during this phase of development, particularly mid-teens to early twenties that any underlying mental health issues are likely to emerge for the first time. An Australian study revealed that mental health is in fact the primary health issue for young people between the ages of 10 and 30, with mental health concerns peaking at age 20. See the chart below.

Figure 6 Incident YLD Rates per 1,000 Population by Age and Broad Disease Grouping, Victoria 1996

YLD = years lost to disability\textsuperscript{ix}
**Risk factors and mental health**

Life experiences affect mental health which puts certain groups at higher risk than others.

- In a sample study conducted by ‘Open Your Mind’ project amongst students in **Northern Ireland**, college/ university work was the main factor having a negative impact on mental health. Stress/ pressure/ anxiety was also identified as a factor leading to poor mental health followed by alcohol/drug abuse, family problems and relationship issues, and bullying/ peer pressure

- Young people in Northern Ireland with a Learning Disability are more likely to have a mental health problem

- Young asylum seekers and refugees have been shown to have higher levels of stress and anxiety including post traumatic stress disorder

- Young people who are lesbian, gay, bisexual or transgender (LGBT) have been shown to have higher instances of mental health issues.\textsuperscript{x}

- The highest rates of suicide are recorded amongst males from the Traveller Community. The rates are 6 times that of settled Irish males.\textsuperscript{xi}

See the chapters on ‘working with young Travellers’ and ‘working with young LGBT people’ in this Toolkit for more information.

If young people are not supported these issues can snowball, leading to poor transition into adulthood, education and employment and affecting their ability to develop and maintain relationships. Timely support can help them overcome problems and
build resilience; thus supporting them to develop problem solving skills that will help them face future challenges.

Young people facing mental health challenges may also need support in other areas of their life; in their relationships, family life, education, employment and accommodation.

Young people living with a family member with a mental health issue may also need additional supports as they can often assume the role of carer, particularly in instances of parental mental illness.

In many cases young people may confide in a youth worker with whom they have developed a trusting relationship with. Youth workers can then assist young people to seek appropriate care and support from qualified health professionals, if required.

**Help seeking behaviour**

Many young people are reluctant to seek help for mental health issues. Young people may not want to admit that something is wrong, they may be fearful of the unknown, they may not understand the nature of mental illness or they fear being labelled. These pressures mean that young people generally do not seek help early and their issues may only come to light as a result of a crisis.

Young people like to attend places that are informal, open during the
evenings, drop-in and young person friendly rather than appointment based. Services like freephone helplines and signposting to relevant services that are available at night is important for young people. Peer support in schools and youth clubs from peer educators and peer mentors has also been shown to be of value in addressing mental health issues.

Not knowing what services are available, barriers to accessing supports or services, and concerns for confidentiality can also impact on a young person’s help seeking behaviour. Many young people have reported that they felt they had no-one and nowhere to turn for support when an emerging mental health issue arose. Some also reported having negative experiences in seeking support for the first time which made them reluctant to seek help again. It is important to keep in mind that the first time a young person seeks support may be the last if they find the person they talk to is not responsive to their needs.

In a survey conducted by ‘Open Your Mind’ in Northern Ireland a GP or family doctor was the main form of contact with regards to mental health problems. Friends were second and family members third. Other sources of support included counsellors and social workers.

**Entry points into support and services**

A young person with a mental health issue is likely to come into contact with a range of potential services and supports, including community-based supports such as youth work organisations. However, if a young person is seeking help for a mental health issue they will more than likely approach someone who they have a trusting relationship with, and this person may not have specialist mental health training.
If you or a colleague is approached you may be able to provide immediate mental health support while starting the process of referring them on to mental health specialists - including counsellors or psychologists - or by referring them on for a further assessment if that is what is necessary.

You can also play a more preventative role. Being able to recognise early signs of mental distress among young people puts you in a position to offer early interventions, such as informal support, activities to help build confidence or programmes offering personal development opportunities. This level of support is often enough to help a young person develop the resilience to get them through tough times.

One of the key points to remember is that for many young people, this may be the first time they have opened up to anyone about issues they might be dealing with. In this instance, listening is one of the most critical skills a worker can possess. Young people do not necessarily want solutions but rather an opportunity to express to someone what they are currently experiencing.

