Checking it out: A consultation with children and young people on a draft framework for children and young people's mental health indicators

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Acknowledgements

Summary

Introduction
This report highlights the findings from a consultation which was undertaken with specific groups of children and young people in order to inform the NHS Health Scotland draft framework for children and young people's mental health indicators. The consultation project was carried out by researchers at the Centre for Research on Families and Relationships (CRFR) at the University of Edinburgh.

The project will contribute to the overall consultation process on the draft framework for children and young people's mental health indicators. It will inform the work by NHS Health Scotland to establish a comprehensive set of mental health indicators for children and young people aged under 18 years.

The framework for children and young people's mental health indicators has been developed by drawing on the framework developed for a set of adult mental health indicators. It has also drawn on expert opinion through a national advisory group and other contacts, through current policy and evidence and by considering the views of children and young people in existing research identified through a commissioned review of the literature (Shucksmith *et al.*, 2009).

Using this framework (see Table 1 section 1), the indicators will be structured under constructs (or categories): high level (mental health state) and contextual. The contextual constructs cover the risk and protective factors which impact on mental health such as: Learning and Development, Family Relations, Involvement, Participation and Equality. These constructs are structured in 5 domains: Individual, Family, Formal Learning Environment, Community and Structural.

Method
The consultation was undertaken between February and May 2010. A total of 70 children and young people from 9 groups were involved. The participants were aged from 3 years to young people in their twenties. The groups were:

- children aged 3 to 4 years
- children aged 5 to 8 years
- young people with learning disabilities
- deaf young people
- young carers
- young people with experience of care and moving on from care
- young people with experience of social exclusion
- young Gypsy Travellers
- black and minority ethnic young people.

The research team adapted the cross cutting themes which had been used by the mental health indicators project Advisory group to inform its discussions in developing the draft framework. These themes were more easily adapted,

than the framework's 26 contextual constructs, to areas which could be discussed with children and young people but related closely both to the constructs and the domains identified in the draft framework.

Children and young people were asked for their views on each of the theme areas in the context of 'the things that make children and young people's lives ok and not ok'. A large laminated poster, produced to make the framework more accessible to participants, was a focal point for discussion in most of the sessions.

The findings from this consultation should be treated as a snapshot of children and young people's views and the perspectives of specific groups of children and young people.

Results
The cross cutting themes (play, relationships, health, participation, environment, involvement in decisions, finance and transition) were adapted and used to structure discussions. These adapted themes were fun, not fair, being heard, people, places, changes and being healthy.

Fun
The cross cutting theme 'play', adapted to be 'fun' in the consultation, encompassed a wide range of activities which children and young people enjoyed including spending time with friends and family, playing outside, taking part in clubs and sports as well as following individual interests. There were differences between the older and the younger age groups in the activities they enjoyed. Being outdoors for play and meeting with friends was an essential part of children and young people's play and leisure regardless of age.

Clubs and other community resources were mentioned as being important by all the groups apart from the youngest children. Online media in its multiple forms was a significant leisure activity which was used as a way of keeping in touch with friends. There were barriers to participating in activities which included having enough money, discrimination and having places to go.

Not fair
The 'not fair' theme was a major area of discussion for all groups of children and young people. Experiences such as being bullied, cheating in games and being excluded were identified by many, including the youngest participants. These activities were perceived as unjust and hurtful.

Several groups identified specific experiences of discrimination or inequality due to disability, race, gender or being looked after. Financial inequalities were highlighted by young people who had experience of care, young women with learning disabilities, young carers and young Gypsy Travellers.

Being heard
All groups thought it was important that children and young people should be heard. However, they did not think adults listened consistently to children and

young people. Most said that family members did listen but not necessarily all of the time. Young Gypsy Travellers emphasised the central importance of family. Friends were mentioned by all groups as those who listened.

Youth workers working directly with children and young people were viewed as adults who listened. There were specific experiences of young people not being listened to, including young people who were deaf, young Gypsy Travellers and young people with experience of care.

People
Relationships were highly important for all children and young people and this is reflected in children and young people's responses across the themes. The family was central although it was not mentioned by young people who had moved on from care where the focus of the discussion was on relationships with professionals. Family was an inclusive term for the extended networks of family and friends within the Gypsy Traveller community.

Friends were a significant part of children and young people's lives with close and best friends providing trusted relationships. In addition, young people mentioned adults in professional roles with whom they had some engagement. This included, most obviously, teachers as well as professionals who had specific support roles for children and young people.

Places
Homes, outdoors, schools and leisure spaces were the main places that were mentioned by children and young people as being of importance. A home, as a place where children and young people lived, had different meanings for young carers, for young people who had left care and for young Gypsy Travellers.

School was an ambiguous place for many children and young people. Several groups identified particular concerns including learning being relevant and appropriate and the school environment not being sufficiently understanding of their needs. Young people highlighted that a variety of places were needed where young people could hang out, which were safe and with appropriate facilities.

Changes
The impact of changes on children and young people's lives was a complex area to explore. Children and young people highlighted the challenges of dealing with transitions between different school settings and the move to college and other youth groups.

Young people with experience of care described particular challenges in being prepared for changes in their lives and the need for adequate support. Young Gypsy Travellers saw change as a positive factor in their lives. Deaf young people highlighted that it was difficult to move between different school and college environments.

Healthy

Children and young people identified positive approaches to healthy living including diet and exercise, demonstrating that positive health messages were well known.

Young carers, young Gypsy Travellers and young people who had left care highlighted specific issues which affected health and wellbeing including parental health, the benefits of moving around and being poorly prepared for independent living.

Discussion

The draft framework cross cutting themes of play, relationships, health, participation, environment, involvement in decisions and finance were important for all age groups. Generally, it appears that the areas that children and young people discussed in the consultation were closely linked to the constructs in the draft framework. This suggests that the draft framework is appropriate for these groups of children and young people.

There was a high level of interconnectedness between the different cross cutting themes, the overarching domains and the 26 different contextual constructs of the draft framework. However, these constructs or areas can have different weight and priority for children and young people according to their experiences and circumstances. Those working with these groups may need to consider and identify additional very specific indicators relevant to these groups to supplement the national set of indicators.

Some of the findings are common to all the groups such as children and young people's views on being listened to and heard by adults. There are also responses which are specific to particular groups or are individual perspectives. Many of the findings are relevant across the themes, domains and constructs of the framework. It is difficult therefore to attribute the findings solely to one framework construct, domain or theme.

There are areas where the findings have implications for particular constructs in the framework. These include: the need for a wider definition of play in the context of learning and development; the relevance of participation and involvement across the domains; discrimination experienced by specific groups; the need to take account of the circumstances of young people looked after away from home in relation to the constructs that cover 'family'; linking 'safety', 'trust' and 'violence' more closely; and the relevance of the physical environment to different constructs.

The findings show that some young people experience difficulties in the transitions to young adulthood, suggesting that some consideration should be given as to how the framework can profile the needs of older young people who experience particular challenges.

There were a number of challenges associated with the study. It was difficult, for example, to consult on a draft framework which was highly complex and difficult to easily explain. The research methods had to be flexible enough to

meet the needs of a wide range of participants and there was limited time for discussion. Some of the contextual constructs were not discussed to any extent. The size, scope and approach of the consultation may have been inappropriate for exploring these in depth.

Other areas which were discussed by participants would also benefit from further exploration, either through drawing on existing evidence or through research. Discussion on the theme of health was limited due to its wide scope. The impact of changes on children and young people's lives was a complex area to consider. There was extensive discussion on what was 'not fair' across all groups suggesting that this could be explored in more depth to gain a wider understanding of the impact of discrimination, inequality and social exclusion on young people's mental health.

Conclusion
The consultation found that children and young people had many areas where they shared common perspectives. This included strongly held views that children and young people were not consistently heard and listened to. Children and young people identified a range of activities that they enjoyed and highlighted the importance of relationships. They had a clear understanding of what was 'not fair' in children and young people's lives.

Groups also had experiences that were particular to their individual and collective circumstances. This included, notably, different experiences of family, transitions, discrimination and inequality where children and young people identified specific experiences due to, for example, being looked after, being a young carer or being a young Gypsy Traveller.

Overall, the consultation found that the areas that children and young people discussed were closely aligned with the constructs in the draft framework. This suggests that the draft framework is appropriate for these groups of children and young people. However, there are some areas where the findings emphasise the importance of taking the specific circumstances and experiences of particular groups of children and young people into account in order to promote and support their mental health.

1 Introduction

1.1 Background to consultation

This report highlights the findings from a commissioned consultation project which was undertaken with specific groups of children and young people in order to inform the NHS Health Scotland draft framework for children and young people's mental health indicators. The consultation project was undertaken by researchers at the Centre for Research on Families and Relationships (CRFR) at the University of Edinburgh.

