MH:2K Central
Lancashire
A youth-led approach to exploring mental health
August 2018
Contents

Foreword

Part One: Introducing MH:2K

1. Introduction
2. What we did

Part Two: Findings and recommendations

3. Social media and use of language
4. Education and prevention
5. Professionals and services
6. LGBTQ+ young people
7. Young men

Part Three: Conclusion

Conclusion: Impacts and next steps

Appendix: Where to seek help with mental health problems
Foreword

Brought together in partnership, Chorley Borough Council, Preston City Council, South Ribble Borough Council, and Preston District and Chorley and South Ribble Clinical Commissioning Groups have been privileged to work with such inspiring young people from across our different communities as part of MH:2K.

From the start, the partnership of organisations were keen to engage and listen to what the MH:2K Citizen Researchers had to say. The project provided an open space and enabled local young people to really design, shape and develop the recommendations that are detailed within this final report.

As organisations, we are very aware that young people face many emotional demands, including pressures for educational attainment and, increasingly, the impact of social media. MH:2K has enabled all those involved to understand more about these pressures and to further understand the wider challenges that young people face.

Working with Leaders Unlocked and Involve has been an incredible experience. A total of 24 young people from across the different authority areas became ‘Citizen Researchers’ and with their passion and resolve, reached over 1,000 young people across Central Lancashire. This exceeded our expectations and we are all really proud of what they have achieved.

We now have a better understanding of the pressures that young people in our communities face and the discussions between the organisations and the Citizen Researchers have given us fresh perspectives on how we can all work together to provide effective mental health to those young people living in our communities.

This report outlines the findings and recommendations of the young people who have taken part and as a group of organisations we are actively considering how we can provide the support and resources to implement them. We continue to involve the Citizen Researchers as part of the approach and welcome this model of engagement and co-design.

Finally, we would like to thank all the local MH:2K Citizen Researchers who have taken part. Their passion, hard work and determination throughout the process has been inspiring.

Councillor Karen Walton, Cabinet Member Public Health, Leisure and Wellbeing, South Ribble Borough Council
Councillor Alistair Bradley, Executive Leader, Chorley Borough Council
Councillor Nweeda Khan, Cabinet Member for Communities and Social Justice, Preston City Council
Dr. Sumantra Mukerji - Chair; NHS Greater Preston Clinical Commissioning Group
Dr. Gora Bangi – Chair; NHS Chorley and South Ribble Clinical Commissioning Group
Part One: Introducing MH:2K
Section 1: Introduction

Mental health conditions affect about 1 in 10 children and young people, with 75% of mental health problems in adult life, excluding dementia, starting before age eighteen\(^1\). Given this, it is perhaps unsurprising that young people consistently identify mental health as a priority issue.

MH:2K seeks to give young people a role in solving this most important of challenges. Focussing on those with mental health issues and from at-risk groups, it empowers young people to shape decision-makers’ understanding of both the mental health challenges they face and what solutions could look like.

About MH:2K

MH:2K is a powerful new model for engaging young people in conversations about mental health and emotional wellbeing in their local area. It empowers 14-25 year olds to:

- Identify the mental health issues that they see as most important;
- Engage their peers in discussing and exploring these topics;
- Work with key local decision-makers and researchers to make recommendations for change.

Its design builds on good engagement practice from within and beyond the youth mental health field. Specifically MH:2K features:

- **End-to-end youth leadership:** MH:2K’s youth-led approach means it is grounded in the reality of young people’s lives. Young people decide its focus, co-lead its events, and determine its findings and recommendations.

- **Peer-to-peer engagement:** By empowering young people to reach out to their peers, MH:2K creates a safe and engaging space for participants.

- **Close collaboration with key decision-makers and researchers:** By involving key figures in the project from its start, MH:2K builds trust, enthusiasm and commitment for MH:2K, and the implementation of its recommendations.

In 2016-17 Oldham became the first local area to run MH:2K, supported by Oldham Council, Oldham Clinical Commissioning Group, and a Wellcome Trust People Award. In 2017-18, the success of the project led it to expand to four more areas: Birmingham, Central Lancashire, Nottingham and Nottinghamshire, and North Tyneside. It also recruited a National Advisory Panel.

MH:2K in 2017-18 was supported by the local areas involved and the Wellcome Trust.

The National Partners

MH:2K is delivered by a partnership of charity Involve and social enterprise Leaders Unlocked.

**Involve** is the UK’s leading public participation charity, on a mission to put people at the heart of decision-making. It supports people and decision-makers to work together to solve our biggest challenges.

**Leaders Unlocked** exists to allow young people to have a stronger voice on the issues that affect them. It drives greater accountability and fairness by helping organisations to adopt new ways of working with the young communities they serve.

---


MH2K Central Lancashire – A Youth-Led Approach To Exploring Mental Health
August 2018
About MH:2K Central Lancashire

From September 2017 to July 2018, Leaders Unlocked ran MH:2K in Central Lancashire, supported by South Ribble Borough Council, Chorley Council, Preston City Council, the Clinical Commissioning Groups, and the Wellcome Trust.

MH:2K Central Lancashire engaged over \textbf{1150 local young people} with diverse life experiences. Its participants chose to focus on five areas of challenge for young people around mental health:

- Social media and use of language;
- Education and prevention;
- Professionals and services;
- LGBTQ+ young people;
- Young men.

Over 50 local and regional decision-makers and researchers took part in the project’s Local Advisory Panel or one of its events.

This report presents MH:2K Central Lancashire’s design, findings and recommendations, and initial impacts.
Section 2: What we did

MH:2K Central Lancashire used a six-part engagement model grounded in the principles of youth leadership and on-going decision-maker and researcher engagement. This section describes how it worked, taking each of the six elements in turn.