**Referral Pathways**

The typical pathway into mental health services is either through the young person’s GP or through Accident and Emergency services if it is a crisis. Traditionally, there has not been a strong relationship between mental health professionals and youth workers therefore youth workers may find it difficult to make a referral. However, they should support the young person and their family to access these services.

Making yourself aware of the services in your area, including locally provided services (including those provided by voluntary organisations), is an important task for any youth worker. This includes becoming aware of any

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programmes/counselling services or support groups available. Find out how to refer a young person to services and supports and how to assist them in accessing them. These services may also be interested to know how to refer young people to your project.

**Accessing services**

Youth workers can support young people to access specialist services by providing practical support, such as helping them plan how they will get to their appointments or attending services with a young person if they do not feel confident enough to go on their own. Before accessing a service a youth worker should explain to the young person what to expect of a service (explain that not all services are youth friendly), and in turn what might be expected from them (some services demand that the person is substance clear). The following list outlines some of the barriers that exist for young people accessing services so that you can support them through it.

**Barriers in accessing services:**

- Young people may be reluctant to access services if they are put on a waiting list or asked to make an appointment several weeks in advance
- The symptoms associated with mental health issues can result in young people feeling hopeless and helpless and this can reduce their chances of attending appointments and participating in assessment procedures
- Young people with mental health issues are often experiencing severe crisis, transition and upheaval in their life in addition to the challenges of adolescence
- Young people may face barriers from service providers if their behaviour is seen as ‘disruptive’ or if they have substance issues. A young person may be turned away from services without due consideration being given to their circumstances or alternatives for support
The following section outlines the mental health service provision relating to young people in the Republic of Ireland and Northern Ireland.

**Mental health services (Republic of Ireland)**

The current system of mental health services and supports for young people in the Republic of Ireland is fragmented, difficult to negotiate and emphasises a medical model of treatment for mental health issues. In 2008, 247 children under 18 years of age were admitted to adult psychiatric wards due to lack of age appropriate services for young people. According to the 2008 CAMH’s (Child and Adolescent Mental Health) first Annual Report there were 49 teams in place, staffed at 66.2% of the recommended level for these teams, to work with young people up to the age of 16.\(^{xiv}\) Between the ages of 16 and 18 young people fall between CAMH’s and adult services thereby making it extremely difficult to access support unless individual health teams make an exception.

In describing what they would like from services young people have said that they would like:

- service providers to treat them with respect and understanding
- services provided in a welcoming and relaxed environment designed with young people in mind
- services that are not stigmatised and that their attendance at them will not lead to them being labelled
- services that are available when they need them
- services that are easy to access both logistically and in making an appointment
- services that are confidential and affordable (preferably free of charge)
Mental health services (Northern Ireland)

CAMHS (Child and Adolescent Mental Health Services) in Northern Ireland are provided through a four-tiered model which includes a network of all children’s services.

Tier 4  Specialist residential, day-patient and out-patient services, severe eating disorders, severe affective disorder, severe anxiety/emotional disorder and severe obsessive compulsive psychotic disorder

Tier 3  Multi-disciplinary teams that aim to see young people with more complex health problems

Tier 2  Specialist mental health professionals working on their own

Tier 1  School nurses, health visitors, social workers, teachers and youth workers, main role not in mental health

The Bamford report in 2006 reported the service in Northern Ireland is under resourced and lacking in strategic direction. It suggested a number of improvements to services in Northern Ireland. For example, the development of a specialist eating disorder team in all areas.

There has also been a new purpose built children and adolescent patient facility located in South Belfast.

Some further developments in crisis intervention have occurred but these haven’t been equally distributed in all areas in Northern Ireland. Services that exist include crisis intervention, alcohol services, eating disorder services and independent advocacy.

CAMHS services in Northern Ireland have been heavily reliant on the community and voluntary sector.
Developing inclusive practice for working with young people with a mental health issue

The following is some practical advice which can be adopted within your organisation to make it a more supportive environment. It will also help you deal better with the concerns you may have for the mental health of the young people using your service.

Encourage positive mental health

Promoting positive mental health within your project, club or service can be done in many and creative ways in conjunction with the young people who access your organisation. Many of the activities provided to young people through youth work promote youth mental health indirectly and help develop ‘preventative’ or ‘protective’ assets in young people by helping to develop resilience. While this work does not replace the need for dedicated mental health promotion it does show how mental health promotion fits into a holistic youth work approach.