The project will contribute to the overall consultation process (see section 1.2) that was undertaken on the draft framework for children and young people's mental health indicators. The consultation will inform the work being undertaken by NHS Health Scotland to establish a comprehensive set of mental health indicators for children and young people aged under 18 years. It is intended that these indicators will support the monitoring of 'the state of mental health and associated contextual factors for children and young people in Scotland' (Parkinson, 2010:3).

1.2 Developing a mental health indicator

Mental health is a national policy priority in Scotland. The recently published '*Towards a Mentally Flourishing Scotland: Policy and Action Plan 2009-2011 (TAMFS)*' (Scottish Government, 2009) identifies infants, children and young people as a key priority. As part of its commitment in this area, it states that NHS Health Scotland will work with key stakeholders in developing national indicators for children and young people's 'mental wellbeing, mental health problems and related contextual factors' (Scottish Government, 2009). These indicators are to be in place in 2011 and build on work already undertaken by NHS Health Scotland on mental health indicators for adults[1]. The findings from this consultation will contribute specifically to the development of the mental health indicators for children and young people[2].

As for the adult mental health indicators, the children and young people's indicators will be structured within a framework. Contributions to the process of developing the draft framework have included drawing on expert opinion, through a national advisory group and other contacts, using current policy and evidence and considering the views of children and young people in existing research by commissioning a review of literature (Shucksmith *et al.*, 2009). The framework has also been developed by drawing on the framework developed for the adult mental health indicators.

This consultation project with children and young people was one part of a wider consultation process undertaken on the draft framework between March and the end of May 2010. Other activities included a targeted consultation with academic experts, national organisations and networks and a large scale national event.

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[1] www.healthscotland.com/scotlands-health/population/mental-health-indicators-index.aspx
[2] www.healthscotland.com/understanding/population/mental-health-indicators/children.aspx

Using this framework, the indicators will be structured under constructs (or categories) of two types (See Table 1). High level constructs of mental health status – outcome measures - and contextual constructs.

Table 1: Draft working framework for the indicators

HIGH LEVEL CONSTRUCTS				
Mental wellbeing			Mental health problems	
CONTEXTUAL CONSTRUCTS				
Individual	**Family**	**Formal Learning Environment**	**Community**	**Structural**
Learning and development	Family relations	Involvement	Participation	Equality
Healthy living	Family structure	Peer and friend relationships	Social networks	Social inclusion
General health	Parental healthy living	Educational environment	Social support	Discrimination
Spirituality	Family members' health	Pressures and expectations	Trust	Financial security/debt
Emotional intelligence			Safety	Physical environment
Significant life events				Violence
				Culture

The contextual constructs cover the risk and protective factors and the consequences of mental health such as: Learning and Development, Family Relations, Involvement, Participation and Equality (see Table 1). These contextual constructs are structured in 5 domains: Individual, Family, Formal Learning Environment, Community and Structural.

In addition, the Advisory group for the project on mental health indicators for children and young people used cross cutting themes, applicable to constructs from across the domains, to inform its discussions around the constructs and domains in developing the draft framework. These cross cutting themes were:

- play
- relationships
- health
- participation
- environment
- involvement in decisions
- finance
- transition.

These themes were not included as part of the wider consultation. However, they were used to structure the consultation sessions with children and young

people in this project because the themes were less extensive than the list of constructs and were easily adapted to make the consultation topics accessible to children and young people. This is explored further in the methodology section of the report (see section 3).

1.3 Consultation with children and young people
The consultation was influenced by other work undertaken for NHS Health Scotland on mental health indicators for children and young people. This included an extensive literature review on children and young people's views of the factors that influence their mental health (Shucksmith *et al.*, 2009). Scrutiny of this review showed that the views from some groups of children and young people were under-represented in or absent from the research literature. These groups included:

- children and young people from black and minority ethnic communities
- disabled children and young people
- very young children
- children and young people with experience of social exclusion.

The consultation was commissioned by the mental health indicators programme in order to address this under-representation of children and young people's views and experiences. It aimed to determine whether the draft framework is appropriate for these groups and whether there are important issues for mental health specific to their situations that are not captured in the framework. It was decided to take this focused approach as discussions with the advisory group and the research team identified that consulting a wider group of children and young people would not necessarily provide additional information to that of the literature review undertaken by Shucksmith *et al.* (2009).

Although the mental health indicators are being designed for the general population of children and young people, it is intended that the findings from this consultation will provide additional valuable information and will be of wider use to those wanting to use the indicators, especially those working with the specific groups of children and young people included in this project. The consultation will therefore act as a valuable resource to supplement the indicators framework and will be of assistance in ensuring that a population-wide approach acknowledges potential differences and inequalities in mental health among different groups of children and young people.

In designing the consultation, the research took into account Shucksmith *et al.*'s (2009) discussion of factors identified by children and young people which had implications for the mental health indicators framework. These included;

- the importance of general health as a contributor to mental health for children and young people
- children and young people being in control of their emotions and feelings with regard to their emotional health
- the importance of needing to be 'normal'

- the focus on relationships within the family
- relationships with teachers, friends and peers at school
- the relevance of relationships with other adult professionals who provide support
- lack of community facilities and the impact of poverty and homelessness.

The relevance of these themes was apparent in the consultation with children and young people, which highlighted, for example, the high importance attached by children and young people to relationships with family, friends and adult professionals (see section 4).

The research team for this consultation was aware of the limitations associated with consulting specific groups of children and young people. As Shucksmith *et al.* point out, care needs to be taken with 'using findings with such specific interests or problems' (Shucksmith *et al.*, 2009: 9). The authors highlight that most studies are qualitative and use small samples which are non-representative. The researchers were attentive to this perspective. The findings of this consultation are therefore presented as a snapshot of the views of particular groups of children and young people in a specific context related to the draft framework.

1.4   Definitions used in the report
NHS Health Scotland defines 'mental health' as being both mental health problems and mental wellbeing and this was the understanding of mental health underpinning this consultation project. The term 'mental health' was not used extensively in the consultation, acknowledging the multiple ways that terms associated with mental health problems and mental wellbeing are used by children and young people As Shucksmith *et al.* (2009) point out, many studies use adult-centric terms in gathering children and young people's views. Instead language which is 'true' to that of children and young people should be used. This consultation therefore aimed to draw on children and young people's understanding of mental health. The concepts underpinning mental health were described broadly to children and young people as 'doing ok and not doing ok'. The term 'mental health' is used in the report in line with NHS Health Scotland's definition except when reporting on language used with, and by, children and young people.

Throughout this report, the term 'children and young people' is used to describe the group of children and young people who took part. This acknowledges that children and young people's needs are different due to age; the interests of a child aged 3 years are distinct to those of a young person aged 15 years. At the same time, the use of the term 'children and young people' reflects the unique status of childhood as the period from birth to 18 years in line with the United Nations Convention on the Rights of the Child (UNCRC) (United Nations, 1989). The age range of the mental health indicators is from pre-birth to 17 years inclusive.

It should be noted that a small number of the participants in this study were over this upper age limit and included young people in their twenties. One

group had moved on from care and were part of a national project for young people who have left care. They were able to speak retrospectively about their experience and also drew on their contact with other young people who had left care. A small number of the group of young women with learning disabilities were also over 18 years of age, reflecting the wide age range of young women involved in the particular organisation approached to gain access to this population sub-group. Their contributions highlight ongoing challenges for young people who are regarded as young adults but are dealing with the complexity of their experiences and circumstances as they move into young adulthood. Their views and perspectives provide additional reflective insights into children and young people's lives as well as identifying barriers that exist for some young people as young adults.

2 Aims and Objectives

The overall aim of the project was:

- to determine through consultation whether the draft children and young people's mental health indicators framework adequately encompasses the views and experiences of a range of sub-groups of children and young people, whose views are under-represented in or absent from the literature reviewed by Shucksmith *et al.*, (2009) '*A critical review of the factors that influence their mental health*': NHS Health Scotland, Glasgow.

The specific objectives of the research were to:

- identify the population sub-groups of the children and young people under-represented in the literature review, decide which will be included in the consultation and gain access to these
- convert the draft children and young people mental health indicators framework into suitable material for the consultation
- use appropriate participatory methods to consult with the selected sub-groups of children and young people
- assess the relevance and appropriateness of the framework and indicators in the light of the experiences and perspectives of the groups consulted
- provide a summary and main report of the findings highlighting any pertinent issues with regards to the framework which are particular to the groups consulted
- devise appropriate ways to feedback consultation findings to the children and young people who participated in the consultation.

3   Method and Scope of Consultation

3.1   Sample of participants

NHS Health Scotland commissioned the research so that groups of children and young people could be consulted whose views were not reflected in the research evidence identified by Shucksmith *et al.* (2009). The research team initially identified such groups from this review and, in discussion with NHS Health Scotland, considered whether there were other groups of children and young people who should be involved in the consultation. As a result of this analysis, the groups of children and young people who were to be consulted were identified as: children and young people who were young (between 3 and 8 years of age); black and minority ethnic children and young people; disabled children and young people; young carers; and young people who had experience of social exclusion (such as low income), including those who had left care.

