

Vance, M. (2011)

# **The need to improve mental health services for young people in Ireland**

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## Executive Summary

Mental health issues among young people in Ireland today are at an alarmingly high rate; a rate which is higher than people of the same age in the USA and the UK (Cannon et. al, 2013). This is due to mental health services in Ireland being inadequate, as shown in a study by Tatlow-Golden and McElvaney (2015). As well as being crippling to the young mind, mental-ill health means that there are less opportunities for young people. For example, young people with mental health issues are less likely to find employment (Cannon et al., 2013). Mental health needs to be dealt with from an early age by introducing mental health education into schools. According to the World Health Organisation (WHO) (2001), school is one of the most important places for the promotion of mental health. As well as this, information on where mental health services can be availed of needs to be more available to young people. This can be achieved by targeting social media websites. Additional training also needs to be given to health care professionals and teachers to make them more aware of where people can be sent for help. If all of this can be achieved, the number of the Irish youths affected by mental ill-health could be greatly reduced.

## Introduction

According to a report done by the Royal College of Surgeons in Ireland (RCSI), by the age of thirteen, 1 in 3 young people are likely to have experienced a mental health disorder. By the age of twenty-four, the likelihood of having a mental health disorder had risen to over 1 in 2 people. The report also noted that an estimated 6.8% of people will have experienced suicidal ideation by the age of thirteen; a figure that increased to 19% by the age of twenty-four (Cannon et. al, 2013).

It is clear from these figures that a lot of mental health disorders develop during teenage years; but is the correct care being given in Ireland? The same report shows that young people in Ireland have a higher rate of mental disorders than that of their peers in the USA and the UK.



Figure 1: Comparative rates of disorder among 11-13 year olds in Ireland, the UK and the USA

(Cannon et. al, 2013)

## What is the Problem?

Ireland's most recent Mental Health Act was published in 2001. As outlined in the Act, school principals do not have the ability to refer someone with mental ill-health to a specialist. This is something that needs to be introduced, as schools are one of the most important settings for promoting the mental health of young people (Lynch, 2015). Although there are many relevant points in the Act, it was published sixteen years ago and it needs to be updated in order to meet the current needs of people in Ireland (Baker, 2011).

Mental health and mental health services need to be a bigger priority of the Irish government. In April 2015, it was announced that €12 million from the mental health fund was being diverted to other areas. The decision was reversed in June, following an onslaught from critics (Finn and Brophy, 2016).

As well as this, there are currently no compulsory mental health programs in Irish primary or secondary schools. This is a huge problem as young people are not being taught the signs of mental ill-health and how to deal with them or how to seek help (Baker, 2015).

There are not enough services to meet the demand- counselling services for people with mental health problems can have waiting lists of over one year. 42% of people wait over six months to attend counselling (Hennessey, 2014).

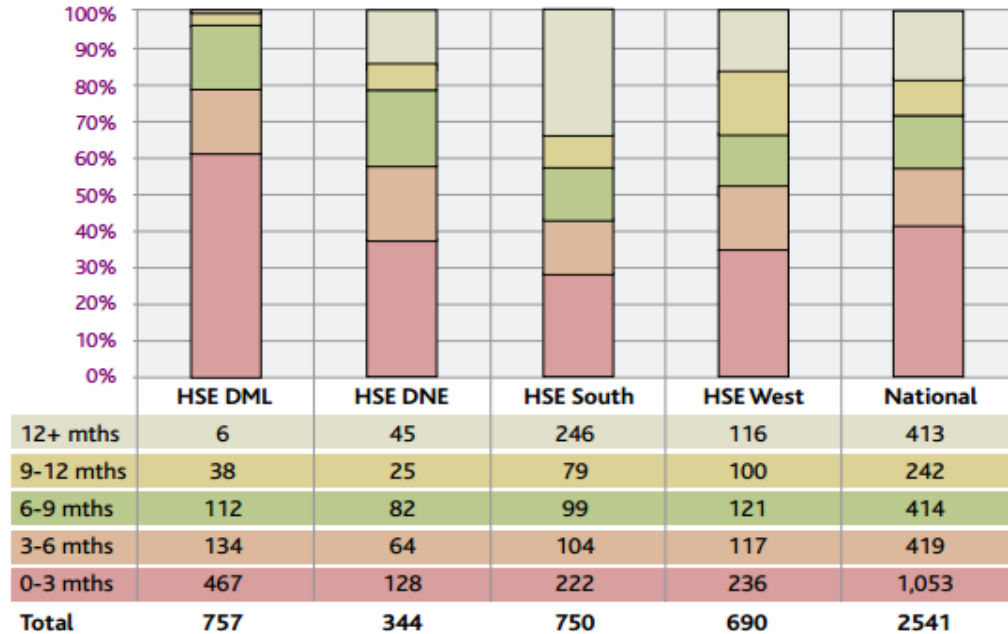


Figure 2: Breakdown of Waiting Lists by HSE Region, September 2013

(Hennessey, 2014)


## Background

There is sufficient evidence to claim that mental health services in Ireland are inadequate. A study conducted by Tatlow-Golden and McElvaney (2015) reinforces this fact. The study was carried out as part of a larger project which explored multiple perspectives on mental health policy and services for young people who spent time in care in Ireland. In the study, 8 young adults, aged 18 to 27 years, were interviewed; reflecting on their experiences of mental health services in Ireland (Tatlow-Golden and McElvaney, 2015).