- Providing a safe space for young people to hang out
- Running activities that develop inter-personal and intra-personal skills
- Promoting life skills and self-care programmes - Life skills such as learning a new skill or competence builds confidence. Self-care builds independence and teaches about everyday coping strategies.
- Providing opportunities to develop a trusting relationship with adult youth workers
- Providing activities that are physically active - Recreation creates opportunities for encouraging activity, builds good habits around how to spend leisure time and gives opportunities for relaxation.

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Promote positive mental health messages

Opening up discussions around mental health and making it part of normal conversation can have a positive impact on how mental health is viewed by young people and how they access support.

See it in the context of your ongoing programme of activities

Promoting positive mental health can be done through many of the programmes and activities you already provide. Young people have identified a number of positive factors that can help promote positive mental health. xv

- Talking to someone about how you feel
- Relaxation/ stress management techniques
- Eating healthily
- Exercise
- Hobbies
- Limiting alcohol use
- Visiting family/ friends
You can also be more proactive in promoting positive mental health by:

- Running programmes with a positive mental health theme
- Encouraging help seeking behaviour
- Making information on help lines and mental health websites available
- Having positive mental health literature available
- Inviting speakers in to discuss various aspects of youth mental health

Look at your whole organisation approach

- It’s a cliché but first impressions last, so try and make it as easy as possible for a young person to make first contact with your organisation. Whether that be online, over the phone or the first time they call in. Talk to young people already using your service about how you could make it a more relaxed and welcoming environment for all young people
- Train all staff, including office support and caretaking staff, in how to listen to young people
- Consider how flexible your service is to the needs of young people, how easy it is for them to make an appointment with you or to talk to someone when they need to

Staff training

There are several skills that workers can develop through training which will help them in their supportive relationships with young people going through emotionally distressing times. Skills in listening, identifying and understanding mental health issues, solution focused therapies and anger management are all examples of skills that youth workers find useful.
In the Republic of Ireland there are many training courses available which will provide a basic introduction and proficiency in these skills including training provided through the National Youth Council of Ireland’s Youth Health Programme (See useful contacts for full programme). ASIST training, which supports people to make an intervention with people who are suicidal, is available free of charge through the NYCI, Health Service Executive (HSE) and Aware.

Likewise, in Northern Ireland there are many courses available delivered by voluntary and community organisations, Health Trusts and other charities. ASIST training is available through the Health Trusts and a number of leading Mental Health Charities (for more information contact the Public Health Agency). Open Your Mind (a partnership project between the National Union of Students – Union of Students in Ireland (NUS-USI) and Mindwise) also provide a range of accredited courses including OCN level 2 training in ‘Understanding Stress and Stress Management Techniques’ and ‘Understanding Mental Health’.

**Policy**

One of the key concerns for young people in discussing a mental health issue is confidentiality. Having a clear policy which is explained to young people when they first access your service is the best way to make them aware of your responsibilities in relation to their welfare and safety. Other areas for consideration include your referral policy, out of hour’s supports, staff training and peer support to staff.
Follow Up

Sometimes young people with mental health issues can find it difficult to consistently engage with a service. Allowing them some flexibility to re-engage and following up with them after a period of absence can help keep a thread of support available for the young person involved.

Include the family and other key relationships

Young people have many assets which help them build resilience and that support them through tough times. Included in these assets are young people’s pre-existing relationships with their friends and family. Helping a young person identify these and others they have a positive or supportive relationship with, is a key task in supporting them through a difficult time. They may be reluctant to tell others what they are going through but having the support of others outside of your organisation will be important in the long run. You may have to provide some information to the family to help them understand how to best help the young person.

Network

Find out about local services or supports for young people or their families. Developing a relationship with existing services, either statutory or voluntary, will make it easier to find the appropriate supports for young people going through a difficult time.
In developing a good rapport with these services/supports some of the opportunities you could explore together are:

- Develop a referral system between your organisation and an external partner
- Have a skills swap or share the cost of training between organisations
- Co-ordinate your services better
- Explore opportunities for outreach
- Have appropriate posters and leaflets available in your meeting space
Running a mental health promotion programme

A mental health promotion programme consists of the following elements:

- Mental health promotion programmes should focus on the wider aspects of mental health promotion and view the young person in a holistic way. For example programmes designed to prevent suicide may be detrimental to young people if not implemented within a structured and supportive environment. It would be more appropriate to develop programmes that help young people to cope with stress and anxiety.