The consultation was undertaken between February and May 2010. A total of 9 groups of children and young people were involved in the consultation. The groups were:

- children aged 3 to 4 years
- children aged 5 to 8 years
- young people with learning disabilities
- deaf young people
- young carers
- young people with experience of care, moving on from care
- young people with experience of social exclusion
- young Gypsy Travellers
- black and minority ethnic young people.

The aim was to facilitate high quality input from children and young people. It was anticipated that it would not be possible to draw on a large sample of children and young people due to the project timescale, the range of groups that would be invited to participate and the complexity of the consultation topic. Additionally, qualitative methods were seen as more appropriate to the consultation than quantitative methods such as a survey, which could have involved a larger sample but would not have provided the in-depth information that was generated by group discussions. The aim was to get a sample of participants which reflected a range of experiences of children and young people in the specific groups.

Seventy children and young people took part, exceeding the original target of 30 to 40 children and young people. The greater number of participants is attributed to the interest and commitment of participating organisations (Appendix 1) and that of children and young people themselves. The participants were aged from 3 years to young people in their twenties. The youngest participants were attending a nursery while young people in the older age group had experience of care and moving on from care (see Appendix 2 for details of participants by group, age group and gender).

The interest and availability of two single sex groups resulted in them being included. These groups of girls and young women were young people with learning disabilities and black and minority ethnic young people. This meant that the overall sample of female participants (44) was higher than that of male participants (26). Two small groups of Gypsy Travellers from different geographical areas took part in order to ensure the participation of both young men and young women.

Groups varied from one young person in one instance to 15 young people in the largest group. Existing groups had different sizes of membership while some young people were brought together from several different groups for the consultation. The size and composition of the groups were therefore defined by availability and the practical circumstances relating to participating organisations and their groups.

3.2   Participating organisations

The research team identified organisations that directly worked with specific groups of children and young people and invited them to take part. These organisations were drawn from the research team's knowledge of the children and young people's sector. A list of organisations that contributed to the study is included in Appendix 1.

The research team worked closely with the staff teams in participating organisations to organise and undertake the consultations. Account was taken of organisations' policies including child protection procedures, ethical concerns, existing arrangements for seeking consent and practical arrangements to support children and young people's participation. Written information was provided on the consultation, the range of methods to be used and mechanisms for feedback to children and young people and organisations.

The research team originally planned to undertake initial visits to each participating organisation in order to meet with children and young people and to introduce the project to potential participants and staff. This was not feasible due to the complexity of the organisational timetables and practical arrangements. Not all groups met regularly and some children and young people were brought together specifically for the consultation. The exception was the group of the youngest children where the researchers met with the children one week and undertook the consultation the following week.

The researchers planned the consultation with organisations in some detail. This involved face to face meetings with staff in some instances and telephone and email discussion in others. Participating organisations invited children and young people to take part, sent out information and consent letters (see Appendix 3) provided by the researchers and made arrangements for the venue and transport. This pre-consultation preparation was greatly appreciated by the researchers.

The consultations took place in the premises of participating organisations. Staff were present or nearby during sessions. This was necessary as the

researchers had not met the majority of the children and young people in advance and in order to take account of organisations' child protection and supervisory responsibilities. In some groups the presence of staff, volunteers and carers was also necessary to support children and young people's participation. A signer was available for the session with deaf young people.

Having a range of adults present in sessions raises issues about whether the presence of adults who know children and young people professionally and personally impacts on the contributions of participants. The research team did not find that there were any obvious difficulties from having other adults present in these instances, while acknowledging that this might not be appropriate in other research or consultation projects. This is in accord with the view of other researchers who also found that the presence of project staff in research could be helpful in providing support and identifying potential difficulties (Curtis *et al.*, 2004).

The two researchers jointly ran each consultation session with the exception of one session with older young people and two sessions which each involved two young people.

3.3 Ethical issues
Ethical standards were closely adhered to during the research study in line with those that are used generally in research with children and young people (Alderson and Morrow, 2004; Tisdall, Davis and Gallagher, 2009). As the research team was based at CRFR at the University of Edinburgh, ethical approval was sought and agreed through ethical processes at the University of Edinburgh. Both researchers had Enhanced Disclosure Scotland checks.

Children and young people were provided with information about the consultation and invited to take part. Their informed consent was sought as was that of their parents and carers if they were below 18 years of age. Consent was 'opt in' unless the participating organisation usually used an 'opt out' approach. Children and young people were informed that they could withdraw from the consultation at any point during the process.

Each session began with establishing a group agreement about the consultation activities and reaffirmed children and young people's consent. As the activities took place in groups, the confidentiality of individuals' contributions could not be guaranteed. The researchers stated that children and young people's views would be anonymous and no names would be used in the report. Children and young people were asked for their permission to be digitally recorded.

Children and young people were not asked about their personal experiences although many children and young people drew on their own experiences and perspectives in contributing to the discussions. As the consultation was on the topic of mental health, the research team was aware that sensitive, difficult or personal issues could arise during the consultations. As part of the agreement with participating organisations, the researchers were to inform the lead contact in organisations if any issue or concern arose and ensure that

appropriate support was available to the child or young person. Researchers informed groups that they would have to tell another adult if a child or young person was unsafe or in danger of being harmed. This follow up was not necessary during any of the consultations.

A small thank-you was given to children and young people who took part. This took the form of a donation to the host organisation for a group activity or treat or a gift token in some instances for older young people. A summary appropriate for children and young people is being produced for those who took part and their organisations. It will take into account the range of children and young people that took part in its design and presentation of findings.

3.4   Research methods
The aim was to cover areas relevant to the draft framework in a way which maximised contributions from all participants in a short period of time (sessions lasted 45 to 75 minutes). The concepts behind the draft mental health indicators had to be communicated quickly and succinctly to the groups of children and young people in each session. The research methods had to be sufficiently flexible in order to meet the needs of the wide range of children and young people who took part in the consultation. These factors were taken into account in devising the research methods.

One of the most significant challenges for the research team was how to consult on the draft framework in a way which allowed for the meaningful participation of children and young people. The domains and constructs of the framework were used in the wider consultation but, after detailed consideration, the researchers decided to use a different approach in the consultation with children and young people.

The complexity of the constructs highlights why it was difficulty to use them to structure discussions with children and young people. Constructs such as 'pressures and expectations', 'family structure' and 'emotional intelligence', for example, were not easy to adapt for the consultation, especially within the time available at sessions. The wide range of constructs made this even more difficult.

The research team therefore decided to adapt the cross cutting themes which had been used by the Advisory group to inform its discussions in developing the draft framework (See Table 2). This had a number of advantages. There were a smaller number of themes than constructs making it feasible to discuss these topics in a short session. They were more easily adapted to areas which could be discussed with children and young people (i.e. 'play' became 'fun' to ensure that it was easy to understand and applicable to all children and young people regardless of age). Finally, these cross cutting themes related closely to the constructs and the domains.

In order to give children and young people a visual tool which could help in making the framework more accessible, a double sided summary was designed and produced (see Appendix 4, fig a and fig b). It included elements of the draft framework, the domains and the cross cutting themes used by the

Advisory group, adapted to appropriate language for children and young people where considered necessary (See Table 2). It provided information for participants as well as being a tool for the consultation sessions.

Table 2: Draft framework domains and cross cutting themes

Draft framework domains	Adapted domains for consultation
Individual	Young person
Family	Family
Formal learning environment	School
Community	Community
Structural	Other important stuff
Draft cross cutting themes	**Adapted cross cutting themes for consultation**
Play	Fun
Relationships	People
Health	Healthy
Participation	Being heard*
Environment	Places
Involvement in decisions/contribution	Being heard/not fair*
Finance	Not fair* (range of issues including finance)
Transition	Changes

* 'Not fair' and 'Being heard' were considered to cover two cross cutting themes

This summary handout was given to children and young people. It was useful in sharing the areas that were going to be discussed. More effective was a large laminated poster which was an enlargement of one side of the double sided summary, using the cross cutting themes from the handout which had a strong visual image with the themes identified in 'clouds' (see Appendix 4, fig b). This was used in the majority of the sessions as a focal point for discussion and activities with children and young people and researchers sitting in a circle around the poster. Participants were asked for their views on each of the areas e.g. 'What do children and young people like doing for fun?'; 'What makes it difficult for children and young people to have fun?'; 'What is not fair in children and young people's lives?' (see Appendix 5 for session plan).

