



Parents and Families Event! - Event Report

Exploring sexual health, mental health and wellbeing of young people

#Parents&Families

healthwatch
Southwark

Parents' & Families' Event!

Exploring sexual health, mental health & wellbeing of young people

FREE Public event

- Get a goodie bag with information about wellbeing
- Hear from professionals who work with young people
- Ask questions and contribute to discussions

All are welcome

This event is open to everyone, food and refreshments are provided but please book your place:



Call: 020 7358 7005

Email: info@healthwatchsouthwark.co.uk

Visit: <https://goo.gl/t4zPYf>



When?

Sat 16 July, 11.45pm (for a prompt 12pm start), till 2.30pm

Where?

Cambridge House, 1 Addington Square, Camberwell SE5 0HF

Date: Saturday 16 July

Time: 11.45am - 2.30pm

Venue: Cambridge House, 1 Addington Square, Camberwell, SE5 0HF

Attendees

This event was attended by 60 Southwark residents and representatives from the voluntary and community sector. 14 of these people were under the age of 18.

Purpose of the forum

The purpose of this forum was to inform local people about:

- 1) Healthwatch Southwark
- 2) The wellbeing of young people in Southwark
- 3) What support local voluntary and community organisations offer to young people

We spoke with adults present about their knowledge and experience of supporting young people around wellbeing, mental health and sexual health. We ran a separate workshop for young people present to explore their experience of mental health education and services - this workshop will not be described in this report but written up as part of our summer-long programme of engagement with young people.

Healthwatch Southwark Update

Aarti, Healthwatch Southwark Manager, spoke about Healthwatch - what it is, what it does, and the various communities Healthwatch has worked with. She spoke particularly about three reports Healthwatch had recently published around access to and experience of GP services -

- 1) A report reviewing all 44 GP out-of-hours answerphone messages.
- 2) A report reviewing all 44 GP websites for information about how to make a complaint.
- 3) A report presenting findings from a mystery shop of all 44 GP surgeries to see if people were offered an interpreting service when requested.

Aarti also spoke about Enter and View reports that will soon be published regarding King's College Hospital and St Thomas' A&E Departments.



True or False?



To explore people's existing knowledge about the wellbeing of local young people, Aarti played a True or False game with the audience. Each audience member responded to statements, by either showing a green card (if they thought the statement was True) or a red card (if they thought it was False).

Around 1 in 10 children aged 10-11 living in Southwark are classified as obese

FALSE: About 1 in 4 children (26.7%) aged 10-11 living in Southwark are obese.

The percentage of children living in deprivation in Southwark is about 1.5 times higher than the national average

TRUE: 30.7% of children in Southwark live in deprivation [16,600 children] whereas the national average is 20.6%

Rates of teenage pregnancy in Southwark are now below the national average

FALSE: Teenage conception rates in Southwark are still above the national average. But this rate in Southwark is falling, and has halved in the past 15 years. Southwark currently has the second highest reduction in teenage pregnancies in London.

1 in 10 children and young people in Southwark are estimated to have a diagnosable mental health disorder

TRUE: Almost 10% of Southwark children and young people are estimated to have a diagnosable mental health disorder. One in five is estimated to have more than one mental health disorder (i.e. 1.9% of all children)



Talks from voluntary sector organisations in Southwark, supporting young people

Southwark Wellbeing Hub

Southwark Wellbeing Hub talked about the services they provide: information and support for anyone in Southwark experiencing problems with their mental wellbeing. They take time to understand what people need and help them navigate local services, groups and activities so that they can find the right support.



- **Signposting and Navigation:** The Hub helps people find their way around local services and opportunities, and understand how to get the most from them.
- **Support:** The Hub offers up to 12 weeks of practical and emotional support during which they will work with clients to identify their goals and how they can help to achieve them.
- **Wellbeing Workshops:** These are group sessions which can help people develop skills and tools to improve their wellbeing.
- **Peer Support:** Peer supporters use their own experiences of mental distress to support others towards better wellbeing.

