



**The
Right2Eat
Project**

Mental Health and Young People in the UK

Concepts in Mental Health

Mental health is a state of mental well-being that enables people to cope with the stresses of life, realize their abilities, learn well and work well, and contribute to their community. It is an integral component of health and well-being that underpins our individual and collective abilities to make decisions, build relationships and shape the world we live in. Mental health is a basic human right. And it is crucial to personal, community and socio-economic development. Mental health is more than the absence of mental disorders. It exists on a complex continuum, which is experienced differently from one person to the next, with varying degrees of difficulty and distress and potentially very different social and clinical outcomes. Mental health conditions include mental disorders and psychosocial disabilities as well as other mental states associated with significant distress, impairment in functioning, or risk of self-harm. People with mental health conditions are more likely to experience lower levels of mental well-being, but this is not always or necessarily the case (WHO, 2022). We use the definition of mental disorders, as defined by the ICD-10, to imply a clinically recognisable set of symptoms or behaviour associated in most cases with considerable distress and substantial interference with personal functions (see ICD-10 Version:2019).

Why mental health problems are increasing amongst young people

Mental health problems are on the rise amongst young people, and this is a cause of concern for many parents, teachers and healthcare professionals. While there are many reasons why mental health problems are increasing, some of the most significant include the impact of social media, increased pressure and expectations, and changing family dynamics.

The influence of social media on young people is undeniable and is one of the key factors in the rise of mental health problems. For many young people, social media can be a source of self-esteem whereby they compare themselves to their peers in terms of attractiveness, success, intelligence, and so on. They also risk being exposed to online bullying and trolling which exacerbates feelings of loneliness and worthlessness. Research has found that high social media usage is associated with increased levels of depression and anxiety among this age group. Another factor that is likely to contribute to the rise in mental health issues is the pressure and expectations placed on young people on a daily basis. School-related stress, often linked to seeking academic excellence, has long been linked to psychological distress and depression. Other sources of pressure and stress relate to conforming to society's norms or expectations such as seeking financial stability, following a certain career path, and meeting deadlines. All of these can lead to feelings of anxiety and depression.

Finally, changing family dynamics can also affect the mental well-being of young people. It is no secret that the traditional nuclear family model is becoming rare, and that many young people are raised in single-parent households or living with their extended families. These changes can affect the connectivity between young people and their parents/caregivers, leading to isolation and loneliness, particularly in the teenage years. It is clear that mental health problems are becoming increasingly common among young people, and it is important to understand the contributing factors, in order to develop solutions that can help to reduce the problem. For example, parents and educational institutions should consider implementing technology-based interventions such as mindfulness apps or better parent-child communication initiatives. Additionally, healthcare professionals should provide more timely access to mental health services and continue to educate parents, teachers, and young people about the importance of mental well-being.

The prevalence of mental disorders amongst young people in the UK

Mental health issues are rapidly becoming an increasingly common problem for many young people in the UK. In recent years, the prevalence of mental health problems amongst this group has grown significantly, as evidenced by the increasing demand for services such as counselling and talking therapies. The extent to which young people are struggling with mental health issues is of such concern that it has been the subject of a lot of research studies over the past two decades. In this section we aim to provide a brief snapshot of the research findings on the prevalence of mental disorders amongst young people in the UK. Young people in the UK have higher mental health need than ever. 1 in 6 young people in England (aged 5 to 16) experienced a mental health problem in 2020, up from 1 in 9 in 2017. Further, nearly one-third of 16-24 year olds in the UK (31%) reported some evidence of depression or anxiety in 2017 to 2018 (Andthen, 2021).

Rates of probable mental disorder in young people

In children aged 7 to 16 years, rates of probable mental disorder rose from 1 in 9 (12.1%) in 2017 to 1 in 6 (16.7%) in 2020. Rates of probable mental disorder then remained stable between 2020, 2021 and 2022. In 2022, 18.0% of children aged 7 to 16 years and 22.0% of young people aged 17 to 24 years had a probable mental disorder. In relation to child safety and social media 11 to 16 year olds with a probable mental disorder were less likely to feel safe at school (61.2%) than those unlikely to have a mental disorder (89.2%). They were also less likely to report enjoyment of learning or having a friend they could turn to for support. Additionally, 1 in 8 (12.6%) 11 to 16 year old social media users reported that they had been bullied online. This was more than 1 in 4 (29.4%) among those with a probable mental disorder. Finally, 11 to 16 year old social media users with a probable mental disorder were less likely to report feeling safe online (48.4%) than those unlikely to have a disorder (66.5%). In young people aged 17 to 19 years, rates of a probable mental disorder rose from 1 in 10 (10.1%) in 2017 to 1 in 6 (17.7%) in 2020. Rates were stable between 2020 and 2021, but then increased from 1 in 6 (17.4%) in 2021 to 1 in 4 (25.7%) in 2022. Among 17 to 22 year olds with a probable mental disorder, 14.8% reported living in a household that had experienced not being able to buy enough food or using a food bank in the past year, compared with 2.1% of young people unlikely to have a mental disorder. Furthermore, children who lived in households that experienced a reduction in household income were more likely to have a probable mental disorder (Newlove-Delgado, et al, 2022).