Although these were general questions, they were asked in the context of 'the things that make children and young people's lives ok and not ok' (see Appendix 4, fig b). This statement was used as a shorthand way of exploring mental health while not using the adult centric terminology of mental wellbeing, mental health problems and mental health. Supplementary questions were asked, where appropriate, to explore specific issues in more detail and to draw out issues relating to the framework's constructs.

During these discussions, cut out 'clouds' were filled in by the researchers with the children and young people's responses i.e. 'playing outdoors', 'hanging out with pals'. These were stuck to the poster as the session progressed (see Appendix 6 for examples). What was written on the clouds was read out by the researchers towards the end of the sessions. Children and young people then identified their preferences by putting stickers on individual clouds. This was designed to be a fun, participative activity and

provided some additional information on areas which were especially important to children and young people. It allowed for statements which were sometimes made by individuals to be endorsed by the wider group. The lively nature of this activity at the end of a busy session meant that data were produced which were not consistently reliable in terms of analysis. However, this prioritisation is referred to in the report where the number of stickers placed by children and young people make a point particularly relevant. It also enabled ideas to be shared and referred back to in a more participative way which is not possible when a researcher conducts a traditional interview.

In addition, all the constructs from the draft framework such as 'violence' and 'family members' health' were put on pre-prepared laminated 'clouds' and were used as flash cards towards the end of the session so that children and young people could add comments on areas which had not been discussed during the session. This approach was used in a limited numbers of groups and depended on the age group and the time available for further discussion.

There were adaptations made for different groups. The large laminated poster was not used in sessions with groups of one or two young people or with the older participants. Straightforward discussion around the themes was used in these groups with the summary handout as a visual guide. For the very young children aged 3 to 4 years, a doll ('Polly') was used to help discussion ('what does Polly like doing for fun?') along with the laminated poster and clouds as in other sessions.

Data from the sessions were noted and recorded. These were then used for the analysis. Digital photographs were taken of visual data, the poster with the clouds and stickers, as appropriate. The research team recorded any contextual information immediately after the consultation session. Initial analysis of data identified themes. Data were entered into Excel by themes, taking account of the breadth of different kinds of data that was produced. The analysis explored what was common to children and young people across the consultation as well as what issues were specific to particular groups of children and young people. The research team explored the data together identifying overarching findings and themes.

4 Findings from the Consultation

4.1 Using the draft framework

The aim of the consultation was to find out whether the draft children and young people's mental health indicators framework adequately encompassed the views and experiences of particular groups of children and young people. As highlighted previously, the domains of the draft framework were adapted for the children and young people's summary of the draft framework and the adapted cross cutting themes were used to structure discussions (see Appendix 4 and Table 2 section 3.4). This was in order to make the framework accessible to children and young people and relevant across different contexts.

The following sections explore the findings from the discussions. The findings are ordered by the adapted cross cutting themes, 'fun', 'not fair', 'being heard', 'people', 'places', 'changes' and 'healthy'. Where points are relevant to a particular construct or domain from the draft indicators framework, this is highlighted.

The findings indicate where the views expressed are majority and minority views, recognising that children and young people's experiences and opinions in each group are diverse and individual as well as reflecting common perspectives. Taking this into account, the findings from this consultation should be treated as a snapshot of children and young people's views and the perspectives of specific groups of children and young people.

4.2 Cross cutting theme: Fun

The theme 'fun', representing the cross cutting theme 'play', generated wide ranging discussion on different play and leisure activities which were chosen freely and enjoyed by children and young people. It particularly related to different domains in the draft framework including the individual, family and community and as well as various constructs including learning and development, peer and friend relationships, participation, social networks, discrimination, social inclusion, the physical environment and culture.

Being outdoors was liked by all groups as was the sociable nature of their activities which involved friends and often family members. Children and young people also identified barriers to taking part in activities. These included; having enough money to participate; discrimination (particularly for young Gypsy Travellers); and the lack of appropriate facilities, often described as 'nowhere to go'.

Playing outside was popular for the youngest children, those that were 3 and 4 years old, with the park being a favourite place. The slightly older age group, 5 to 8 years, liked playing outdoors with activities becoming more varied and involving other children. Playing on the street, going to the park and playing football with friends were activities which many of the children enjoyed. They talked about clubs such as the after-school club and a football team and being involved in social events such as 'going out for tea with friends'.

The girls' group from the black and minority ethnic community, who were aged 9 to 11 years, emphasised the social nature of their fun activities. The girls discussed the importance of hanging out with friends, sleepovers at friends' houses, parties and attending festivals and carnivals. They enjoyed going out for meals and treats, playing outside, music, computer games, sports and hanging out with their family.

There was a range of activities common to many of the young people aged over 13 years of age. Youth clubs were popular as were the sociable activities of hanging out with friends, staying over at friends' houses and family holidays. Young people liked going out to the cinema and playing sports such as football. Older young people variously also mentioned music gigs, parties, clubs and going out drinking with friends as well as spending time with boyfriends and girlfriends.

Young Gypsy Travellers enjoyed similar activities to other young people including spending time with friends, going to the cinema and sports. But young Gypsy Travellers also stated that they could not do all the activities they wanted to because of discrimination. One group said that it was difficult to go to places such as the local community centre because other young people would 'find out we was travellers and then we'd get bullied'. Being with family members was a central aspect of their social lives.

Young carers emphasised that young carers' groups provided both fun and support. Young people enjoyed the activities that they did together (paintballing and go-karting being particularly popular). One young person pointed out that he/she would not get out of the house very often without the support of the young carers project:

> 'Workers are sound. They take you to places that are fun. Good laugh. And they give practical help and help other people understand what being a young carer is like.'

Young people across the groups mentioned the importance of the clubs that they attended. This included the girls' group for young women with learning disabilities, the clubs that the young deaf people attended and the work (now discontinued) of a national voluntary organisation which had previously supported young Gypsy Travellers. These clubs and activities appeared to be appreciated because they were specifically tailored to the needs of these young people. In addition, children and young people mentioned a very wide range of activities which they enjoyed. These included football, boxing, drama club, playing drums, going to the shows, fishing, playing on bikes and scooters, quad bikes, knitting, making crafts, playing on the trampoline, painting, gymnastics, karate, judo, discos, dancing, horse riding, watching television, going to museums, swimming, ice-skating and bowling. Some young people mentioned how much they liked going on holiday with their family while others, young people with experience of care and young carers, highlighted that they would like to have holidays.

One area emerged as highly significant for children and young people's lives. Digital technologies, along with traditional media such as television and films, were a central part of young people's leisure activities. Young people highlighted the importance of staying in touch with friends through social networking sites. This was particularly the case with those aged over 13 years although all groups, apart from the very youngest group, mentioned social networking sites. Children aged 5 to 8 years pointed out that 'everyone' knew about Facebook and used the internet. The group for girls and young women with learning disabilities identified Bebo and Facebook, MSN, email and Google as online tools that they accessed regularly. Deaf young people said that they used the internet, MSN, Skype, computer games and games consoles. Young Gypsy Travellers said that the social networking site Bebo was a good way of staying in touch if they had access to the internet. Computers and mobile phones were therefore an accepted way of communicating with other young people. Their purposes were highly valued and contributed to social interaction.

There were barriers to participating in play and leisure activities. Young people with experience of care mentioned that 'everything costs money', adding that young people who were not in care had parents who would help them out financially. Young people who lived in care or had moved on from care did not have access to this support. Both young carers and young people with experience of care emphasised that they wanted to have the same opportunities as other young people. Young women who were Gypsy Travellers said that they did not hang about 'on the street' and that it was necessary that their family knew where they were. A small number of young people across the groups mentioned the police stopping young people hanging about with their friends.

Main points
The cross cutting theme play, adapted as 'fun', encompassed a wide range of activities which children and young people enjoyed including spending time with friends and family, playing outside, clubs, sports and following individual interests. There were differences between the older and the younger age groups in the activities they enjoyed.

Being outdoors for play and meeting with friends was an essential part of children and young people's play and leisure regardless of their age. Clubs and other community resources were mentioned as being important by all the groups apart from the youngest children. Online media in its multiple forms was a significant leisure activity which was used as a way of keeping in touch with friends. There were barriers to participating in activities which included having enough money, discrimination and having places to go.

4.3   Cross cutting theme: Not fair
The 'not fair' theme was used to explore what the participants thought was unfair in children and young people's lives. It offered an opportunity to explore the structural domain of the draft framework including discrimination, equality, social inclusion and financial security. As in the other themes,

children and young people's views also related more widely to constructs such as relationships with friends and participation.

The term 'not fair' is one which is recognisable to children and young people of all ages. As Hill points out, children use this term to express approval and disapproval and to include 'ideas of both equity and equality' (Hill, 2006: 77). The acceptance of this term was apparent in the consultation with the youngest children understanding the concept. They saw 'not fair' as being about 'pushing', hitting', 'biting', 'kicking ball when not looking', 'eating her chocolate bars'. 'Not fair' was not necessarily about major structural issues; it included everyday injustices which affected children and young people and made them feel uncomfortable, annoyed, excluded or distressed. For the two younger age groups of children in the consultation, it related to being treated badly by others, often in play or school activities.