- The content and presentation of mental health promotion programmes should be relevant to the context of young people’s everyday lives.

- The focus of the programme should be on modifying known risk and resilience factors/protective factors. The programme should be directed towards influencing a combination of several risk or resilience/protective factors.

- Mental health promotion programmes should intervene at a range of different times, rather than a once off basis.

- There are a range of programmes that are based on skill development and competencies which can have a positive impact on young people’s mental health such as:
  - Problem solving skills
  - Assertiveness Skills
  - Self Esteem
  - Goal Setting
  - Decision Making
  - Anger management
  - Coping Skill
  - Relationship enhancement

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Responding to early warning signs\textsuperscript{xvii}

Giving young people the opportunity to speak about how they are feeling, providing peer support to young people and promoting a positive message of mental health can all help young people to build resilience to face life’s challenges. However, there will be times when young people experience poor mental health and where your timely and appropriate support and listening skills will be necessary.

Some general signs for poor mental health to look out for are:

- Variation in mood
- Feelings of anxiety
- Disturbed sleep
- Low self-esteem
- Loneliness
- Tearfulness
- Short-temperedness
- Negative feelings about the future
- Change in weight/ appearance
- Changes in personal circumstances (e.g. parental separation, pending court appearance, bereavement, questioning their sexual orientation, relationship break up etc)
Early warning signs of more serious mental illnesses often appear during adolescence. In your work with young people you may notice some of these signs. Early intervention in mental health issues is extremely important. Early intervention is likely to result in more effective treatments, less trauma for the young person and a reduction in the severity of the mental health issue.

Diagnosis and treatment can only be carried out by a qualified health professional so it is important that you encourage the young person to see a doctor or mental health service as soon as possible. Be aware that due to waiting lists you may need to support the young person for a time before they can access a service. Therefore, you may need to look to some of the resources listed in this chapter for information in how to best help the young person while they are waiting for their appointment.

**Common Warning Signs…**

...for Depression

- Persistent feelings of sadness
- Losing interest in activities previously enjoyed
- Losing appetite
- Difficulties sleeping or staying in bed for a long time
- Feeling tired, lacking energy or motivation, or alternatively feeling anxious
- Feeling bad, worthless or self critical
- Negative pessimistic or gloomy thoughts
**Bi-Polar Disorder**

People with bi-polar disorder experience extreme mood swings.

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<tr>
<th>At the low end of the mood scale they may experience:</th>
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<tr>
<td>• Difficulty concentrating or making decisions</td>
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<td>• Loss of interest in things they usually enjoy</td>
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<td>• Sleep problems</td>
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<th>At the high end they may:</th>
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<tr>
<td>• Talk very fast about ideas which they do not follow through</td>
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<tr>
<td>• Feel little need for sleep</td>
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<tr>
<td>• Have an inflated sense of power or confidence</td>
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<td>• Behave in a reckless manner</td>
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**Eating Disorders**

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<tr>
<th>Preoccupation with body weight and control over weight and food</th>
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<th>For anorexia: preoccupation with controlling the amount of food eaten</th>
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<th>For bulimia: feeling out of control with the amount of food eaten</th>
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**Self Harm**

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<th>Deliberately hurting body, e.g. punching a brick wall</th>
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<td>Self-cutting, e.g. cutting upper arms or wrists</td>
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<td>Overdosing on prescribed or illegal drugs</td>
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<td>Self-burning with cigarettes or lighters</td>
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...Suicide

People who are considering suicide may:

- Feel hopeless
- Write or talk about suicide
- Have an overwhelming sense of guilt, shame or reflection
- Lack interest in the future
- Give away their possessions or put their affairs in order
- Self-harm