Mental disorders amongst looked after children

Young people of different age categories were found to have a range of mental disorders. Firstly, among young people, aged 5–17 years, looked after by local authorities, 45% were assessed as having a mental disorder: 37% had clinically significant conduct disorders; 12% were assessed as having emotional disorders (e.g., anxiety and depression) and 7% were rated as hyperactive. The most common, specific, conduct disorders were socialised conduct disorder (22% among 11-to 15-year-old boys; and oppositional defiant disorder (ODD) and 18% among 5-to 10-year-old boys). Secondly, among 5- to 10-year-olds, the rates of disorders for looked after children compared with private household children were: Emotional disorders: 11% compared with 3%, Conduct disorders: 36% compared with 5%, Hyperkinetic disorders: 11% compared with 2%. Further, the rates of any childhood mental disorder for looked after children compared with private household children were 42% compared with 8%. Thirdly, among 11- to 15-year-olds, the prevalence of mental disorders for children looked after by local authorities compared with children from the private household survey were: Emotional disorders: 12% compared with 6%, Conduct disorders: 40% compared with 6%, Hyperkinetic disorders: 7% compared with 1%, Any childhood mental disorder: 49% compared with 11%. Finally, about two-thirds of children living in residential care were assessed as having a mental disorder compared with a half of those living independently and about four in ten of those placed with foster carers or with their natural parents.

There were also important findings when comparing children living with their natural parents or those in residential care to those in foster care. For example, children living with their natural parents or in residential care were at least twice as likely as those in foster care to have anxiety disorders (20% and 16% compared with 8%). Further, children living with their natural parents or in residential care were about four times as likely as those in foster care to have depression (9% and 8% compared with 2%). In addition, children in residential care were far more likely than those in foster care or living with their natural parents to have conduct disorders (56% compared with 33% and 28%). Other key findings revolve around hyperkinetic disorders and less common disorders. For instance, the highest rate of hyperkinetic disorders, 16%, was found among 5 to 10 year-old boys. The highest rate of the less common disorders was Pervasive Developmental Disorder (PDD) which was present among 8% of 11- to 15-year-old boys. The prevalence of hyperkinetic disorders hardly varied by type of placement – between seven and eight per cent. It was also found that less common disorders, particularly those in the autistic spectrum, were far more common among children in residential care than in other placements (11% compared with 2%). Finally, among children in family placements, the prevalence of any childhood mental disorder among the children in foster care was 40%. This rate was similar to that found among children living with their parents, 42%, and slightly higher than the 32% for children placed with their own families or friends. Overall, nearly three quarters of the children in residential care, 72%, were clinically rated as having a mental disorder: 60% had conduct disorders, 18% were assessed as having emotional disorders, 8% hyperkinetic disorders, and 13% less common disorders (Meltzer, et al 2003).

Why are so many young people experiencing mental health problems?

Various factors contribute to the increasing prevalence of mental health issues amongst young people in the UK. One is an increased awareness amongst both professionals and the public of the scale of the mental health issue. This has meant that it is now seen as more acceptable to discuss mental health issues and seek help, which is likely to have led to more accurate estimates of mental health difficulties amongst young people. Secondly, many young people today are growing up in an increasingly stressful and fast-paced environment. This is leading to higher levels of stress and anxiety, which can have an adverse impact on mental health, creating conditions that make it more likely that problems, such as depression, will emerge. This is particularly concerning given the fact that far more young people than ever before are in full-time education or employment, which places extra demands and responsibilities on them. Thirdly, there is increasing evidence of the deleterious impact that technology can have on mental health amongst young people. Excessive usage of technology can lead to problems such as sleep deprivation, inactivity, and bullying, all of which can have a serious impact on mental health. As such, it is important to promote the responsible use of technology amongst young people and provide them with the skills to ensure that their online interactions do not have a negative impact on their wellbeing. Fourthly, there are certain groups of young people that are particularly at risk of mental health problems. These include those from lower socio-economic backgrounds and those from minority ethnic backgrounds. These young people are more likely to experience poverty, discrimination, and other adverse environments which can have damaging mental health consequences. Addressing the underlying issues is therefore essential to try and reduce the likelihood of mental health issues developing. Finally, it is worth noting that mental health difficulties among young people are not always the result of an underlying mental health disorder. Rather, in many cases, they are the result of a person's circumstances and the way that they react to those situations. As such, it is important to ensure that young people are provided with the necessary support and resources to ensure that they are able to cope with life's challenges.