Recruitment (September - October 2017)

MH:2K Central Lancashire began with the recruitment of 23 diverse young people as the project’s ‘Citizen Researchers’. Reaching out through local statutory and community organisations (please see ‘Roadshow’ below), we were able to encourage a wide range of young people to apply. Of the Citizen Researchers we recruited:

- At least 69% said they had a history of mental health problems themselves, or had close friends or family with mental health problems;
- At least 22% mentioned having had another relevant lived experience (e.g. they are a carer, care leaver or have experienced homelessness);
- 17% were from BAME communities;
- 39% identified as LGBTQ+;
- 17% identified as having a disability.
Design Days (November 2017 - January 2018)

We held three one-day events with the Citizen Researchers. During these ‘Design Days’ the Citizen Researchers explored information about youth mental health in Central Lancashire and nationally. They used this and their own experiences and views to identify the **top five mental health challenges facing young people** in the area – social media and use of language; education and prevention; professionals and services; LGBTQ+ young people; and young men.

They also decided where to focus under each of these topics. This included information they wanted to tell their peers, and questions which they wanted to explore.

With these decisions made, the Citizen Researchers worked with us to co-design a workshop template for each topic. They received training in areas such as presentation skills and questioning techniques to enable them to play a leadership role in the Roadshow.

Roadshow (February - April 2018)

Over three months, the Citizen Researchers co-led **36 workshops** for their peers, engaging **1,145 other young people** in Central Lancashire. Statutory, community and voluntary organisations kindly volunteered to host the Roadshow events. Participating organisations, many of which had also supported the recruitment phase of the project, were:

**Schools, colleges and universities:** Balshaws CE High School, Holy Cross Catholic School, Hutton Grammar School, Preston College, Runshaw College, Shaftesbury High School, Walton le Dale High School, UCLAN LGBTQ society

**Community groups:** Banardos, Community Gateway, Key Youth Charity, The Mill, POUT LGBT group,

**Council/ statutory groups:** Clinical Commissioning Group service users, CAMHS service users

Through the Roadshow, the Citizen Researchers collected a wealth of information covering diverse young people’s views on the mental health challenges they face and their ideas for solutions.

Results Day (April 2018)

At the Results Day, the Citizen Researchers considered the information collected during the Roadshow. They used it firstly to determine MH:2K Central Lancashire’s findings about the challenges facing young people on their mental health and emotional wellbeing. They then worked with the local decision- makers to write the project’s recommendations. These **findings and recommendations** are covered in detail in the next section of this report.
Big Showcase (May 2018)

The Citizen Researchers presented the project’s findings and recommendations to a much wider range of stakeholders from Central Lancashire, and took part in a panel-style question and answer session.

At least 45 decision-makers and researchers attended on the day. As well as hearing about the project, they were asked to offer their reflections on the recommendations and their thoughts about how they and their organisations might want to be involved in their implementation.

Local Advisory Panel (Ongoing)

MH:2K’s Local Advisory Panel reflected the high level of commitment to the project locally, bringing together representatives of the Clinical Commissioning Groups, Local Authorities, County Council Providers, Voluntary Sector, Higher Education, and Partners. Panel members are listed below:

- **Howard Anthony**, South Ribble Partnership Manager
- **Angela Barrago**, Health and Wellbeing Manager, Chorley Council
- **Dave Carr**, Head of Service: Policy, Information and Commissioning, Lancashire County Council
- **Rebecca Cumpstey**, Community Development Worker, Lancashire Care NHS Foundation Trust
- **Janet Hodgson**, former Head of Student Services, Runshaw College
- **Ben Hunt**, Community Engagement Officer, Preston City Council
- **Dr Jenny Lamb**, Senior Lecturer in Community Leadership, UCLAN
- **Abi O’Brien**, Community Development Support Officer, Chorley Council
- **Rachael Ray**, Community Development Lead, Lancashire MIND
- **Glenis Tansey**, Clinical Commissioning Group
- **Michelle Taylor**, Primary Mental Health Worker (PMHW) – CAMHS

The Advisory Panel played a key role in the project at every stage. Panel members helped identify the information on mental health given to Citizen Researchers at the first Design Day, provided the Citizen Researchers with feedback on their choice of focus areas, and identified and invited potential attendees to the Big Showcase. The Panel also helped the project to build on existing work on mental health, and to make connections with local organisations. In the final stages of the project, nine Panel members attended the Results Day and/or the Big Showcase.

Since the Big Showcase, the Panel has been proactive in driving forward MH:2K’s recommendations. Further information on the steps taken and the impacts of MH:2K to-date can be found in the conclusion to this report.
Part Two: Findings and recommendations
This section presents Central Lancashire’s findings and recommendations. It takes each of the Citizen Researchers’ five priority topics in turn:

- **Social media and use of language;**
- **Education and prevention;**
- **Professionals and services;**
- **LGBTQ+ young people;**
- **Young men.**

MH:2K Central Lancashire’s findings focus on the key pressures facing young people in Central Lancashire around their mental health.

The Citizen Researchers decided these findings, based on information collected at 36 Roadshow events, attended by 1145 of their peers. For information on Roadshow attendees, please see Section 2 ‘What we did’.

MH:2K Central Lancashire’s recommendations focus on solutions for improving the mental health and emotional wellbeing of young people in Central Lancashire. The Citizen Researchers worked with members of the project’s Local Advisory Panel to co-create these recommendations, which are based on ideas collected during the Roadshow.

It is important to note that not all of the pressures identified in the findings are addressed in the recommendations. The Citizen Researchers focussed the recommendations on the ideas for change that they felt were most likely to work and have the greatest impact.
Section 3: Social media and use of language

MH:2K Central Lancashire’s Citizen Researchers identified six findings on social media and use of language. These are presented below, illustrated by relevant quotations from Roadshow participants. As far as possible, Citizen Researchers’ own words have been used alongside the quotations to explain why each finding is important.