...Schizophrenia

- Withdrawing from family and friends
- Not sleeping well
- Neglecting appearance or hygiene
- Deteriorating performance at school or work
- Difficulty concentrating, following conversations or remembering
- Talking or writing about things that don’t make sense
- Being extremely anxious, panicky or depressed
- Reacting inappropriately
- Fearing, without reason, that others are monitoring or watching them or planning them harm
...Anxiety Disorders

- Persistent worry and fear, out of proportion with the situation
- Social isolation
- Poor sleep
- Inability to relax
- Avoidance of feared situations

...Psychosis

- Social withdrawal
- Loss of energy
- Reduced concentration or attention; memory problems;
- Feeling thoughts have been speeded up or slowed down
- Emotional changes, e.g. depressed mood, anxiety, irritability, anger
- Sleep disturbance
- Suspiciousness
- Skipping school or work
- ‘Something not right’

If you notice some of these early warning signs and feel concerned for a young person, approach them sensitively and calmly. Remember they might not be able to articulate what is going on for them or might not have noticed these changes themselves. You can further inform yourself by approaching the appropriate services included in the resource section of this chapter.

If you have networked successfully with other services they may be able to offer you further support.
If you choose to act on a concern you will have to engage the young person’s family as their doctor will have to refer them onto statutory services. However, in some communities there may be counselling or other supports available through voluntary organisations which will not require a referral from a GP.

If you feel the young person is facing a crisis they can enter the service through the Accident and Emergency unit in your local hospital.

With all of these options young people or their families may still need support in accessing these services or keeping appointments.
Checklist 7 - How accessible is your organisation to young people with mental health issues?

This checklist can help you to identify how you can improve your service for young people with mental health issues.

**Public image**

*How we present our service to our community*

- Our service actively considers its youth ‘friendliness’
  - YES
  - PARTLY
  - NO

- We state that we have a mental health promotion programme in our literature and when communicating with schools etc.
  - YES
  - PARTLY
  - NO

**Programme planning and delivery**

*Our programmes are designed and delivered to include the diverse needs and identities of young people with a mental health issue*

- Our service is flexible to accommodate the needs of young people with mental health issues
  - YES
  - PARTLY
  - NO

- We have a mental health promotion programme in place
  - YES
  - PARTLY
  - NO
• We consider the suitability of materials prior to using them with particular groups (e.g. we consider literacy, cultural sensitivity, personal circumstances etc)  

YES PARTLY NO

Promotion:

➢ Our service has youth mental health promotion material available and on display in our project  

YES PARTLY NO

➢ Our service has identified local mental health services and supports and developed links with them  

YES PARTLY NO

Connecting young people to services:

➢ Our service has developed an understanding of the referral process into statutory service  

YES PARTLY NO

➢ Our service has identified local mental health services and supports and developed links with them  

YES PARTLY NO

Professional development

Our staff and volunteers are trained and supported to deliver an inclusive youth service

• Staff and volunteers have an understanding of mental health issues  

YES PARTLY NO

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• Staff and volunteers know about the early warning signs of mental illness
  
  YES  PARTLY  NO

• Staff and volunteers have effective skills in engaging young people
  
  YES  PARTLY  NO

• Staff and volunteers have trained in mental health promotion
  
  YES  PARTLY  NO

• Staff and volunteers speak openly about mental health topics
  
  YES  PARTLY  NO

• Staff and volunteers promote positive messages about help seeking behaviour
  
  YES  PARTLY  NO

• Staff and volunteers receive training in managing challenging behaviours
  
  YES  PARTLY  NO

• Staff and volunteers receive support and supervision (e.g. team meetings, one-to-one formal supervision etc)
  
  YES  PARTLY  NO

Policies and procedures

We have a written commitment to deliver an equal and inclusive service

• Our service has a critical incident plan
  
  YES  PARTLY  NO

• We have a mental health promotion policy
  
  YES  PARTLY  NO

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We have a policy that covers:

- Drugs and alcohol
  - YES
  - PARTLY
  - NO
- Bullying
  - YES
  - PARTLY
  - NO
- Equality (including sexual harassment)
  - YES
  - PARTLY
  - NO
- Child protection
  - YES
  - PARTLY
  - NO

**Participation**

We make sure we include the voices of young people at all levels of our youth service

- Our service consults with young people about how mental health issues can affect their engagement with youth services and on how youth services can support young people with mental health issues
  - YES
  - PARTLY
  - NO
Useful contacts (Republic of Ireland)