For older young people, what was 'not fair' covered a wide range of areas. In addition to general comments about being treated unfairly, there were also specific issues relating to the draft framework constructs around inequalities, discrimination, social inclusion and financial issues. Young people highlighted areas where they were stigmatised.

Young people in the young carers group suggested that they 'should get paid to care'. This was a strongly held view with young people heavily prioritising this response when using stickers. Young carers said that they were 'not getting enough help to look after the people they care for'. Some stated that they could be 'stuck' at home because of their caring responsibilities. There were also financial concerns with money needed for 'basic things'. As one young person pointed out 'if parents are ill, [they] can't work'.

Young carers stated that many people, particularly teachers, did not know about the situation of young carers. They thought it was not fair if they got into trouble at school for not doing homework because they were 'too stressed or too busy'. They needed mobiles to stay in touch with their families but schools did not always allow them to keep their mobiles turned on. Young people pointed out that they had no option about undertaking their role. Even when they did not want to be a carer, one young person stated that 'you have to – no-one else will'.

Young Gypsy Travellers identified significant racism, discrimination and inequality which Gypsy Travellers routinely experienced. Young people pointed out that they were insulted and bullied in a range of situations and were not seen as equal to other people. One young Gypsy Traveller said that people who lived in houses (as opposed to living on a local authority Travellers site) had more money and better jobs. Another said it was not fair that they did not have the freedom to be themselves:

> 'Travellers get blamed for a lot of things. They get racism…comments towards them like tinks or minks or worse.'

In contrast to their experience of discrimination and inequality, the young people emphasised the importance of their Gypsy Traveller community, their family and their heritage.

Young people with experience of being looked after away from home described their experiences as being different to that of young people who were not looked after. The people involved in their lives continually changed instead of providing relationships based on ongoing support and stability. Trust was a characteristic that was highly valued. The group identified that young people experienced inequality, stigma and discrimination from being in care, often feeling left out or less valuable than other young people. One young person talked of a health professional 'who had looked at me like something wiped off [a] shoe', making this young person feel like 'rubbish for ages afterwards'.

Money was a significant problem for young people moving on from care. Young people might have difficulties in budgeting for the first time and not have enough money for living expenses. It was pointed out that young people who had left care did not have 'handouts' from relatives and that other people did not know what it meant to be homeless or in care.

Young deaf people highlighted a number of situations where they experienced discrimination and inequality. One young person said that 'people make a fool of us because we're deaf' and another said that 'people ignore you when you are speaking'. Several young people agreed with the view that they were not allowed to do things independently without adult supervision.

Young women with learning disabilities pointed to several areas which they thought were unfair. They also did not like others such as older brothers and sisters, parents, teachers and 'everyone' telling young people what to do. This group discussed being able to make decisions ('when adults think they know what's best for you but they don't') and doing things independently (such as driving a car). The young women were clear that it was not fair if a person did not have enough money.

Gender inequality came up in three different groups; the group of children aged 5 to 8 years and the two all female groups. In the younger age group, one boy commented that all the teachers were 'girls' and it was suggested by boys that girls got preferential treatment in school. There were some divisions in views about gender preferences with some girls in this group suggesting that boys got more attention while boys thought that teachers said 'no' to boys more frequently.

The girls group from the black and minority ethnic community highlighted a range of areas where they thought there were gender differences. It was suggested that boys thought they could beat girls and that girls did not agree with a view that a women's role was solely about cooking and cleaning. One young person said that 'males and females should be treated the same'. However, the girls also thought that there had been some changes in attitudes and that some girls were lazy just like some boys.

This group also identified an extensive list of things that were 'not fair' including parents being over protective, not being trusted, being misjudged and misunderstood and stereotyping of individuals. This group also brought up the impact of the 'credit crunch' and the difficult financial situation on young people and their families. Children aged 5 to 8 years said it was not fair if children did not have food and water or have a family and lived on the street.

Main points
The 'not fair' theme was a significant area of discussion for all groups of children and young people. This suggests that this topic could be explored in more depth to gain a wider understanding of the impact of unfairness in the form of inequality, discrimination and exclusion on young people's mental health. Experiences such as being bullied, cheating in games and being excluded were identified by many children and young people, including the youngest participants. These activities were perceived as unjust and hurtful.

Several groups identified specific experiences of discrimination or inequality due to disability, race, gender or being looked after. The experience of being stigmatised and discriminated against was powerfully expressed by young people leaving care, young Gypsy Travellers and young carers.

Financial inequalities were highlighted by young people who had experience of care, young women with learning disabilities, young carers and Gypsy Travellers.

The findings from discussion on the theme, 'not fair', relate closely to the structural constructs identified in the draft framework particularly social inclusion, discrimination, financial security and debt, indicating that these constructs are highly relevant to these groups of children and young people.

4.4   Cross cutting theme: Being heard
The thematic area 'being heard' was closely linked to the theme 'not fair' and to the constructs 'involvement' and 'participation'. However, it was apparent that being heard related more widely to other constructs including family relations, learning and development, peer and friend relationships, educational environment, social networks, discrimination and trust.

Being listened to was highly important for all children and young people. There was a general consensus that adults did not consistently listen to children and young people. As one child in the 5 to 8 year old group suggested 'people only listen a wee bit'. Parents were often identified as adults who did listen but this experience was mixed. Reflecting a point that several young people made, one young person pointed out:

> 'Sometimes they [parents] listen to you really good but sometimes they just block you out and don't listen to you.'

Young people also identified a range of other adults who listened, drawing on their own or others' experiences. Many of these adults were professionals working with children and young people. Some teachers did listen to children

and young people but this viewpoint was balanced by several comments that teachers did not listen. Youth workers were seen to take children and young people's views into account. This was unsurprising as many of the groups of children and young people were facilitated by youth workers. In addition key workers, befrienders, support workers and other professionals were mentioned by young people who had access to these services.

A number of young people across the groups commented on the status of children, young people and childhood and how poorly children were regarded. It was suggested that the traditional idea that children should be seen but not heard was still prevalent with adults listening to each other rather than to children and young people. One child in the group of 5 to 8 year olds pointed out that 'if children weren't listened to, what would be the point of talking?'. All the groups, including the youngest children, highlighted that friends did listen to children and young people, confirming again the importance of friends and relationships which was constantly repeated across the consultation themes.

Some groups asserted that children and young people were not consistently listened to. Young deaf people raised a number of issues about communication, pointing out that it was challenging to meet people and talk to them as well as experiencing discrimination because of being deaf. One young person suggested that young people did not get a say with adults talking on their behalf.

Young people with experience of care stated that young people who were looked after did not always get a say in decisions that affected them. The group thought that younger children were not always regarded as old enough to participate in decisions around their care and could therefore be 'overlooked'. This practice could continue as they got older with children and young people not equipped to challenge this perspective. It was suggested that adult professionals thought that they knew best and made decisions on the basis of 'what they see on a piece of paper'.

Young Gypsy Travellers did not feel listened to by a range of professionals including teachers and the police although individual youth workers and one children's organisation were mentioned as being trusted. One young Gypsy Traveller said 'my family - that's it' when asked who listened. Another young person said 'not really anybody'. It was suggested that more could be done to understand Gypsy Traveller culture by a range of people and organisations including teachers and the government.

Main points
All groups thought it was important that children and young people should be heard. However, they did not think adults listened consistently to children and young people. Most said that family members did listen but not necessarily all of the time. Young Gypsy Travellers emphasised the central importance of family. Friends were mentioned as those who listened by all groups.

Youth workers working directly with children and young people were viewed as adults who listened. There were specific experiences of young people not

being listened to by other professional adults including young people who were deaf, young Gypsy Travellers and young people with experience of care.

4.5 Cross cutting theme: People

Participants were asked 'who were the important people in children and young people's lives?'. This was in order to explore key relationships for children and young people's mental health. This thematic area was, of course, relevant to many constructs including family relations, peer and friend relationships, educational environment and social networks and discrimination.

With the exception of young people who had left care, family was mentioned as being central to children and young people. This affirms the importance of this domain in the framework. Family included immediate and extended family members. Most young people mentioned parents with many identifying brothers and sisters, grandparents, aunties and uncles and cousins. Pets were mentioned by several young people, often alongside that of family.

Young Gypsy Travellers highlighted the importance of their extended families. One young person pointed out that they knew Gypsy Travellers all over the country even where they were not related 'if you live close to someone for so long it's like they become part of your family'. This sense of family and friends in the Gypsy Traveller community being 'family' was a strongly held view. Relating this to the framework, it suggests that there are close links between 'family' and the social networks construct.