The Citizen Researchers, together with the Local Advisory Panel, made five recommendations for change on this topic. Again, these are covered below. Each one is presented with a brief comment from the Citizen Researchers.

Finding One: Self-esteem and body image

Many young people have low self-esteem and body image issues due to the images they see on social media. The use of Photoshop and filters leads young people to believe they must look a certain way. As a result, many feel that they look ‘abnormal’ in comparison to others, and this can lead young people to self-harm.

Citizen Researchers concluded that there is a need to challenge body image and encourage individuals to question beauty standards and Photoshopped images.

“The bar for being accepted is raised to an impossible level. Making you feel worthless.”

“Everybody feels they need to be perfect, this can make people feel unwanted and depressed, this could lead to people self-harming.”
Finding Two: Cyber-bullying

Young people told us they are very concerned about the lack of control in relation to cyber-bullying. Young people are worried that rumours and trends spread ‘like wildfire’, regardless of how dangerous they are, and feel that Internet freedom causes hate speech and threats.

Citizen Researchers noted that there is a need for greater control and felt that cyber-bullying should be easier to report.

“Death threats on gaming chat causes worry/ stress/ anxiety.”

“Dangerous challenges (peer pressure).”

“Racism / xenophobia / homophobia.”

Finding Three: Abusive behaviour

Young people have highlighted the fear and danger of grooming, stalking and exposure to nude images. Young people feel particularly unsafe and uncomfortable as a result of strangers and others being able to see their locations or sending them nude images. Young people commented that reporting incidents of abuse and CSE (Child Sexual Exploitation) is not easy enough.

Citizen Researchers concluded that young people are being left in very vulnerable situations online with a lack of support and a lack of responsibility being taken by social media and gaming companies.

“People can see your location on SC = feel unsafe.”

“Get sent nudes by strangers = makes you feel uncomfortable.”

“Fake accounts, cat-fishing, make it hard to trust people.”

Finding Four: Use of language

Young people highlighted the misuse of language and terminology on social media as a problem. The misuse of language around mental health, as well as the use of hateful terms, is causing young people to suffer from high levels emotional stress and paranoia. Young people feel that it’s too easy for people to be anonymous on social media.

Citizen Researchers concluded that there should be more effort to flag words that would cause people to get emotionally stressed and cause paranoia.

“Nasty language (idiot, fat, psycho).”

“Horrible comments like ‘you need to die.’”


Finding Five: Romanticisation

Young people are concerned that serious issues within mental health such as eating disorders, suicide, and addiction, are ‘romanticised’ on social media. This, they say, leads to an unhealthy perception of the problems and undermines the real struggles young people are facing.

“Romanticisation of Mental Health.”
“Glorifies mental illnesses.”

“Negative influences (pages encouraging mental health problems).”

**Finding Six: Teachers and families**

Young people highlighted that teachers and families are unsure of how to intervene in relation to social media and how best to support young people who are struggling with these issues. There is a real need for teachers and other professionals working with young people to be equipped with up-to-date knowledge of the dangers of social media and cyber-bullying. Many young people feel that their schools are less willing to help with incidents that happen outside of school hours.

“*Educate professionals on the internet and social media.*”

“*Head teachers need to listen more and take cyber-bullying more seriously.*”

“*They should try and understand the kids who are using social media, when bullying happens they should try and prevent it as soon as possible.*”
1. **More online campaigns to challenge today’s ideal body image.**
   Campaigns should encourage young people to question photo-shopped images, and share positive achievements (instead of selfies and celebrities) using positive hashtags (e.g. #rolemodels) that people can follow. This will help to ensure that the young generation have better self-esteem and base their self-worth on things other than their physical image.

2. **Make it easier for young people to report cyber-bullying and seek support.**
   One way of doing this is to develop online buttons and flag words specifically for reporting abusive behaviour and bullying on social media. Young people also want to see more support groups consisting of peers or mentors who have been through cyber-bullying. This is important because words can really impact young people, and they want to be able to report abuse and feel heard.

3. **A social media service for professionals to communicate with young people.**
   Young people would value a more direct and anonymous way of communicating with young people, particularly via social media accounts and pages. This is important because it would make professionals more approachable and easy to access for young people, and it would give young people the change for more ‘instant access’ to services and help.

4. **Raise awareness among teachers and parents of the impact of social media on young people’s mental health.**
   Hold sessions with teachers and parents to discuss the impact of cyber-bullying and social media on mental health, and how they can support young people. This is important because young people feel that cyber-bullying and issues online aren’t taken seriously enough, and teachers and families are unsure about how to intervene.

5. **Ensure that schools have a dedicated member of support staff to deal with mental health and social media.**
   Schools should have a specific member of staff with knowledge of young people’s mental health, as well as social media. This staff member would be able to tackle social media related issues with confidence and enable young people to feel more comfortable to share concerns and resolve social media conflicts.
Section 4: Education and prevention

MH:2K Central Lancashire’s Citizen Researchers identified four findings on education and prevention. These are presented below, illustrated by relevant quotations from Roadshow participants. As far as possible, Citizen Researchers’ own words have been used alongside the quotations to explain why each finding is important.

The Citizen Researchers, together with the Local Advisory Panel, made five recommendations for change on this topic. Again, these are covered below. Each one is presented with a brief comment from the Citizen Researchers.

Finding One: Teachers and staff

Young people feel that teachers and other staff in schools and colleges do not know how to talk to them about mental health or how to support them. Young people acknowledged that staff members in school and colleges have lots of pressures on their time, but they want the time they do have to be spent as productively and positively as possible.

Citizen Researchers concluded that young people spend a lot of time in education, and they need people working in education to be able to support them. If students can’t talk about their concerns, it could lead to a crisis.