**Mental health (ROI)**

<table>
<thead>
<tr>
<th><strong>Aware</strong></th>
<th>Aware Supports those who are directly affected by depression and operates a helpline from 10am to 10pm Monday to Wednesday and 10am to 1am Thursday to Sunday. The Aware helpline is a non-directive listening service for people affected by depression, either as sufferers or as family and friends. The helpline offers a non-judgmental listening ear to people who may be distressed or worried, or just need someone to talk to. You can also call the helpline if you are worried about someone who may be depressed or for information about depression or Aware services.</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Phone:</strong> 1890 303302</td>
<td><strong>Website:</strong> <a href="http://www.aware.ie">www.aware.ie</a></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>Bodywhys (The Eating Disorder Association of Ireland)</strong></th>
<th>Bodywhys core services centre on providing confidential, non-judgmental support for people affected by eating disorders. The helpline is open for two hours each weekday. Callers can access names of local health professionals, details of all Bodywhys support services and other voluntary organisations where appropriate. Bodywhys also offers support groups, including an online support group and email support.</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Phone:</strong> 1890 200 444</td>
<td><strong>Website:</strong> <a href="http://www.bodywhys.ie">www.bodywhys.ie</a></td>
</tr>
<tr>
<td><strong>Childline</strong></td>
<td>Childline is 24-hour service for children and young people up to 18 years of age. Childline is open 365 days a year (even Christmas Day!). It offers support to young people through the Childline listening service over the phone. You can call Childline for a chat or to talk about any problems you might have. Calls to Childline are confidential and they don’t have caller ID or trace any calls. It won’t cost you anything to call Childline and their number won’t show up on the phone bill.</td>
</tr>
<tr>
<td><strong>Phone</strong>: 1800 66 66 66</td>
<td><strong>Website</strong>: <a href="http://www.childline.ie">www.childline.ie</a></td>
</tr>
</tbody>
</table>

| **Teen-Line Ireland** | Teenline Ireland is a national helpline for teenagers. Teen-Line provides a listening and support service 7 days a week. They also provide talks to schools and youth groups. Helpline is open: Mondays 8pm - 11pm Tuesdays 8pm - 11pm Wednesdays 3pm - 6pm Thursdays 9pm - 12 midnight Fridays 9pm - 12 midnight Saturdays 8pm - 12 midnight Sundays 8pm - 11pm |
| **Freephone**: 1800 833 634 | **Website**: [www.teenline.ie](http://www.teenline.ie) |

| **Let Someone Know** | ‘Let Someone Know’ is an interactive website designed to support and give information directly to young people on issues relating to mental health. It is a HSE supported initiative. |
| **Website**: [www.letsomeoneknow.ie](http://www.letsomeoneknow.ie) |
| **Samaritans** | Samaritans is a confidential emotional support service for anyone. The service is available 24 hours a day for people who are experiencing feelings of distress or despair, including those which may lead to suicide. |
| **Phone**: 1850 609090 |  |
| **Website**: [www.samaratins.org](http://www.samaratins.org) |

| **Shine Ireland** | Shine Ireland is the national organisation dedicated to upholding the rights and addressing the needs of all those affected by enduring mental illness including, but not exclusively, schizophrenia, schizo-affective disorder and bi-polar disorder. The helpline is open 9am to 4pm Monday to Friday. Shine Ireland runs support groups, provides counselling and has a resource centre in Dublin. |
| **Phone**: 1890 621631 |  |
| **Website**: [www.shineonline.ie](http://www.shineonline.ie) |

| **GROW** | GROW is a mental health organisation which helps people who live with or are recovering from mental health problems. GROW has a national network of more than 130 groups throughout the country. Members attend a weekly meeting lasting about two hours. Members provide mutual support in undertaking certain tasks that encourage a healthy change in thinking, behaviour and/or relationships. Each group is supported by a fieldworker, many of whom have experienced GROW first hand. |
| **Phone**: 1890 474 474 |  |
| **Website**: [www.grow.ie](http://www.grow.ie) |
This chapter was developed with input from Elaine Kelly (Open Your Mind - a partnership project between NUS-USI and MindWise), Kevin O’Hagan and Siobhan Brennan (NYCI’s National Youth Health Programme) for ‘Access All Areas – a Diversity Toolkit for the Youth Work Sector’ published by NYCI and Youthnet 2012.
Headstrong