The 8 participants in the study experienced some or all of the following: neglect, sexual abuse, parental mental illness, parental alcohol or drug problems. The level of support given to these

people was morally unacceptable; some noting that they were forced to talk about their traumatic experiences. In general, all participants felt that staff, foster parents and mental health professionals failed to understand them. One participant simply said, "they don't see what's right in front of them" (Tatlow-Golden and McElvaney, 2015: 3).

The lack of attention being given to mental health problems in this country is having a detrimental effect on our young people. Young people are not aware on where to go to get help, and because mental health is not a hugely published problem in this country, they often keep quiet and suffer. Facts and figures prove that in fact, mental ill-health is a serious problem in our country. A report published by the RCSI showed that 1 in 6 people between the age of 11-13 have experienced a mental health disorder. A report later carried out by the RCSI shows that people who experienced a mental health illness are 3 times more likely to be unemployed than those who did not experience a mental health problem during adolescence (Cannon et. al, 2013).



“I SPENT SO MANY MISSED SCHOOL DAYS PRAYING THAT SOME OF OUR TEACHERS MAY TALK ABOUT THIS [ANXIETY]- OR JUST SAY SOMETHING SO I WOULDN’T FEEL SO ISOLATED AND TERRIFIED – THEY NEVER DID.” - NIALL BRESLIN, 2016

Suicide, alcoholism and depression are among the most serious mental health related problems that need to be tackled in Ireland. When the RCSI interviewed a group of 19-24 year olds in specification to alcohol, 1 in 20 young adults met the criteria for an alcohol use disorder, a total of 1.2% met the criteria for alcohol abuse while a staggering 3.6% met the criteria for alcohol dependence. Moreover, it was found that 1 in 12 adults between 19-24 had deliberately self-harmed and 1 in 5 had experienced suicidal ideation (Cannon et. al, 2013). A terrifying reality is that men have a higher positive mental health score than women. Also, 80% of suicide deaths were men in 2014 (Samaritans, 2016).

Finally, anxiety is a huge issue for Ireland's young people. Of 2420 young people, 2081 were referred to take a survey carried out by The Journal by their GP and the results showed that 36% of females had anxiety and 32% of males had anxiety (Ryan, 2015).

Young people should feel that they are entitled to ask for, and receive, help in relation to their mental health. Recent statistics suggest that mental health services in Ireland are inadequate; something which would prevent young people from seeking help. Thus, it is obvious that mental ill-health in Ireland is a problem which needs urgent attention.

## Solutions

As mentioned in the report carried out by the National Economic & Social Development Organisation (NESDO) entitled 'Mental Health & Social Inclusion', the mental health policy in Ireland has not been given the priority it deserves (NESF, 2007). Young people are the future. They are the prospective leaders of the world. Thus, the Irish government should try to enforce laws that will benefit the generations to come. This includes laws and policies regarding mental health. It is the early intervention of the state that will lead to young people in Ireland feeling healthier mentally.

In Ireland, there is a significant stigma attached to mental health (Tatlow-Golden and McElvaney, 2015). In order to reach out to all young people at once, the government needs to start in a communal environment to all; somewhere universal. O'Reilly et al. (2016) completed an evaluation of participation in a schools-based youth mental health peer education training programme. This programme involved "preparing young people to deliver a mental health workshop to their peers... measures of self-esteem, help-seeking, mental health knowledge and skills". Among the observations were improved presentation skills, mental health knowledge and beliefs about help-seeking the programme (O'Reilly et al., 2016).

More steps like these should be taken in Irish schools to promote positive mental health in students. Mental health classes and modules should be introduced. The idea of broaching into classes specifically based on mental health is something that should be considered in the future

but currently, a simple resolution would be that modules would be completed on a weekly basis. These modules could be done in a Social, Personal and Health Education (SPHE) class, so that alteration of timetables and curriculums would not be necessary. As well as this, modules could run online so that the cost would be significantly less than if the teachers had to be trained to teach the course.