Unsurprisingly, all children and young people said that relationships with friends were crucial. This applied across the age groups with the youngest participants identifying friends who attended nursery. Older young people had gradations of friendships, identifying 'best friends' and 'good friends' as well as boyfriends and girlfriends. Although friends were vital for young people who had left care, it was suggested that some friends could be a 'bad' influence. Young people who were looked after away from home often had to move from place to place and found it difficult to maintain relationships. Gypsy Travellers pointed out that they generally did not have friends outside the Gypsy Traveller community. Young carers stated that some friends could be supportive while others were not. They could be left out of social activities 'if your pals are going out and you can't'.

Professionals such as teachers and youth workers who worked with children and young people were mentioned by many of the young people. Less frequently identified were adults in public service roles such as doctors and police. There was some ambiguousness about relationships with teachers with responses from many young people indicating that these relationships could be mixed. One young person said that teachers did not take an interest, while another said that he/she preferred 'nice' teachers who did not shout. Young Gypsy Travellers highlighted that they did not have positive engagement with schools, pointing out that teachers generally did not understand their needs.

Other adults provided specific forms of support such as carers, befrienders and social workers. Young people who had been in care identified that people were key to supporting their mental health. One young person pointed out that having a throughcare worker helped with the process of leaving care as one to one support was essential. Good communication between professionals and between workers and young people helped significantly in the process of moving on from care.

Main points

Relationships were highly important for all children and young people. This was reflected in children and young people's responses across the constructs. The family was central, although it was not mentioned by young people who had moved on from care where the focus of the discussion was on relationships with professionals. Family was an inclusive term for the extended networks of family and friends within the Gypsy Traveller community.

Friends were a significant part of children and young people's lives with close and best friends providing trusted relationships.

In addition, young people mentioned adults in professional roles with whom they had some engagement. This included, most obviously teachers as well as professionals who had specific support roles for children and young people.

4.6   Cross cutting theme: Places

The environment cross cutting theme was explored by asking 'what are important places for children and young people?'. This related to the physical environment specifically but also to domains such as family and community where places such as 'home' had specific meanings for children and young people. It also linked to educational environment and pressures and expectation in the formal learning environment domain.

The participants identified a range of places including their homes, outdoor places, schools and leisure spaces (see also 'fun' section 4.1). 'Home' was identified as a significant place where children and young people lived with their families as well as providing personal space. One child in the youngest group said that a 'comfy' house was important and another in the slightly older children's group that people's houses kept them safe. The children in these age groups identified home as a place where they lived.

Where young people lived was more complex for three groups of children and young people; young carers, young Gypsy Travellers and young people with experience of care. Responses from some young carers highlighted that they could be 'stuck' at home and that they needed opportunities to be away from home (see also 'not fair' section 4.3). Young carers groups were seen to provide a welcome opportunity to have a break from caring.

Young Gypsy Travellers had a different experience from other participants. They lived in physically different environments, local authority run Travellers'

sites or between sites and traditional houses. Young Gypsy Travellers in one group pointed out that a site was not a good place to live in all the time, although it did provide basic facilities such as running water and electricity. Instead, travelling and moving around were regarded as a positive way of living. One young person described the idea of 'home' as something other than place:

> 'We can make our home anywhere. It is not a place but about being where your family is.'

Another young person pointed out that they 'couldn't live in the same place for 15 years. I couldn't even live in it for 5 years… 3 years'.

Having somewhere to live was particularly complex for young people with experience of care. Young people talked about never living somewhere for more than two years. One young person pointed out that he/she 'never got told where [they were] going to' or why he/she was being moved as a child and young person. When moving from care to living independently, young people did not always know their rights and could end up living in 'rubbish places' which also felt unsafe. If a young person moved to an area which was 'bad', they could be negatively influenced by what was going on around them. Different kinds of housing for young people leaving care offered varying levels of support. It was pointed out that young people who lived in care were not given the opportunity to develop skills to live independently. Even as young adults, it was difficult for some young people who had been looked after away from home to settle in one place because of their previous experiences.

The consultation did not explore children and young people's experiences of school in detail, although it was generally seen to be an important place. Comments reflected the ambiguity of children and young people's relationships with school, echoing points made in previous sections. Some young people who were at college indicated that they preferred it to school and that they were treated like adults. For some young people, school was not a place where they felt comfortable.

Both the young carers group and young Gypsy Travellers suggested that they wanted to learn things that were relevant to their lives although there was some agreement that reading, writing and counting were necessary skills. Formal learning was not a priority for young Gypsy Travellers who said that they learned from their family. They found it difficult to take part in 'settled education', especially when they experienced bullying and being assaulted. Young carers stated that schools were not understanding of their circumstances. Conversely, the pressures of both caring and doing well at school were not always understood at home. One young person pointed out that families assumed that young people would do the caring and pass exams as well. Young deaf people indicated that separate classes for deaf children and young people emphasised differences with other young people.

Young people suggested that a variety of places were needed for young people to hang out in, that community centres did not always provide good

enough facilities and that young people needed safe places to go. One participant stated that young people with different group identities and interests needed their own places to meet where they were not moved on by the police. A number of young people mentioned the importance of the church, the mosque or other places of religious worship.

Main points

Homes, outdoors, schools and leisure spaces were the main places that were mentioned by children and young people. A home, as both a physical place and a place which had personal meaning, had different meanings for young carers, for young people who had left care and for young Gypsy Travellers.

School was an ambiguous place for many children and young people. Several groups identified particular concerns including learning being relevant and appropriate and the school environment not being sufficiently understanding of their needs.

Young people highlighted that a variety of places were needed where young people could hang out, which were safe and with appropriate facilities.

4.7   Cross cutting theme: Changes

Participants were asked about the importance of 'changes' in children and young people's lives. The term 'changes' was used as it is more accessible than 'transitions', a term more commonly used by professionals than by children and young people.

'Changes' was the most challenging theme to explore and worked best when discussing specific changes in young people's lives. Like the other themes, it related to a wide number of constructs including those in the formal learning environment domain such as peer and friend relationships and to other constructs such as family relations, significant life events, social inclusion, social support and finance/debt.

For some children and young people, 'changes' meant the transition from pre-school to primary and primary to secondary school. Those in the youngest group talked about being excited about the upcoming move to primary school. The children and young people aged 5 to 8 years identified a range of conflicting emotions around their previous move to primary school including being happy, glad, terrified, excited and nervous. Young women with learning disabilities mentioned that it was challenging to move to different groups (such as moving on from the girls/young women's group to other leisure groups) and moving to college.

Changes were particularly challenging for young people with experience of care. Moving somewhere else to live often happened at short notice and with little prior discussion. One young person said 'Just get told – moving house, moving families'. Having good support and communication helped with the process of change but young people suggested it was a question of 'pot luck' if this support was available.

Young people leaving care were not generally prepared for independent living. The group agreed everything was provided for young people in care including money, food and washing. The experience of leaving care was described as being akin to being let out of prison and having to make their own way. Support workers were needed who could help young people to move on and 'deal with things'. Young people leaving care could get into debt and lose the tenancy of their homes.

For young Gypsy Travellers, change was regarded as an integral part of what they did. Moving around was a way of life. Change was seen to be 'as good as a rest' with one young Gypsy Traveller highlighting that he/she liked change and did not like 'sitting in the house constantly'.

Young people who were deaf commented on some of the challenges of transitions. Moving to secondary school was easier if young people knew other young people going to the same school. Similarly, it was difficult moving from school to college and then looking for a job.

The girls group aged 9 to 11 years identified complex changes which children and young people might have to confront. These included a range of issues relating to the family such as parents losing their jobs and becoming redundant and divorce and children making choices about who to live with. This group also discussed macro issues such as global warning and politicians' disregard for the interests of children.

Main points
The impact of changes on children and young people's lives was a complex area to explore. Children and young people highlighted the challenges of dealing with transitions between different school settings and the move to college and other groups.

Young people with experience of care described particular challenges in being prepared for changes in their lives and the need for adequate support. Young Gypsy Travellers saw change as a positive factor in their lives. Deaf young people highlighted that it was difficult to move between different school and college environments.

4.8   Cross cutting theme: Healthy
The cross cutting theme on health related to different constructs associated with health, both personal and parental health. This related very much to the individual (constructs healthy living and general health) and family (construct family members' health) domains but also had consequences for the structural domain where young people experienced inequality due to access to health care or support in being healthy.

Children and young people's responses had a strong focus on health promotion. All groups emphasised the benefits of healthy living habits such as drinking water, eating fresh fruit and vegetables and having a healthy diet. The youngest group identified the importance of cleaning teeth, eating good food, drinking, running and exercise. Older young people also described a

range of unhealthy activities such as smoking, drugs and alcohol while emphasising the benefits of physical exercise.