In summary, mental health issues amongst young people in the UK are a significant problem that is only set to become more prevalent. It is therefore essential that those responsible for the care and support of young people, such as parents, carers, and those in education, are aware of the importance of good mental health and have access to appropriate services. Only by doing so can we hope to reduce the number of young people suffering from mental disorders.

How you can support a young person who is experiencing mental health problems

Mental health difficulties, such as anxiety, depression, and eating disorders, can be difficult to manage. When someone you know is dealing with mental health issues, it can be difficult to know how to help and support them. Even if you may not have the answers or know how to fix their mental health problems, there are ways to show your support and be there for them:

1. The first step in supporting a young person who is experiencing mental health problems is to show compassion and acceptance. Let them know that you are there for them no matter what, and that you understand that they are going through a difficult time. This can be conveyed through listening to them, really taking the time to understand how they are feeling and what they are going through. Reassure the young person that their feelings are valid and that they don't have to be ashamed of their emotions. Of course, it's important to respect their need for space when they need it.
2. Do not be judgmental or dismissive of their feelings. Even if you personally can't relate or understand their struggles, it is important to accept and respect their emotions no matter how intense they may seem. Offer unconditional support and kindness in order to create a safe and non-judgmental environment for them. Ask them how you can be supportive, and respect their boundaries.
3. Encourage them to do self-care activities, such as getting enough sleep, eating healthy, exercising and meditating. Give them space to talk about their worries and fears; make sure that they know they can be honest and open with you. Encourage them to discuss their mental health with a professional if they are comfortable doing so.
4. Remind the young person that mental health struggles are not permanent. Sometimes it may take many days or weeks, but recovery is possible. Talk to them about the potential solutions available, such as therapy, counseling, or medication if needed. Just the fact that you are taking the time to research and explore potential solutions for them may provide some comfort.
5. Be patient and understanding. Mental health difficulties can be overwhelming and sometimes lead to disruptive behaviors. It's important to remind yourself that the young person is not in the wrong; they are just struggling with something difficult. Show your understanding and express your willingness to provide support as they face their mental health struggles.

In conclusion, remember that it's not up to you to fix your loved one's mental health problems. It's more important to be patient, supportive, and understanding as they work through their struggles. Ask how you can help and provide guidance if needed, but ultimately respect their boundaries and make sure they know it's okay to take things at their own pace.

What can be done to support young people experiencing mental health difficulties?

Perhaps the most striking observation from the research data illustrated above is not necessarily the prevalence mental disorders amongst young people but how it is measured. Whilst statistics and quantitative data provides us with a scientifically robust platform from which to analyse and understand a specific phenomenon it does not tell us what these individuals will become in the future. It is therefore important to be aware of the potentially damaging effects and social harm that the labels of mental disorders can have on how we perceive individuals and how they can increase stigma and stereotypes that ultimately may serve to undermine any rehabilitative treatment effects as the environment plays a crucial role in helping young people to recover from their mental health challenges. In essence, what the research data above significantly lacks is context. Specifically, the type of context that can only be illuminated through qualitative research that seeks to explore and understand the personal narrative of the individual. For example, we have all these highly technical terms like oppositional defiant disorder (ODD), conduct disorder and hyperkinetic disorders all of which tell us nothing about how the individual in question with the label feels or what they are experiencing because these mental disorder labels make the individual and their experience invisible. Ultimately, they group individuals according to aggregate data so that the individual is reduced to a mere statistic and such research can be criticised on the basis of ecological fallacy where inferences about individuals are made using group data which can often be misleading because we are all unique individuals whilst the onset of mental disorders is often situational and context specific which is not captured by risk assessment and mental health diagnostic tools.

There are two main ways the Right 2 Eat will attempt to help young people experiencing mental health difficulties:

1. To give them a voice and platform where they can articulate their experiences which can also be used to help motivate and educate other young people experiencing mental health trauma. This will be done by encouraging young people to express themselves creatively whether it be through art, poetry, keeping a personal diary to document and make sense of their experiences and also through embracing their internal dialogue through voice recordings etc.
2. We believe in the talent, intelligence and creativity of all young people experiencing mental health difficulties and we want to support young people as content creators to fulfil their potential by employing them as freelance article writers on the subjects that they are passionate about.
3. Mental health advocacy - help young people experiencing mental health difficulties to express their views and wishes and help them to stand up for their rights.

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Reading time: 11 minutes

Keywords: mental health, young people, disorders, children, statistics, prevalence, isolation, stigma, stereotypes, help, treatment, self-empowerment, voice, individual rights

Words: 3,048

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