“Teachers are not trained and say the wrong thing, They just say you are stressed.”

“Teachers are not trained in how to deal with MH issues – don’t know what’s available – nothing is anonymous, everyone will know if you to go the things available.”

Finding Two: Stress

Young people increasingly find education stressful and need more time, space and dedicated activities to be able to cope with the pressures. If they do not have the time and space to cope, the students may not be able to reach their full potential or achieve their goals, which could affect their whole life chances.

“Too much pressure from family to do well and succeed – work load too much to manage.”

“Too much homework, Pressure to fit in and keep up with trends, Pressure to meet grade expectations, Not enough free time in school, Extra stress if being bullied.”

Finding Three: Confidentiality and trust

Young people don’t have trust in teachers to keep their information confidential. They worry that teachers will share their information without their permission, and therefore they may be unwilling to come forward and ask for help. Young people don’t want teachers to share their personal information without permission.

Citizen Researchers concluded that young people want to be able to trust teachers and tutors, and to have a safe space where they don’t feel judged.

“Wouldn’t trust them to keep it confidential.”

“Can’t trust them, they go and tell all the staff in the staff room.”

“No chill room, only one room to go to, had to knock and wait outside. Room used by everyone.”

Finding Four: Resilience

Young people want schools and colleges to equip them with the tools to improve and maintain their own mental health. This is important because young people want to be able to take positive steps to improve their own resilience and well being. This could involve teaching coping mechanisms and techniques for managing stress, and encouraging sports and fitness activities.

“More coping mechanisms should be made aware.”

“After school sports - stress reliever, improves resilience, make friends.”

“People to teach techniques on how to manage work better and reduce stress.”
Recommendations on education and prevention

1. **Train teachers on how to support young people who struggle with mental health.**
   Teachers need to be able to spot the signs and react to mental health issues more effectively. We recognise that a 2-day course already exists and is offered to schools, but it is not consistently taken up. We believe that these courses need to be made mandatory, and we feel that using young people to help train teachers would be useful to both sides.

2. **A regular slot within the timetable dedicated to de-stressing.**
   There should be a regular slot in the weekly timetable (at least half an hour) devoted to de-stressing activities, such as mindfulness, yoga, and self-care. There should be a dedicated space for mindfulness where students can go just to spend quiet time away from work.

3. **Develop posters flagging up mental health, to address the stigma and encourage more open conversations.**
   Create posters to promote the message that ‘it’s ok not to be ok’ and to encourage students to come forward and talk to staff members about their problems. These posters should highlight the importance of teachers knowing how to help with mental health and emphasise confidentiality.

4. **Provide peer-to peer-support using young people to support each other and themselves with mental health.**
   Empower older students to take on a mentoring role, so younger students can relate to someone closer in age who they may feel more comfortable with. For confidentiality within school, an anonymous online booking system could be set up for peer mentor appointments.

5. **Education leaders to recognise the importance of teachers’ wellbeing.**
   Education leaders should look at how teachers are coping with the pressures of work, and give them the opportunity to speak up and get help. This is important because many teachers have high levels of daily stress, which may have an impact on their ability to help with students’ mental health.
Section 5: Professionals and services

MH:2K Central Lancashire’s Citizen Researchers identified five findings on professionals and services. They are presented below, illustrated by relevant quotations from Roadshow participants. As far as possible, Citizen Researchers’ own words have been used alongside the quotations to explain why each finding is important.

The Citizen Researchers, together with the Local Advisory Panel, made six recommendations for change on this topic. Again, these are covered below. Each one is presented with a brief comment from the Citizen Researchers.

Finding One: Communication with professionals

Young people commented that communication with professionals often feels patronising and not age appropriate. They feel that professionals and services often fail to talk to them in a way that is relevant for their age group.

Citizen Researchers concluded that it is important for services to improve communication, to build trust and break down barriers. If communication fails to meet the needs of young people, they may disengage from the process and develop more severe problems.

“Don’t ask the right questions – too quick to diagnose.”

“Not listened to.”

“When professionals ‘take over’ and act like they know you better than you know yourself.”

“Spoke to like children“

“Patronizing staff.”

“No teenage appropriate recovery, mainly kids stuff.”
Finding Two: Spotting the signs

Young people perceive that many professionals lack knowledge of the signs of mental health and the services available. This can damage young people’s faith in professionals and can cause them to question the help they are offered.

“Don’t know how to spot mental health issues.”

“Teachers are not educated in mental health.”

Finding Three: Judgement

Some young people feel judged or intimidated when seeking help. Some said they felt pressure and judgement when talking to professionals. Others said they felt intimidated by the clinical surroundings when going to an appointment.

Citizen Researchers suggested that, as a result of these pressures, young people may be reluctant to come forward to receive treatment or support as they feel they will be treated badly.

“Make you feel that it is your choice to be ill.”

“Feel judged and pressured when talking.”

“Seen as dumb if you have a disability – don’t know what you need.”

“Clinical/ unfamiliar surroundings.”

“Working with someone you aren’t comfortable with will delay recovery.”

Finding Four: Service delivery

Young people told us that the delivery of services does not feel smooth to them. They explained that services are inconsistent and information records are patchy. There is a lack of continuity of professionals and a lack of joined-up communication between professionals and services.

Citizen Researchers concluded that patchy delivery can give young people a feeling of poor or uninterested services.

“Working with someone you aren’t comfortable with will delay recovery.”

Finding Five: Schools and colleges

The understanding of mental health in schools and colleges feels too basic to meet the needs of young people. Young people commented that teachers and other staff are not equipped to support students. They highlighted a lack of spaces for de-stressing. Some felt ‘schools rules’ could make things worse, as they do not recognise the mental health issues that individuals may face.

