

The Mental Health of Children & Parents in Northern Ireland



RESULTS OF THE
YOUTH WELLBEING
PREVALENCE SURVEY

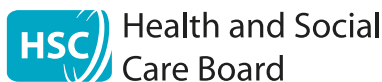
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Youth Wellbeing NI

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What is the study about?

The planning of health and care services should be based on good quality evidence and the Youth Wellbeing Study NI gives us the very first reliable estimates of the prevalence of mental health problems in children, young people and their parents.

What questions did we ask?

We asked questions that scientifically measured the rates of:

- Emotional and behavioural problems
- Anxiety and depression
- Post-traumatic stress disorder (PTSD)
- Other mental health or developmental problems including Autism Spectrum Disorder, psychosis, and eating disorders/anorexia
- Self-injury and suicidal thoughts or attempts
- Adverse childhood experiences – including emotional, physical or sexual abuse, neglect, living with an adult with mental health problems or alcohol or drug use, a family member being in prison, or parents splitting up
- Other relevant experiences e.g. social media use, bullying, alcohol/drug use and smoking

How did we collect the information?

We surveyed 3,074 children, young people and parents of 2-19 year olds in their own homes.

We also asked about...

- Parents' mental health, and
- Gathered important background information about household income, benefits, the local area, their child's special educational needs and physical health.



What did we find?

Mental health problems are common

1 in 20

1 in 20 young people have a form of Post-Traumatic Stress Disorder (PTSD) – because they'd witnessed violence, had a serious accident or experienced the sudden death of a loved one.

1 in 8

1 in 8 children and young people in Northern Ireland experience emotional difficulties, 1 in 10 conduct problems and 1 in 7 problems with hyperactivity.

25% higher

Rates of anxiety and depression in Northern Ireland are about 25% higher than the rest of the UK and Ireland.

1 in 8

1 in 8 young people have anxiety or depression.

Do boys and girls experience similar kinds of mental health problems?

Rates for depression and anxiety were similar for boys and girls but there are some differences at different ages.

Boys aged 5-10 years had more emotional problems and symptoms of depression and anxiety but when young people reach 16-19, girls are more likely than boys to have these symptoms.

Boys were more likely than girls to have used drugs.

Boys were more likely to have autistic spectrum disorder traits.

Girls were twice as likely to have an eating disorder compared to boys.

Girls were more likely to be cyber-bullied than boys.



It's a myth that suicide just affects boys

Girls were more likely to engage in self-injury or have suicidal thoughts or attempts – one in six 11-15 year old girls, rising to almost one in four 16-19 year old girls had these feelings.

Spotting the early warning signs

One in five young people had six or more 'psychotic-like' symptoms such as hearing or seeing things that no-one else can see, or feeling like someone else is controlling their thoughts or actions. These are common symptoms but can be an early sign of developing mental health problems in the future.

Spending too much time on social media is a problem for some

One in twenty young people had a problem with social media which meant they were neglecting other hobbies or sport, arguing or lying about their social media use and having withdrawal symptoms.

Parent mental health

One in five parents had a mental health problem and anxiety and depression were the most common problems.

Parents living in the most deprived areas of Northern Ireland were almost twice as likely to have a mental health problem.

Children living with a parent with current mental health problems were twice as likely to have an anxiety or depressive disorder themselves.

Where you live matters

As with parent mental health, living in a deprived area increases your chances of having a common mental health problem.

But there are some positive messages too...

Rates of alcohol, smoking and drug use are dropping.

Children and young people had relatively low rates of peer problems.

Rates of prosocial behaviour - giving, helping and sharing - were higher than other parts of the UK.

What are the most common risk factors for children and young people in Northern Ireland?

Adverse Childhood Experiences (ACEs) – such as parental separation, parental mental health problems, emotional neglect, domestic violence and parent problematic substance use.

Growing up...the older you get, the chances of experiencing mental health problems increase.

Poor health and disability.

Special educational needs.

Receiving social security benefits.

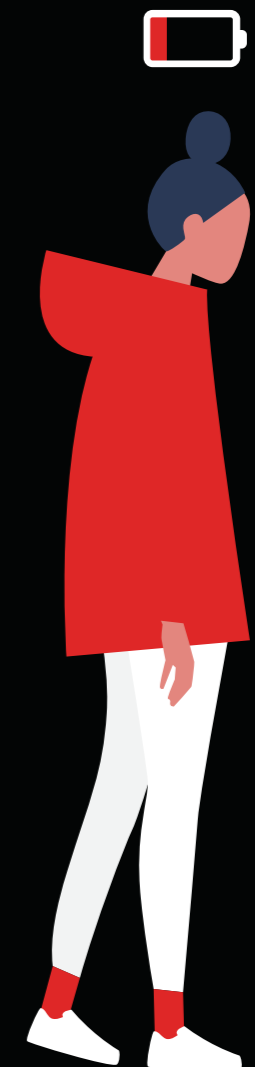
Having a parent with a mental health problem.

What we still need to understand.

We also collected information about bullying and alcohol and drug use as this all can have an impact on our mental health. We plan to look at how these factors also can influence young people's mental health.

One in eight young people had been bullied or cyber bullied in the past 2 months.

Girls were more likely to have been cyber-bullied than boys.



Key Messages

- Mental health problems are really common and can affect anyone.
- We need to remove the stigma about mental health problems - stop negative language about mental health – ‘disorder’ feels like it can’t be fixed.
- Do more to prevent poor mental health becoming a big problem – mental health problems can be invisible until physical symptoms start to develop.
- This is not something we choose to experience, this is a real problem.



What young people want to happen next...

Parents

- Educate parents that poor mental health is a real problem.
- Parents stop blaming yourselves – we need to increase understanding that it is not your fault.

Health

- Mental health problems can feel the same as a physical illness and it should be treated in the same way.

Education

- Schools make us fear mental health problems, stop concentrating on all the scary aspects (like suicide and depression), brushing over the details and look at promoting good mental health.
- There should be specialist teachers that know and understand about these issues – too many teachers are ‘awkward and uncomfortable’ around mental health.
- Schools should be properly resourced to promote good mental health – it shouldn’t just be slotted into a class like ‘Learning for Life and Work’.
- We spend most of our time in school – we need to talk about managing stress, dealing with worries and know that practical help and support is available, that someone will take action when we have a problem.
- Stop the 2D way of looking at mental health – just because you are getting good grades doesn’t necessarily mean you’re coping.

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#YouAreNotAlone



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