One group focused on wider approaches to being healthy. They said that children and young people needed to do what they wanted, not be lazy and not watch television all the time. This group acknowledged the pressure on parents to provide healthy food. Some parents were tied up at work and could not always cook meals, providing money instead to children so that they could buy food.

Young Gypsy Travellers viewed moving around from place to place as being healthier. Being more active and having greater freedom was associated with living in a caravan. One group of young Gypsy Travellers stated that it was more difficult to access health care because their family did not have a permanent address.

Young carers pointed out that parental health had a big effect on their lives. They did not necessarily have someone to talk to if they were angry or upset. One young person discussed a positive experience of counselling but there was general recognition that it was difficult to talk to other adults about their situation. One young person said 'you cannae talk to your ma and da cos you need to take care of them'. There was some concern expressed that young carers might be taken away from their parents if they talked to professionals. Instead they wanted someone to talk to who could take their side and listen to them.

Young people with experience of care pointed out that young people who had been in care were not necessarily prepared for looking after themselves when they left care. As a result, young people did not always eat healthily, living instead on 'pot noodles'. The group pointed to the findings from a survey at a previous national conference for care leavers, which found that 92% of the young people who took part experienced negative emotions on leaving care and that 56% identified that young people needed emotional support (The Debate Project, 2009). It was suggested that being aware of mental health and illnesses such as depression would help young people considerably.

Main points
Children and young people identified positive approaches to healthy living including diet and exercise, demonstrating that positive health messages were well known.

Young carers, young Gypsy Travellers and young people who had left care highlighted specific issues which affected health and wellbeing including parental health, the benefits of moving around and being poorly prepared for independent living.

Discussion on the theme of health was limited due to its wide scope and the time available in sessions for detailed discussions.

5   Discussion of findings

5.1   Influencing the draft framework

The aim of the consultation was to assess the relevance and appropriateness of the draft framework in the light of the experiences and perspectives of the children and young people who were consulted. Drawing from these findings, the consultation aimed to highlight any pertinent issues with regards to the framework which were particular to the groups that were consulted. It also aimed to identify new areas relevant to these groups.   These areas are explored in this section.

5.2   Consultation findings

The draft framework cross cutting themes of play, relationships, health, participation, environment, involvement in decisions and finance were relevant to all age groups.

Play and leisure activities were important to all children and young people regardless of age with a wide range of activities described. This included online media in its multiple forms which was highly popular as a leisure activity and was used as a way of keeping in touch with friends and being a means of interacting with others. There were barriers to children and young people participating in activities which included having enough money, discrimination and having places to go.

A significant number of the groups discussed the impact of inequality, discrimination and social exclusion on their lives. This experience affected a number of areas in children and young people's lives including school, relationships and access to services. Several groups identified experiences of discrimination or inequality due to disability, race, gender or being looked after.   Financial inequalities were identified by young people who had experience of care, young women with learning disabilities, young carers and Gypsy Travellers.

All groups thought it was important that children and young people should be heard. However, they did not think adults listened consistently to children and young people. Friends were mentioned as those who listened. There were specific experiences of young people not being listened to including young people who were deaf, young Gypsy Travellers and young people with experience of care.

Relationships were highly important for all children and young people. This was reflected in children and young people's responses across the themes. The family was central to the majority of children and young people although it was not mentioned by young people who had moved on from care. Friends were a significant part of children and young people's lives with close and best friends providing trusted relationships.

Homes, outdoors, schools and leisure spaces were the main places that children and young people identified as being important.   A home had different meanings for young carers, for young people who had left care and

for young Gypsy Travellers. School was an ambiguous place for many children and young people. Several groups identified particular concerns including learning being relevant and appropriate and the school environment not being sufficiently understanding of their needs.

Young people with experience of care described particular challenges in being prepared for changes in their lives and the need for adequate support. Young Gypsy Travellers saw change as a positive factor in their lives. Deaf young people highlighted that it was difficult to move between different school and college environments.

Children and young people identified positive approaches to healthy living including diet and exercise, demonstrating that positive health messages were well known. Young carers, young Gypsy Travellers and young people who had left care highlighted specific issues which affected health and wellbeing including parental health, the benefits of moving around and being poorly prepared for independent living.

5.3 Relevance for the draft framework

Some of the findings are common to all the groups such as children and young people's views on being listened to and heard by adults. There are also responses which are specific to particular groups or are individual perspectives. Although the themes are explored individually, it should be emphasised that many of the findings are relevant across the themes, domains and constructs of the framework.

It is difficult therefore to attribute the findings solely to one framework construct, domain or theme. For example, children and young people's views on the place of relationships in their lives were relevant to their experiences of participation and involvement in decision-making as well as the formal learning environment of school and college. This suggests that it is important that the framework is presented in a way which acknowledges the interconnectedness of the different domains and constructs in children and young people's lives.

Generally, it appears that the areas that children and young people discussed in the consultation were closely linked to the constructs in the draft framework. This suggests that the draft framework is appropriate for these groups of children and young people. However, what has emerged from the consultation is that these areas can have different weight and priority for children and young people according to their experiences and circumstances. So experiences of discrimination, inequality and social exclusion were highly relevant to several of the groups of children and young people including young Gypsy Travellers, young people with experience of care, young carers and deaf young people but most groups also mentioned poor attitudes to children and young people by adults as well as other aspects which were 'not fair'.

Although the indicators are being developed for the general population of children and young people (Parkinson 2010), the findings from this

consultation indicate that specific groups of children and young people have a particular set of experiences and circumstances. Those working with these groups of children and young people may therefore need to consider and identify additional very specific indicators relevant to these groups to supplement the national set of indicators.

5.4   Specific implications for the framework

The consultation responses indicate that the contextual constructs and the cross cutting themes cover a wide range of areas which are important to these groups of children and young people. However, there are areas where the findings have implications for particular constructs in the framework. These are outlined below.

The construct 'learning and development' relates to play, suggesting that play activities are for younger children and are linked to the developmental process. This term could be adapted and enlarged so that it includes the range of activities in which children and young people of all ages freely participate and which contribute to their mental health.

'Participation' and 'involvement' are identified as separate constructs in the draft framework. However, these areas appear to cover a range of ways in which children and young people are engaged across different elements of their lives. They apply across the domains and also relate to other constructs such as, for example, family relations, significant life events and social networks. This suggests that 'participation' and 'involvement' could become one construct and underpinning to all the domains.

Discrimination is commonly associated with a range of negative experiences associated with a particular group or set of circumstances (race, gender, disability etc.). This consultation found that children and young people in specific groups identified areas where they experienced discrimination and stigma. This emphasises the necessity of taking account of the importance of this construct in relation to children and young people's mental health.

Young people with experience of care discussed their experiences of being moved from place to place and the lack of stability in their lives. The existing contextual constructs which cover the 'family' do not take account of the circumstances of children and young people who are looked after away from home and where they are not looked after by their birth family.

In the contextual constructs, 'safety', 'trust' and 'violence' are included separately in the community and structural constructs. These could be placed together in order to ensure that the connections between these areas are more closely identified.

Responses from the consultation highlight that the 'physical environment' is linked to different constructs and is relevant across the domains of family, community and the formal learning environments.

Generally, the findings show that some young people experience difficulties in the transitions to young adulthood. This includes, for example, young people with experience of care where the move to independent living usually takes place on or after the age of 16 years and young people with learning difficulties and deaf young people in their transition to college from school. This suggests that some consideration should be given as to how the framework can profile the needs of young people who experience particular challenges at the upper end of the age spectrum.

5.5   Challenges for the consultation

There were a number of challenges associated with the consultation. It was difficult to consult on a draft framework which used a wide range of different categories which were highly complex and difficult to easily explain to participants. This is a common problem in consultations on topics that are primarily for professional adults but which also aim to engage children and young people. As Hill (2006) points out, children and young people do not usually have control over research and consultation processes. The research team therefore had to find a way of making elements of the framework accessible to children and young people.

As the children and young people were from different age groups and had a range of interests and circumstances, the research methods had to be flexible to meet participants' needs but also ensure consistency in what was covered in each session. The research team therefore had to be alert to what might work with different groups and their differing needs and adapt methods accordingly.

The researchers met the children and young people only once during the consultation (with the exception of one group). This meant that there was limited time for discussion on the different areas explored in this report and the research team had to be realistic about what could be covered. Some groups spent more time discussing particular topics because of their interest and this is reflected in the responses.

Some of the contextual constructs were not discussed to any extent. These were 'violence', 'abuse', 'safety', 'pressures and expectations' and 'spirituality'. This does not mean that these areas were not relevant. It could indicate that the group consultation approaches were inappropriate for exploring these in depth. Group discussions were not confidential and this was likely to affect what children and young people shared. It could also be assumed that it was difficult to discuss these areas due to their sensitive and complex nature and because there was limited time available for the consultation.