Citizen Researchers noted that young people spend a lot of time in education, and need to be much better supported throughout.

“No effort from teachers in mental health issues.”

“No places to go to when you need to calm down and chill out (during lessons when stressed).”

“No help with actual problems, just general help for all problems.”

“Not enough people to talk to in college.”
1. **Professionals should communicate with respect and listen to young people.**
   Both at school and within mental health services, professionals should speak with respect and listen to what young people say, regardless of age. This is important because it will mean young people are more likely to get the right information and services.

2. **Young people need clear, consistent, and transparent services.**
   Young people want to see services that are more responsive to their needs, with a smoother experience for the individual throughout their journey. They want to see a better flow of information and more consistent communication and relationships. This will increase young people’s confidence and belief in the services, and could prevent problems further down the line.

3. **Provide training for professionals around challenging behaviour, mental health issues and services.**
   Where possible, the training should be led by young people. This is important because professionals can never know too much. This process should build confidence in both professionals and young people.

4. **Schools should reconsider how they approach school rules and wellbeing.**
   Schools need to move beyond a basic understanding of mental health to become more responsive to individual’s needs. As mentioned earlier in this report, teachers need to have better knowledge and schools should have spaces that are dedicated to de-stressing. School rules should be revised to take mental health into account, and there should be more allowance for young people to have a ‘bad day’ or a ‘bad moment.’

5. **Create a campaign to challenge the stigma and prejudice around disabilities and learning difficulties.**
   Develop a campaign to raise awareness around disabilities and learning difficulties, challenging the stereotypes and emphasising that each individual has their own skills. This is important because everyone has a right to be who they are without fear of prejudice.

6. **Use spaces where young people feel comfortable for treatments and consultations.**
   Young people should be able to access treatment and support in safe yet familiar settings, such as community centres and youth centres, rather than traditional clinical spaces. This is important because young people will be more relaxed and will feel more comfortable to open up and talk.
Section 6: LGBTQ+ young people

MH:2K Central Lancashire’s Citizen Researchers identified six findings on LGBTQ+ young people. They are presented below, illustrated by relevant quotations from Roadshow participants. As far as possible, Citizen Researchers’ own words have been used alongside the quotations to explain why each finding is important.

The Citizen Researchers, together with the Local Advisory Panel, made four recommendations for change on this topic. Again, these are covered below. Each one is presented with a brief comment from the Citizen Researchers.

Finding One: LGBTQ+ education

Young people feel there is a lack of LGBTQ+ education within schools. They have commented that schools are out-of-date in a number of areas including: sex education, teacher awareness, pupil’s attitudes, and how schools deal with homophobia and transphobia.

Citizen Researchers concluded that schools are not doing enough to make LGBTQ+ students feel safe and supported throughout their education.

“Class discussions – people being disrespectful.”

“High schools don’t solve any issues.”

“Teachers not knowing/ understanding your identity.”

“Assumptions on pupils gender at same sex school.”
Finding Two: Fear

Many young people who identify as LGBTQ+ are living in fear of being bullied, excluded or rejected by others. These fears can prevent them from talking about who they really are and stop them seeking help when they need it.

Citizen Researchers suggested that young people who identify as LGBTQ+ might experience worse mental health problems as a result of suppressing or rejecting their own feelings.

“Fear of missing out for being yourself.”

“Fear of being rejected.”

“Fear of showing healed self-harm scars.”

Finding Three: Media representation

Young people pointed to the media representation of LGBTQ+ people as a barrier. They highlighted both under-representation and incorrect representation of LGBTQ+ people in films, news, TV, and social media.

Citizen Researchers suggested that media biases can cause young people to suppress their feelings in order to ‘fit in.’ The suppression of identity can, in turn, lead to mental health issues such as self-hatred, depression, self-harm, and even suicide.

“Media’s representation of mental health and LGBTQ+.”

“LGBTQ+ characters are very stereotypical and rarely main characters.”

“Queerbaiting – one gay irrelevant character, all the rest are straight.”

“Stigma in the media/ bad.”

Finding Four: Professionals and services

Young people feel that doctors and professionals aren’t trained to support LGBTQ+ people effectively. Some told us they had experienced homophobia and/or transphobia from professionals. Some said the lack of gender clinics – as well as long waiting lists – means they are ‘left helpless’ and ‘feeling like burden’.

Citizen Researchers concluded that these barriers might stop young LGBTQ+ people from progressing and cause depression and other mental health issues.

“Trans-clinics limited availability and waiting lists.”

“Doctors don’t delve into issues.”

“CAMHS – BAD, Under-funded, Not educated, No experience with trans people.”

“Talking about it is difficult.”

Finding Five: Generational ignorance

Many young LGBTQ+ people feel the older generation does not always accept or understand their identity. This can apply to teachers, carers, parents and wider families. It can lead to young people withdrawing and feeling distant from those around them.
Citizen Researchers suggested that homophobia is ‘being excused’ due to generational ignorance and felt there should be no excuses for prejudice.

“Family acceptance.”

“Parents not accepting.”

“Start to distance yourself from friends and family.”

“Parents/ grandparents not understanding/ accepting your identity.”

Finding Six: Minority groups

Within the LGBTQ+ community, young people from minority groups and religious communities can feel even more marginalised and vulnerable. Young people from these groups may not be able to ‘come out’, and may become more isolated, due to the religious and cultural beliefs they grew up with.

“Religious people feel more isolated.”

“Certain ethnic groups can’t ‘come out’ due to certain beliefs.”

“Religions – don’t agree/ accept LGBTQ+ people.”

“No role models/ anyone to look up to.”
Recommendations on LGBTQ+ young people

1. **Involve LGBTQ+ people in designing education sessions and resources for schools.**
   Education sessions and resources should include relevant and realistic knowledge for both LGBTQ+ and non-LGBTQ+ people. In relation to sex education, this should be taught in a way that addresses and includes everyone across the spectrum of sexual identities, otherwise some students will feel alienated and confused.