Phone: 01 - 6607343
Website: www.headstrong.ie

Headstrong is a non-profit organisation supporting young people’s mental health in Ireland. 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. Their vision is to give every young person in Ireland somewhere to turn to and someone to talk to. They also work with the government, media and direct community outreach to change the way Ireland thinks about youth mental health. Headstrong supports youth mental health by three ways

- Service Development (Jigsaw)
- Research
- Advocacy

Reachout

Website: www.reachout.com

Reachout is a web-based mental health information service. It provides information on a broad range of issues relating to mental health.

Suicide and Bereavement (ROI)

Console

Freephone: 1800 201 890
Website: www.console.ie

Console supports and helps people bereaved through suicide. The national freephone helpline provides a confidential listening service for people bereaved through suicide. This service provides callers with the space and safety to speak about their loss. Callers are given the opportunity to express how they are feeling and coping, or not coping, as can sometimes be the reality. Callers will be offered contact details of counselling services.
and support groups as near as possible to the location of the caller.

## Useful contacts (Northern Ireland)

### Mental Health Awareness and Support (NI)

<table>
<thead>
<tr>
<th>Organization</th>
<th>Address</th>
<th>Phone</th>
<th>Website</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Action Mental Health</strong></td>
<td>Mourne House, Knockbracken Healthcare Park, Saintfield Road, Belfast, BT8 8BH</td>
<td>028 - 9040 3726</td>
<td><a href="http://www.amh.org.uk">www.amh.org.uk</a></td>
</tr>
<tr>
<td><strong>MindWise</strong></td>
<td>Wyndhurst, Knockbracken Healthcare Park, Saintfield Road, Belfast, BT8 8BH</td>
<td>028 - 9040 2323</td>
<td><a href="mailto:info@mindwisenv.org">info@mindwisenv.org</a></td>
</tr>
</tbody>
</table>

Action Mental Health aims to enhance the quality of life and employability of people with mental health needs or a learning disability.

MindWise (formerly known as Rethink in Northern Ireland) is one of the largest voluntary sector providers of mental health services in the province, we support approximately 1500 people a year and together we work to ensure that all those at risk of, and affected by severe mental illness and other mental health difficulties have choice, hope, support and the opportunity to recover a better quality of life.
This chapter was developed with input from Elaine Kelly (Open Your Mind - a partnership project between NUS-USI and MindWise), Kevin O’Hagan and Siobhan Brennan (NYCI’s National Youth Health Programme) for ‘Access All Areas – a Diversity Toolkit for the Youth Work Sector’ published by NYCI and Youthnet 2012
Aware Defeat Depression is the only charity in Northern Ireland which works exclusively with and for people with depression. Most of us have an understanding of the illness through caring for someone affected or from personal experience. We believe that the people who use our services should have a say in how they are developed and delivered, so we employ people with depression at every level in the organisation, including the Board of Directors.

STEER is a voluntary sector organisation that provides a range of community mental health services for adults.

MDF (Bipolar Disorder Charity)
Email: mdfbelfast@googlemail.com
Website: www.mdf.org.uk
## Suicide and Self-harm (NI)