Teens and Toddlers



Two young people from Teens and Toddlers spoke about their Healthy Relationships Projects, which is a member-led initiative exploring the various dynamics within relationships, especially those of young people. The project aims to encourage conversations amongst young people about what constitutes a healthy relationship.

5 short videos have been produced (one was shown at this event) which Teens and Toddlers aim to take into schools to use as a stimulus to explore aspects of relationships and the effect they have on young people. This is Teens and Toddlers' first youth-led initiative, and their members will be responsible for the content of the videos and workshops, delivery of the workshops and promotion of the project.





Discussions around mental health

46 people took part in this discussion. Each table had a facilitator and a scribe. Statements were put to the groups and followed by discussion.



“If my child was having a problem with their mental health, or they were showing signs that worried me, I would know what to do.”

Most parents agreed with this statement, and said that the relationship between parents and children is really important, particularly because children can **“shut parents out of personal conversations”** at a certain age.

The approach taken really depends on the child, their situation and their relationship with their parent. Most of the parents said they would know what to do - they would discuss it with their child and listen to what they had to say. They said that for parents to have conversations with their children, they need to know the signs of mental ill health and what to look out for. One person said that they wouldn't ask directly and they would pick the right time to talk about it. If an accusatory tone is taken, the child may be less likely to share their feelings.

Some spoke about the different influences there may be in a child's life that may be affecting their mental health - such as social media, exams, having a mobile phone and the internet. One said **“you need to make time for them, we're not living their lives”**. Parents acknowledged that this is a complex issue, as what parents think is a problem might not necessarily feel like one to the child

Culture and religion were mentioned as factors that may affect how parents communicate with their child about their mental health. One person said, **“some think God will intervene”**.

Parents don't know where to go to for information and support, which can leave them feeling frustrated. For instance, some people did not know about Southwark's Wellbeing Hub and the services it offers, or any other youth organisations. People suggested that more information is needed to promote such services, and that this information needs to consider different cultures and communities.

Some parents said they would look to close friends for support, even their GP, with whom they had a relationship. Some said they would talk to faith leaders, but one felt that they would be judged - **“I am a Christian but would not go to my pastor as [they] would say my child has a demon”**.

A couple of parents spoke about their experience of using A&E services - they said some staff thought that their child was under the influence of alcohol or drugs, as opposed to being ill. Some said that when they had tried to seek help, they weren't helped until the situation had escalated.

Some parents believed that GPs do not provide mental health services and were aware of Child and Adolescent Mental Health Services (CAMHS). Some spoke of services they were aware of (such as Mind, Family Focus, Children's Centres) but felt that often they can't offer enough.

"I would trust my GP to support my child in the right way if they spoke to them about their mental health."

When adults were asked if they'd trust their GP for support, opinions were mixed. Some said it depended on whether the family had a relationship with the GP or if they saw a different doctor each time. Some didn't feel that GPs would have the time - **"they can only talk to you for ten minutes at a time"** and some weren't confident that they had the expertise - **"It's like asking a doctor to be a dentist"**.



One parent had been to their GP for their child because she had been involved in a knife incident and was suffering from panic attacks. The Doctor said - **"What do you want me to do?"**

One person felt that younger and inner London GPs were better trained to talk about mental health, as opposed to older and more rural GPs. Some felt worried that young people would be offered medication, as opposed to a more holistic approach.

Parents shared experiences of the support schools had provided for their children around mental health, some being positive - **"The school counsellor is very helpful, liaises with me as well as my child. The school knows what to do...referred my child to CAMHS"**. However, we were also told about quite negative experiences that some people had had with schools, where they felt dismissed.

Parents suggested that schools should bring in professionals to talk to people about mental health, as they didn't feel teachers who weren't trained would do this well. This would be particularly useful around stressful periods, such as exams.