2. **Establish support groups for parents and families with LGBTQ+ children.**
   Some parents don’t know how to react when their children come out, due to a lack of education and understanding. They often need support with how to deal with and support their LGBTQ+ children.

3. **Provide more gender clinics and better training for doctors and professionals.**
   Professionals and services need to be better equipped to meet the needs of LGBTQ+ young people. Doctors, NHS staff, counselors and therapists need to be trained to engage effectively with young LGBTQ+ patients in a way that is not patronising. This is important because many LGBTQ+ people don’t get the medical help they need (e.g. trans help) and this leads to more severe mental health issues. Young LGBTQ+ people should be involved in running training events with professionals where possible.

4. **Take action on homophobic and transphobic behaviour in schools.**
   Teachers and other staff in education need to recognise homophobia and transphobia, challenge these behaviours, and take appropriate action when it is reported. Schools should ensure they have policies and procedures in place to reinforce a ‘zero tolerance’ approach.
Section 7: Young men

MH:2K Central Lancashire’s Citizen Researchers identified four findings on young men. These are presented below, illustrated by relevant quotations from Roadshow participants. As far as possible, Citizen Researchers’ own words have been used alongside the quotations to explain why each finding is important.

The Citizen Researchers, together with the Local Advisory Panel, made five recommendations for change on this topic. Again, these are covered below. Each one is presented with a brief comment from the Citizen Researchers.

Finding One: Peer pressure

Young men face peer pressure to “man up” rather than opening up about mental health. The dominant idea that ‘men don’t cry’ makes young men unwilling to admit they have any issues, because they want to be seen as normal and accepted by their peers.

“Wouldn’t be accepted by peers.”

“Peer pressure – needs to be cool/ normal.”

“Be laughed at by friends.”
Finding Two: Fear

Young men fear the repercussions they will face if they come forward. They fear being beaten up, being called weak, being rejected, and people ‘taking the mick’.

Citizen Researchers suggested that, as a result, many young men ‘keep it all inside’ and pretend it is not happening. This can cause more serious issues further down the line.

“Scared people will laugh at him.”

“Fear of more beating (abuse sufferer).”

“Fear of being abandoned by family.”

Finding Three: Strength and masculinity

Many young men feel they have to be strong and look after everyone else in the family. They are concerned about being a burden to those around them, causing people to worry, and being seen as weak. They play down their own mental health, feeling that it is not important enough to do anything about.

Citizen Researchers suggested that young men might bury their problems in order to fulfill what they see as the man’s role within the family.

“Doesn’t want to show weakness in front of friends and family.”

“Less of a man.”

“Protects women.”

“He’s not important, he needs to look after the rest of his family.”

Finding Four: Parental support

Young men told us that the main people they felt comfortable talking to were family members, especially their mums. Young men felt their mums would be less likely to judge them than other people.

Citizen Researchers concluded that mental health education is hugely important for parents and carers, so that they can provide better support for young men who may be suffering.

“Family members – mum/dad wont judge them.”

“Feel comfortable talking to mum – she won’t judge.”

“Comfortable talk to mum/dad.”
Recommendations on young men

1. **Tackle male stigma in schools and colleges using celebrity videos on mental health.**
   Schools and colleges should use celebrity videos, such as the Stormzy video, in assemblies and lessons, to highlight male role models who have struggled with their mental health and encourage young men to open up. Schools and colleges could also use speakers with lived experience of mental health to talk to small groups of young men, because they will feel more comfortable in a small group.

2. **Use sport and hobbies to encourage young men to open up about mental health.**
   Outside classroom settings, sports and hobbies should be used as a ‘hook’ for talking to young men about their mental health. By linking the conversation to appealing activities such as football and computer games, and keeping it casual, there is a higher chance of young men engaging with discussions around mental health.

3. **Engage young men who feel comfortable talking about mental health to talk to others.**
   Seeing other males opening up about mental health could make a real impact on the younger generation. This could be done by going into schools, cadets, and youth groups. It would also be valuable to have men-only groups outside school hours, so there is less chance of the person’s friends finding out.

4. **Provide anonymous support services, like online chats or hotlines.**
   Anonymous support options, such as online chats and hotlines, should be used as safe spaces to engage young men and encourage them to talk. These anonymous services should be actively promoted to young men who may worry about other people finding out. This is important, as young men need to feel safe and not judged when they are seeking support.

5. **Hold awareness events for parents and carers.**
   These events should involve a mixture of professionals from mental health services and young people themselves. If possible, they should be mandatory evening events for all parents and carers. This is important because young men tend to feel most comfortable talking to family members, especially their mothers. The events should highlight and promote support services for families and individuals.
Part Three: Conclusion
Conclusion: Impacts and next steps

The publication of MH:2K Central Lancashire’s findings and recommendations marks the finish of its six part methodology.

A fitting end for this report is therefore to look both backwards and forwards – to consider what impact MH:2K has had to date, and what is likely to happen next.

All of the findings below are taken from MH:2K’s independent evaluation. Unless otherwise specified, they show the findings from across the four local areas who ran MH:2K in 2017-18, rather than for Central Lancashire specifically. There is no indication at this stage that the results for Central Lancashire as an individual area deviate in any significant way from this overall picture.

Impact on decision-makers and researchers

MH:2K aims to produce recommendations that are useful to decision-makers and researchers. The initial evaluation results suggest that decision-makers and researchers see MH:2K as having achieved this aim:

- 92.8% of decision-makers and researchers who attended a Big Showcase event said that the recommendations are very useful;
- 98.5% agreed or strongly agreed that MH:2K would make a positive difference to mental health services in the local area;
- 98.5% agreed or strongly agreed that they would do something new or differently as a result of the project.