<table>
<thead>
<tr>
<th><strong>Lighthouse</strong></th>
<th>Lighthouse (previously known as PIPS: Public Prevention of Suicide and Self-Harm) is an organisation committed to providing support services to families who have lost loved ones and people in crisis</th>
</tr>
</thead>
<tbody>
<tr>
<td>187 Duncairn Gardens, Belfast, BT15 2GF</td>
<td></td>
</tr>
<tr>
<td><strong>Phone:</strong> 028 - 9075 5070</td>
<td></td>
</tr>
<tr>
<td><strong>Helpline:</strong> 0808 808 0000</td>
<td></td>
</tr>
<tr>
<td><strong>Email:</strong> <a href="mailto:info@lighthouseireland.org">info@lighthouseireland.org</a></td>
<td></td>
</tr>
<tr>
<td><strong>Website:</strong> <a href="http://www.lighthouseireland.org">www.lighthouseireland.org</a></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>RAYS Crisis Centre</strong></th>
<th>Reduce Your Risk of Suicide and Self-Harm (RAYS) group is based on the Shankill Road, Belfast and provides support to families coping with the trauma of a loved one taking their own life</th>
</tr>
</thead>
<tbody>
<tr>
<td>16 Woodvale Road, Belfast, BT13 3BS</td>
<td></td>
</tr>
<tr>
<td><strong>Phone:</strong> 028 - 9031 9333</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>Niamh Louise Foundation</strong></th>
<th>The Níamh Louise Foundation is a charity recently formed to create awareness on suicide prevention, intervention and post-intervention for the families in the areas of Tyrone and Armagh in Northern Ireland.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Western House, 3 Dungannon Road, Coalisland, Tyrone, BT71 4HP</td>
<td></td>
</tr>
<tr>
<td><strong>Dungannon Office</strong></td>
<td></td>
</tr>
<tr>
<td><strong>Phone:</strong> 028 - 8722 6217</td>
<td></td>
</tr>
<tr>
<td><strong>Email:</strong> <a href="mailto:info@niamhlouisefoundation.co.uk">info@niamhlouisefoundation.co.uk</a></td>
<td></td>
</tr>
<tr>
<td><strong>Website:</strong> <a href="http://www.niamhlouisefoundation.co.uk">www.niamhlouisefoundation.co.uk</a></td>
<td></td>
</tr>
</tbody>
</table>

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Zest NI
15a Queen Street
Derry/ Londonderry, BT48 7EQ
Phone: 028 71 26 6999
Email: zestni@yahoo.co.uk
Website: www.zestni.org

Zest exists to address the problems which lead to suicidal behaviour and direct and/or indirect self-harm in young people and adults. Zest is a voluntary organisation that will give supportive care to people suffering emotional pain and hurt.

24/7 Helplines (NI)

<table>
<thead>
<tr>
<th>24/7 Helplines</th>
<th>Phone</th>
<th>Website</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Samaritans</strong></td>
<td>0845 790 9090</td>
<td><a href="http://www.samaritans.org">www.samaritans.org</a></td>
</tr>
<tr>
<td><strong>Saneline</strong></td>
<td>0845 678 000</td>
<td></td>
</tr>
<tr>
<td><strong>Lifeline</strong></td>
<td>0808 808 8000</td>
<td><a href="http://www.lifelinehepline.info">www.lifelinehepline.info</a></td>
</tr>
<tr>
<td><strong>Frank (Drugs Helpline)</strong></td>
<td>0800 77 6600</td>
<td><a href="mailto:frank@talktofrank.com">frank@talktofrank.com</a></td>
</tr>
<tr>
<td><strong>Drinkline</strong></td>
<td>0800 917 8282</td>
<td></td>
</tr>
</tbody>
</table>
Severe Mental Illness (NI)

**Mindwise**
Wyndhurst,
Knockbracken Healthcare Park,
Saintfield Road,
Belfast, BT8 8BH
**Phone**: 028 - 90402323
**Email**: info@mindwisenv.org
**Website**: www.mindwisenv.org

MindWise works to support those at risk of, and affected by, severe mental illness and mental health difficulties

Useful Websites (NI)

**Minding Your Head**
**Website**: www.mindingyourhead.info

**Heads Away Just Say**
**Website**: www.heads-away-just-say.com

**Suicide Awareness**
**Website**: www.stampoutsuicide.org.uk

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References


ii Open Your Mind Survey

iii An independent review of Child and Adolescent Mental Health Services (CAMHS) in Northern Ireland, Summary (Feb 2011)


iv ‘YouGov Youth Index’ & ‘Hold Your Head Up’ (2009)


vi Nisra.gov.uk (Mar 2011)

vii Open Your Mind


x Supporting LGBTLives: A study of the mental health and well being of lesbian, gay, bisexual and transgender people. Maycock P et al 2009 Published by BeLonG To and Glen

xi Our Geels All Ireland health study of Travellers www.pavee.ie/ourgeels

xii Ibid


xv Open Your Mind Project (NUS-USI)

xvi Adapted from ‘Good Habits of Mind’, a mental health promotion initiative for those working with young people in out-of-school settings developed by the National Youth Health Programme, NYCI 2004


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