Parents also acknowledged that their children would talk to their peers and that friends would **"provide a very different kind of support"**.

“More needs to be done to help parents support their children better around mental health.”



All attendees agreed that more needs to be done to help parents support the mental health of young people. They felt that there aren't enough resources for them to get information and support. Examples of help for parents which would be welcomed were coffee mornings for parents, parenting courses, information at parents' evening, information in waiting rooms, different types of communications and materials, better awareness of social media, and on television.

One group talked about the prevalence of mental ill health in parents, and how this could affect families. They also spoke about the importance of faith groups, how some communities have less of an understanding and that more education is needed.

We asked each group to tell us what they thought the key points were from their table discussion. This is a summary of what we heard:

- ✓ We need to normalise mental health and raise awareness amongst health professionals, schools and parents so they are able to talk about mental health with young people. We need more examples like Stephen Fry who try and break down this stigma.
- ✓ More needs to be done to promote talking therapies and peer support, over medication for anxiety and depression - more diagnosis before treatment, have more models that aren't so medical.
- ✓ We need better information and resources for parents around mental health.
- ✓ Medical staff need more training on mental health so they know how to behave when around a young person who is experiencing poor mental health.
- ✓ As funds are reducing and services are being cut, there needs to be more joined up working between services.



“I feel comfortable talking to my child about sexual health.”



Everyone agreed with this statement, with most saying they would feel comfortable, although acknowledging it could be embarrassing - **“If parents aren’t comfortable, then their children won’t be either.”** Those that felt it would be embarrassing felt that there should be more information available, particularly from the voluntary sector and schools.

People felt that talks with children about sex should start at an early age, as these conversations would only get harder at an older age. There was also discussion about how in other countries sex education starts from an earlier age, and that statistics suggest that young people are more sexually aware due (than the UK) due to lower rates of teenage pregnancy and infection rates.

A few people shared how their own parents had spoken to them about sex, which was positioned as being **“dangerous”**. They said that they wouldn’t take this angle with their children, but would approach it with love and tell the child that no matter what, they would support them.

A discussion took place about whether young people would speak to anyone else about their sexual health, rather than their parents. Most felt that their children would speak to their friends, hence why it is important for all young people to be well informed. Some people also said siblings might be approached over parents.

“I would trust my GP, practice nurse or local sexual health clinic to give my child the right advice and treatment around sexual health.”

Most people agreed with this statement. All agreed that a sexual health clinic would give young people good advice around sexual health because **“they are experts. They have the time and knowledge.”** Someone mentioned the importance of not only medical training, but training in how to talk to young people.



Those that disagreed said they didn’t trust GPs, they felt that they were not good, particularly because often they are locums that you might never see again.

A discussion took place around sex education and what age this should start. One person said, *“It just happens, she’s been learning about contraception before she has even talked about it.”* Others felt that sex education should be compulsory in PSHE programmes because children need to know the facts.



“More needs to be done to help parents support their child around sexual health.”

Most people agreed with this statement. Discussions took place around the internet, social media and the pressures that are placed on young people -

“Everything in society is sexualised.” Some felt strongly that a ban is needed for young people on social media or at the very least there should be

parental control over what young people are allowed to view on the internet - **“Things are just out of control”**.

People felt that young people need a trusted place or person to go to when they do not want to go to their parents. Examples of improvements needed were more clinics, more awareness in communities, linking up of services, outreach and pop-ups.

We asked each group to tell us what they thought the key points were from their table discussions. This is a summary of what we heard:

- ✓ More awareness is needed about sexual health - people need to talk about it more to create more of an open culture.
- ✓ Sex education should be compulsory for all students and it should be the same programme delivered in each school.
- ✓ Parents need more education around sexual health so they are able to talk to young people.
- ✓ Education and training needs to be delivered in a way that is suitable for young people so they can learn and participate. For example, train up youth champions who can go and speak to other young people about sexual health.