<table>
<thead>
<tr>
<th>Usefulness of findings and recommendations (138 respondents)</th>
<th>Not at all useful</th>
<th>Very useful</th>
<th>Fairly / very useful</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>0%</td>
<td>92.8%</td>
<td>99.3%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>“I think MH:2K will make a positive difference to young people’s mental health services in Central Lancashire.” (134 respondents)</th>
<th>Strongly disagree</th>
<th>Disagree</th>
<th>Agree</th>
<th>Strongly agree</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>1.5%</td>
<td>0%</td>
<td>57.8%</td>
<td>98.5%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>“I will do something new or differently as a result of the findings and recommendations from MH:2K.” (130 respondents)</th>
<th>Strongly disagree</th>
<th>Disagree</th>
<th>Agree</th>
<th>Strongly agree</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>0%</td>
<td>1.5%</td>
<td>55.4%</td>
<td>98.5%</td>
</tr>
</tbody>
</table>
Decision-makers and researchers attending the Central Lancashire’s Big Showcase identified a wide range of specific actions to take forward or changes to their thinking. Examples include:

“I’m feeling inspired by new ideas, considering how we can use social media with the young people we work with and our need for further knowledge and training in regards to LGBTQ+ and mental health in young males.”

“I will share the findings and recommendations with Governors’ conference on Saturday, teacher’s courses and networks.”

“I plan to use these recommendations to support the materials we use from school report and other sources with school staff.”

“I will share the findings and recommendations with colleagues in the Criminal Justice Sector including Youth Offending Services.”

“There is loads of conversations happening in public services at the moment about how need to improve the services – we didn’t use proper research so this is great and very useful! I will build the recommendations into the work of the Chorley Integrated Wellbeing Service.”

“We recently commissioned a service to explicitly support teachers from primary to colleges and we can use the MH2K findings and recommendations for reflection so thank you it was very useful and well done guys!”

“As a result of hearing the MH:2K findings and recommendations I plan to change our culture to how we help rather than a criteria lead service.”

“This was very useful and beneficial due to my involvements in the CAMHS redesign, thinking about how we can use this information in developing services. I will be sharing it with other colleagues who were unable to attend.”

“As a result of hearing the MH:2K findings and recommendations I will be aiming to change service delivery at the Healthy Settings Unit at UCLAN and the Counselling Service at UCLAN student services.”

“I plan to help strengthen the legacy of MH:2K by working with the panel of young people to help us shape services as appropriate. The presentations were extremely impactful.”
Impact on Citizen Researchers

MH:2K is not just about influencing mental health decision-making and research. It also aims to provide a developing and empowering experience for the Citizen Researchers involved.

The initial evaluation results show significant self-reported impacts for the Citizen Researchers. 91% said that their knowledge of mental health issues had increased. 89% identified improvements to their presentation skills, 86% to their confidence and 82% to their feelings of wellbeing. 86% said that they now felt more optimistic about their future.

**Status now, compared to before MH:2K…**

<table>
<thead>
<tr>
<th>Self-Reported Impacts (based on 44 responses)*</th>
<th>Much worse</th>
<th>A little worse</th>
<th>About the same</th>
<th>A little better</th>
<th>Much better</th>
<th>Overall better</th>
</tr>
</thead>
<tbody>
<tr>
<td>Knowledge of mental health issues in general</td>
<td>0%</td>
<td>0%</td>
<td>9%</td>
<td>39%</td>
<td>52%</td>
<td>91%</td>
</tr>
<tr>
<td>Knowledge of young people’s mental health in my local area</td>
<td>0%</td>
<td>0%</td>
<td>9%</td>
<td>23%</td>
<td>68%</td>
<td>91%</td>
</tr>
<tr>
<td>Presentation skills</td>
<td>0%</td>
<td>0%</td>
<td>11%</td>
<td>32%</td>
<td>57%</td>
<td>89%</td>
</tr>
<tr>
<td>Listening skills</td>
<td>0%</td>
<td>0%</td>
<td>20%</td>
<td>25%</td>
<td>55%</td>
<td>80%</td>
</tr>
<tr>
<td>Confidence</td>
<td>0%</td>
<td>0%</td>
<td>14%</td>
<td>34%</td>
<td>52%</td>
<td>86%</td>
</tr>
<tr>
<td>Overall feeling of wellbeing**</td>
<td>0%</td>
<td>0%</td>
<td>16%</td>
<td>32%</td>
<td>50%</td>
<td>82%</td>
</tr>
<tr>
<td>Optimism about my future</td>
<td>0%</td>
<td>0%</td>
<td>14%</td>
<td>36%</td>
<td>50%</td>
<td>86%</td>
</tr>
</tbody>
</table>

*One additional response was excluded due to uncertainty over its accuracy
**One Citizen Researcher didn’t answer this question

Evaluation interviews with individual Citizen Researchers suggested additional impacts. For example, some Citizen Researchers reported that MH:2K had made them want to work in the mental health sector or had reinforced their wish to do so. Others suggested it had helped them find employment.

Impact on Roadshow participants

Roadshow participants only spent an hour (one Roadshow workshop) participating in MH:2K. The content of the Roadshow workshops also varied, with some having a much more explicit focus on where to go for help than others.

Despite the above, young people who participated in the Roadshow did report some impacts from their involvement in the project. These included increased awareness of where to go for help (60%) and more confidence to seek help (47%).

