

# Call for Evidence – Inquiry into Mental Health Support in Scotland for Young People

## Introduction

Colleges Scotland is the membership body for all Scotland's 26 colleges, sited in our local communities and providing education, skills and training in the right place at the right time to support the needs of individuals, their communities, and the labour market.

The student population has significant representation from young people studying in colleges as part of the senior phase of school curriculum, as well as young people who have left school and progressed to college. As such, Colleges Scotland has a keen interest in being involved in discussions on young people's wellbeing and best interests.

Colleges Scotland welcomes the opportunity to respond to the committee's inquiry on behalf of the college sector.

## **If young people are feeling low and/or anxious, who would they ask for help and why?**

Views from the college sector suggest that there is no single answer to this question. The current generation of young people are more likely to confide in their peers than previous generations. This could be due to being empowered to talk about their own mental health without fear of being stigmatised, and for peers to share their own experiences and advice on how they themselves have coped. Parents/carers are another group that young people may choose to confide in. In the college setting, the likely first point for support would be either a student's lecturer or the student services department. This may vary depending on the guidance structures in a college.

Anecdotal feedback from our members suggests that when approaching student services staff for support, young people report that they would previously have been supported in school either through their guidance/pastoral care teacher or a mental health support worker. While it is right that the Public Petitions Committee is looking at transition from child and adolescent mental health services (CAMHS) to adult services, Colleges Scotland believes it is important to also consider the transition for young people from school into their next destination, whether that is college, university, work or another destination. It would appear that this area of transition is given little focus but presents a significant change in a young person's support network.

Young people appear to be unfamiliar with the concept of 'low mood and/or anxiety' as a natural occurring life event which results in resilience capacity building, which is a step before mental ill health. It can seem that young people are being conditioned to think in terms of them experiencing mental ill health which may then present as a barrier to them taking positive action to build resilience life skills.

There is currently no nationally agreed and standardised approach to mental health across the college sector, although with the Scottish Government's [Programme for Government](#) commitment to provide counsellors in schools, colleges and universities over the duration of this parliamentary term, the sector is taking this opportunity to consider how best to deploy this resource to ensure that students develop resilience, coping mechanisms and mental wellbeing to prevent crisis. It will be vital to ensure that this new resource is part of a wraparound service for student support, prioritising wellbeing to prevent crisis. However, this commitment presents a new expectation on the college sector to fulfil an expanded role of a service provider by ensuring counselling is available to students

on campus. There are significant issues with this which have yet to be addressed, including (but not limited to):

- Who will employ the new counsellors?
- What indemnification will the college require?
- How will counselling provision be tailored to regional colleges with multiple campuses distanced significantly from one another?
- Who will be responsible for the professional supervision of the counsellors?
- How will records be maintained and by whom?
- How will these records be integrated with the individual's NHS health record?
- What data sharing arrangements will be required?
- How does this commitment align with NHS provision?

### **Do young people know the different ways they can get help for their low mood and/or anxiety?**

Views from the college sector would suggest that there is a high level of awareness of websites and apps which are designed to support self-management, however there appears to be very little joining up of support and this can then lead to individuals being overwhelmed with choice and lacking informed decision-making capacity which can lead to reduced engagement with such resources. Uptake of self-management resources should be considered through the prism of transition, as students who have come to college directly from school may have previously been in receipt of more individualised support.

The sector reports a range of current services to support good mental health and positive wellbeing for young learners in colleges. These include (but are not limited to):

- Peer to peer mental health training
- Mental Health First Aid Training
- ASIST Training
- The development of a [Mental Health Toolkit](#) funded by AMOSSHE
- The launch of Scotland's first [Mentally Healthy College](#)
- Peer educator programme, training students to deliver sessions to FE students to build resilience and personal coping strategies
- Resilience training to every further education-level and first year higher education class
- Separating counselling (person centred) from wellbeing (based on Cognitive Behaviour Therapy) to provide students with a range of services.

### **If a young person has been referred to CAMHS, but rejected from accessing these services, were they directed to other kinds of support?**

Some colleges are reporting that young people are being referred to their college by their GP for support with counselling as colleges have shorter waiting lists than those which can be accessed by NHS referral. This appears to have become more widespread, and colleges have had to develop a protocol for responding to such referrals by reminding the GP that they are the student's primary care provider and recommending that the GP retains the student on their waiting list, explaining that colleges provide a brief intervention service which is predicated on supporting the student to stay in education.

It also appears that when students are released from CAMHS early or deemed not eligible for the service, they are re-referred to their GP for support, or if they are found to be enrolled at college or university, they are told to access services at their individual institutions. It should be noted that although some counselling provision currently exists within the college sector, specialist mental health services are not offered by colleges. Mental ill health exists on a spectrum and for some students a counsellor would not provide the appropriate level or type of support the student needs in order to recover.

## **In Scotland, anyone over the age of 16 can consent to medical treatment or intervention without needing their parent or guardian's consent. Should this age be increased to 18 years old?**

While Colleges Scotland does not have a position on this area, many college students are aged 16-17 and most young people start university aged 17. Therefore, there exists already a confusing disconnect regarding individual autonomy and this line of inquiry should be considered in a holistic manner alongside other key choices and decisions that young people have the right to currently make. To raise the age at which an individual can consent to medical treatment or intervention without considering other decision-making powers available to a young person upon turning 16 could have unintended consequences – e.g. someone married at the age of 16 still requiring a parent or guardian's consent to acquire contraception. This question should therefore be considered whilst reflecting that at the age of 16, it is legal for an individual to consent to marriage, to join the armed forces and to vote in Scottish elections.

## **If a young person has experience of moving from receiving children's mental health services to adult mental health services, what was that like?**

Colleges Scotland does not have a national perspective on this area. As local health authorities manage their services according to their own guidance, experiences vary across localities. However, feedback from colleges would suggest that moving from CAMHS to adult services can be quite stressful and is seen as something done to the person rather than person-centred care. Some young people attending college who have moved from children to adult services have ended up receiving no further treatment. It should also be noted that the services currently available after transition are insufficient in relation to the needs of particular groups of young people, for example autistic young people who have vastly reduced access to support in adult services.

## **Conclusion**

Colleges Scotland believes that the vastly increasing number of young people and students seeking support for their mental health and wellbeing indicates the need for a system-wide solution to ensure that young people have well-developed resilience and coping strategies to prevent escalation to mental health crisis. It is essential that we tackle mental health preventively because of the impact on the individuals concerned and also because we can no longer afford the rising costs of tackling mental ill health problems.

By communities working together at a local level, through a co-ordinated approach to ensure that there are sufficient arrangements, strategies and resourced services made available through private, public, third sector organisations and existing partnerships e.g. Community Planning Partnerships and Health & Social Care Partnerships, this can begin to address mental ill health prevention and build resilience across the whole community. A closely integrated network of service providers will enable individuals to be referred more easily between services, allow for the sharing of intelligence and best practice, and help to prevent duplication of provision.

While public attitudes towards mental health and mental illness are gradually shifting and there is a growing commitment among communities, workplaces, schools, colleges, universities and within government to change the way we think about mental health, discrimination remains one of the main problems faced by individuals. Too many individuals with mental health problems feel isolated and worried about how other people may react to hearing about their experiences, so more awareness and arrangements whereby individuals can talk openly about issues, can help to dispel myths and reduce stigmatising behaviours and opinions.

The college sector's priority is on ensuring that students are empowered, enabled and supported to progress through their studies and successfully complete their course. Further clarity from the Scottish Parliament would be welcomed on the role of colleges in supporting students experiencing mental ill health.

Colleges Scotland  
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