Such programmes would require regular assessment by the Department of Education and Science. Furthermore, there should be more support in schools on the topics of “skill development, suicide prevention and civic and social participation” (NESF, 2007).

According to O’Neill and Dinh (2012), “9 out of every 10 teenagers have a social networking profile” (EU Kids Online: Ireland, 2012: 1). Therefore, social media would be an excellent platform through which the government can reach young people regarding their mental health. A social media takeover is needed on both a local and national level regarding positive mental health. There needs to be advertisements about where and who people can talk to if they need help. There needs to be videos and photos of people who have struggled with mental health but are now on the other side of that thanks to the help they received. Finally, there needs to be a reiteration of this message: “It’s OK not to feel OK; and it’s absolutely OK to ask for help.” (Cycle Against Suicide, 2017).

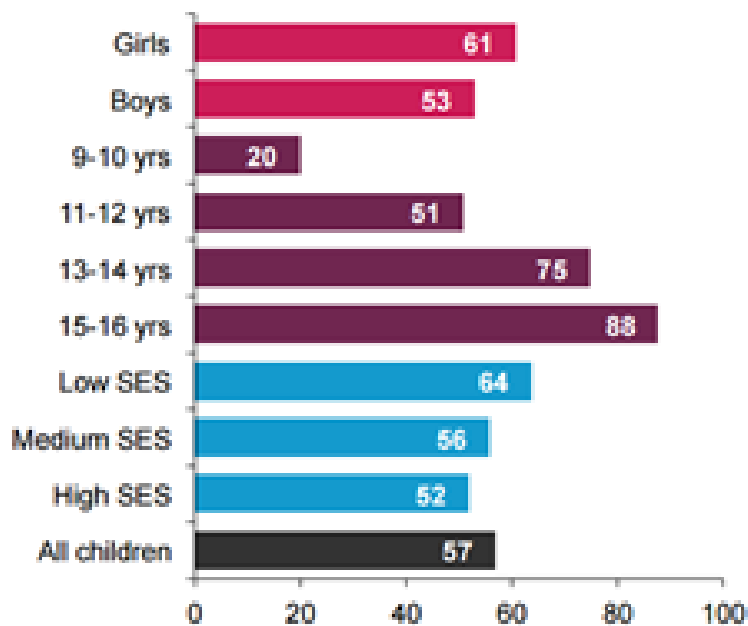


Figure 3: Children in Ireland who have a profile on a social media networking site

(O'Neill and Dinh, 2012: 1)

## Conclusion

In Tatlow-Golden and McElvaney's study, the participants note three things which are needed: stability, further training and better mental health services (Tatlow-Golden and McElvaney, 2015).

Stability is a major factor regarding mental health. The participants of Tatlow-Golden and McElvaney's study described a "shifting landscape of relationships" in which foster parents, social workers and mental health professionals would come and go (Tatlow-Golden and McElvaney, 2015: 5). This had a detrimental effect on their mental health. Thus, it is imperative that mental health professionals, foster parents, social workers and all others involved in the lives of mentally ill young people are committed to helping them on a regular, consistent basis rather than coming and going in a random fashion.



In addition, further training of mental health professionals is needed because they are "excessively theory-focused" (Tatlow-Golden and McElvaney, 2015: 6). This theoretical approach to helping those with mental health problems is problematic, as the professionals are, in effect, applying what they learnt in a book onto real people; without considering their personal, complex situations. Therefore, further training of mental health professionals and social workers is needed to combat this problem.

The issue which prevails the most prominently is the need for better mental health services in Ireland. Two participants of Tatlow-Golden and McElvaney's study praised mental health professionals who offered "choice, control, and time" (Tatlow-Golden and McElvaney, 2015: 4). This non-pressurizing environment should be replicated by all mental health professionals – in Ireland and across the globe. This is because trust must be built up over time; a point heavily emphasised by the participants. Our mental health services must be more flexible, informal, and sensitive to the level of need required by young people. They are the most vulnerable people in our society and it is our duty to act urgently, collectively and effectively to improve mental health services (Tatlow-Golden and McElvaney, 2015).

As established in the Solutions section of this paper, educating young people in Irish schools about mental health should become a central part of school curriculums. We advocate the inclusion of mental health education into SPHE classes. A good portion of these classes would be dedicated to raising awareness about mental ill-health, while also teaching the young people that it is perfectly acceptable to ask for help if they are not feeling well mentally.

In summary, the help available to young people must be flexible, informal and non-pressurizing. To improve mental health services in Ireland, collective action is needed from families, communities, educators, mental health professionals, policy-makers, budget-holders and political leaders (Cannon et. al, 2013). Most importantly, we must listen to the young people themselves and let them know that "It's OK not to feel OK; and it's absolutely OK to ask for help" (Cycle Against Suicide, 2017).

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