A number of the constructs, 'significant life events' and 'emotional intelligence', were not discussed individually but were, on occasion part of general discussions about the experiences that could impact on children and young people. Again, this should not be taken as an indication of the lack of importance of these constructs but the difficulty in exploring these areas within a group setting and in the time available. The size, scope and approach of the consultation may have been inappropriate for exploring these in depth.

Other areas which were discussed by participants would benefit from further exploration, either through drawing on existing evidence or through further research. Discussion on the theme of health was limited due to its wide scope. The impact of changes on children and young people's lives was a complex area to explore but the findings show that transitions can have a substantial impact on children and young people and this maybe a fruitful area to consider in more detail. There was extensive discussion on what was 'not fair' across all groups. This suggests that this could be explored in more depth to gain a wider understanding of the impact of discrimination, inequality and social exclusion on young people's mental health.

6 Conclusion

This consultation aimed to determine whether the NHS Health Scotland draft mental health indicators framework adequately encompassed the views and experiences of a range of groups of children and young people. These groups were those identified as being under-represented or absent from the literature review undertaken by Shucksmith *et al.* (2009).

The consultation included 70 children and young people aged from 3 years to young people in their twenties. It involved ten different groups with different interests and circumstances. The groups included; children aged 3 to 4 years and from 5 to 8 years, young people with learning disabilities, deaf young people, young carers, young people with experience of care, moving on from care and social exclusion, young Gypsy Travellers and black and minority ethnic young people.

The consultation found that children and young people had many areas where they shared common perspectives. This included strongly held views that children and young people were not consistently heard and listened to. Children and young people identified a range of activities that they enjoyed and highlighted the importance of relationships. They had a clear understanding of what was 'not fair' in children and young people's lives.

Groups also had experiences that were particular to their individual and collective circumstances. This included, notably, different experiences of family, transitions, discrimination and inequality where children and young people identified specific experiences due to, for example, being looked after, being a young carer or being a young Gypsy Traveller.

Overall, the consultation found that the areas that children and young people discussed were closely aligned with the constructs in the draft framework. This suggests that the draft framework is appropriate for these groups of children and young people. However, there are some areas where the findings emphasise the importance of taking the specific circumstances and experiences of particular groups of children and young people into account in order to promote and support their mental health.

7   References

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Appendices

Appendix 1: Participating organisations

The following organisations participated in the consultation:

Cowgate Under 5s Centre

The Debate Project and The Scottish Throughcare and Aftercare Forum

FACE (Fighting against Child Exploitation Partnership), Barnardos

Glasgow Association for Mental Health (GAMH) Young Carers Project

The Haven Project and Craigroyston Primary School

Health in Mind

Midlothian Youth Platform

The National Deaf Children's Society and West Scotland Children's Deaf Society

The Yard

Youth Community Support Agency (YCSA)

Appendix 2: Participants by group, age and gender

Groups	Age range	Gender female	Gender male	Total no.
Young children (pre 5)	3-4	5	5	10
Young children (5 to 8)	5-7	3	5	8
Young people with learning disabilities	14-23	14	0	14
Deaf young people	11-16	5	10	15
Young people with experience of social exclusion	16	1	0	1
Young people who have left care	20-29	3	2	5
Young Gypsy Travellers	12-15	2	2	4
Young carers	13-17	3	2	5
BME young people	9-11	8	0	8
Total		**44**	**26**	**70**

Appendix 3: Young people's consent form

Susan and Christina are doing a project on how we know if children and young people in Scotland are doing ok. We want to know what children and young people think about the things that make children and young people's lives ok and not ok.

We are from the University of Edinburgh and the project is for NHS Health Scotland (the organisation that looks after everyone's health in Scotland).

We are very interested in the **views of young people who are …** This letter is to ask if you would like to take part. You can ask any questions that you want when you meet us – or pass them to … at the … Project and we will get back to you.

The … worker is arranging for young people from your groups to come and meet us. We hope to meet you on … It will involve some talking and some fun activities.

Want to take part? Fill this in!
Yes! I would like to take part in the discussion on … This is about how we know if children and young people in Scotland are doing ok. It is for NHS Health Scotland.

I won't be asked any personal questions about my private life. I don't have to answer any questions that I don't feel comfortable with. I won't have to explain why.

The discussion will be recorded so that Susan and Christina can remember the important things that everyone said.

I understand that my ideas might be used but my name will not be used. Nobody will be able to tell who said or drew what.
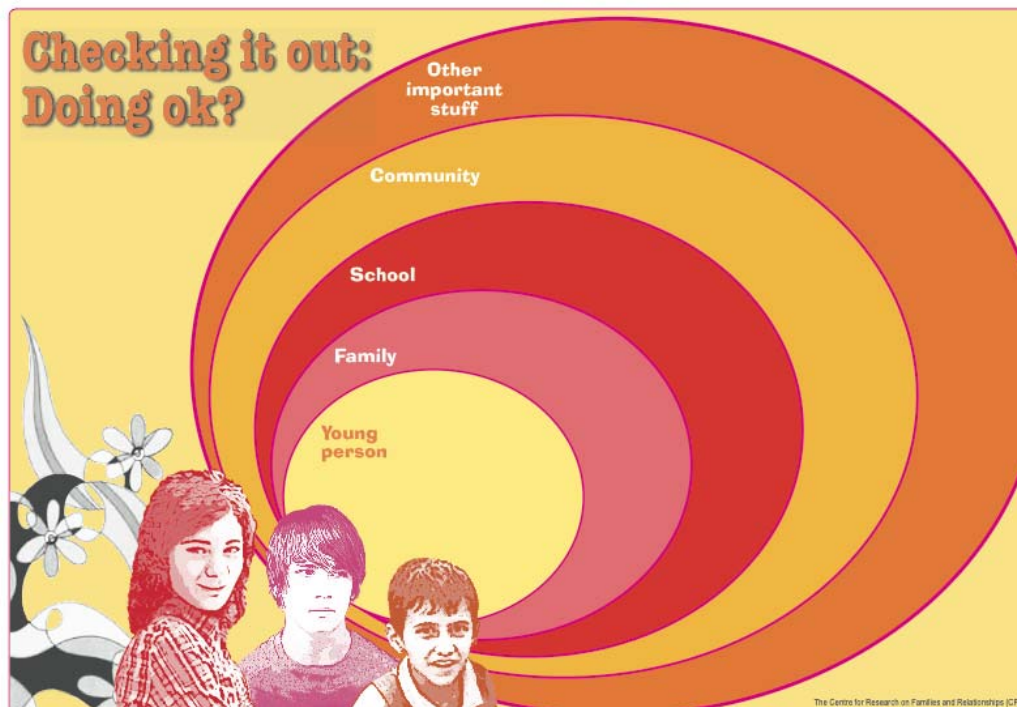

THANK YOU FOR YOUR HELP

Signed: …………………………………………………….

Name: …………………………………………………………

Age: …………………………………………………………….

Date: …………………………………………………………..

Appendix 4: Framework for consultations

Figures A and B

Appendix 5: Group session outline

Session outline	Aims/Question(s)	Possible tools/exercises
1. Introduction **(Identify communication needs in advance)** **Give out summary** **Use large laminated poster of children and young people's cross cutting themes**	• Explaining the session • Gaining/confirming consent from young people • Explaining confidentiality/child protection • Establishing group ground-rules • No right or wrong answers – interested in their views/opinions • Emphasise don't have to talk about personal experience	• Introduction (one or two sentences to explain to children and young people) • Consent forms • Group contract (use example as starting point)
2. Icebreaker	• Help young people to feel comfortable • Get young people talking/ contributing	• Moving around fun ice breaker
3. Generating ideas	• Use headings/cross cutting themes on cloud worksheet to structure discussion (i.e. fun, people, places, not fair, changes, health) (What do children and young people like doing for fun? What stops them having fun?) • How do adults know if children and young people are doing ok/not doing ok?	• Generate individual clouds with words/and or images (use different coloured clouds for different headings) • what is important for young people (under different headings) • what is difficult for young people using under different headings This will be adapted depending on size of group. • Place clouds on laminated poster

4. Ranking people's ideas	• Do young people's responses match with the NHS Health Scotland draft framework? • Which of their responses do children and young people think are the most important?	Using the poster: • Ask young people to 'rank' their indicators – or for young children maybe pick the most important- voting with stickers
5. Comparing young people's ideas with the NHS Health Scotland constructs (this exercise to be adapted based on experience in previous groups)	• How do their responses compare to the constructs developed by NHS Health Scotland	Show young people NHS Health Scotland's constructs on flash cards. Comments – are they similar or very different? What do they think of the NHS Health Scotland constructs? Are there any they disagree with?
Closing the session	• Any questions? • Explain what happens next… • Thank you!	• Explain what happens next • Feedback to young people

Appendix 6: Materials from consultation sessions