**Impacts (based on 872 responses)**

<table>
<thead>
<tr>
<th>Knowledge about mental health</th>
<th>Greater awareness of where to go</th>
<th>More confidence to seek help</th>
<th>New or improved skills</th>
<th>Other</th>
</tr>
</thead>
<tbody>
<tr>
<td>59%</td>
<td>60%</td>
<td>47%</td>
<td>47%</td>
<td>11%</td>
</tr>
</tbody>
</table>

84% of Roadshow participants said that they had enjoyed taking part in the project.
Next steps in Central Lancashire

The MH:2K Central Lancashire Big Showcase was held on Wednesday 16 May 2018. In the few weeks since then MH:2K Central Lancashire Local Advisory Panel has begun discussions about how to take forward MH:2K’s recommendations.

The early signs are extremely positive. The Panel has made a commitment to take forward the recommendations, both at the local and regional levels. They have also confirmed their intention to continue to involve young people as they do so.

The partnership remains committed to the importance of prevention and early intervention, supporting young people to build resilience from an early age.

Conclusion

MH:2K Central Lancashire has achieved the aims it set out to deliver. It has empowered 14-25 year olds to:

- Identify the mental health issues that they see as most important;
- Engage their peers in discussing and exploring these topics;
- Work with key local decision-makers and researchers to make recommendations for change.

In addition the project has had, and looks set to have, significant impacts. This is true of its effect on both participating young people, and on decision-makers and researchers.

MH:2K’s independent evaluator will return to Central Lancashire within a year period to see what has changed as a result of MH:2K’s recommendations. We look forward to seeing the progress that has been made.
## Appendix: Where to seek help with mental health problems

<table>
<thead>
<tr>
<th>Support Available</th>
<th>How to Access</th>
</tr>
</thead>
<tbody>
<tr>
<td>B-eat</td>
<td>Leading UK charity providing information, help and support for people affected by eating disorders. Contact on: 0845 6341414 Online: <a href="http://www.b-eat.co.uk">www.b-eat.co.uk</a> Youth line: Mon-Fri 4:30pm-8:30pm</td>
</tr>
<tr>
<td>Big White Wall</td>
<td>Big white wall is an online mental health and wellbeing service offering self-help programmes, creative outlets and a community that cares. Available through the website: <a href="http://www.Bigwhitewall.com">www.Bigwhitewall.com</a></td>
</tr>
<tr>
<td>Calm</td>
<td>For young men, 15-24 years, 5pm-3am daily. Contact on: 0800 585858. Online: <a href="http://www.thecalmzone.net">www.thecalmzone.net</a></td>
</tr>
<tr>
<td>CAMHS (Child and Adolescent Mental Health Service)</td>
<td>NHS service that assesses and treats young people with emotional, behavioural and mental health difficulties. Supports depression, problems with food, self-harm, abuse, violence, anger, bipolar, schizophrenia, anxiety and more. Contact on: 0808 8025544</td>
</tr>
<tr>
<td>Family Rights Group</td>
<td>Provides advice and support for families whose children are involved with social services. Contact on: 0808 8010366</td>
</tr>
<tr>
<td>Key Youth Charity</td>
<td>Key helps people to build better lives, develop self-confidence and well being, prevent homelessness and strengthen families. Contact on: 01772 678979</td>
</tr>
<tr>
<td>Lancashire LGBT</td>
<td>Supporting LGBT people to be happier healthier and well connected. Contact on: 01772 717461. Online: <a href="http://www.lancslgbt.org.uk">www.lancslgbt.org.uk</a></td>
</tr>
<tr>
<td>Mindsmatter Chorley and South Ribble</td>
<td>Offering talking therapies to adults from the age 16 upwards who may be struggling with common difficulties such as stress, anxiety and depression. Contact on: 01772 643168. Self-referral online: <a href="http://www.lancashirecare.nhs.uk/Mindsmatter">www.lancashirecare.nhs.uk/Mindsmatter</a></td>
</tr>
<tr>
<td>The Mix</td>
<td>The UKs leading support for young people. They offer help with any challenge you’re facing, from mental health to money, from homelessness to finding a job and from break ups to drugs. Contact on: 0808 8084994. Online: <a href="http://www.themix.org.uk/">www.themix.org.uk/</a></td>
</tr>
<tr>
<td>The Priory</td>
<td>Priory is the leading independent provider of behavioural care in the UK. Our purpose is to make a real and lasting difference for everyone we support. Priory is dedicated to helping people to improve their health and wellbeing. We understand that in order for people to achieve high quality clinical and educational outcomes they need individually tailored programmes, suiting their specific needs. Contact on: 0800 0846116. Website: <a href="http://www.priorygroup.com">www.priorygroup.com</a></td>
</tr>
<tr>
<td>Shelter</td>
<td>Offers free, confidential and impartial advice, information and assistance on any housing problems. Contact on: 0808 8004444. Online: <a href="http://www.shelter.org.uk">www.shelter.org.uk</a></td>
</tr>
<tr>
<td>Suicide and Self harm</td>
<td>Crisis Team. Contact On: 01772 676173</td>
</tr>
<tr>
<td>Victim Support</td>
<td>Support for victims of abuse/domestic violence. Contact on: 01772 201 142</td>
</tr>
<tr>
<td>Young Addaction</td>
<td>Addaction helps people change their behaviour to become the very best that they can be. It could be their drug or alcohol use or worries about their mental health – we support people to making lasting change in their lives. Contact on: 0808 164 0074</td>
</tr>
<tr>
<td>Young Minds</td>
<td>Young people’s mental health and wellbeing. Contact on: 0808 8025544. Online: <a href="http://www.youngminds.org.uk">www.youngminds.org.uk</a></td>
</tr>
</tbody>
</table>
For more information about MH:2K, please contact:

Sarah Allan, Head of Engagement, Involve
sarah@involve.org.uk

@involveUK
www.involve.org.uk

Rose Dowling, Director, Leaders Unlocked
rose@leaders-unlocked.org

@leadersunlocked
www.leaders-unlocked.org

Published August 2018.