Early Support for Young People's Mental Health

I remember my son coming home in Year 10 and they had been on a trip to look at universities, and he was so excited.

He came back and said, "Oh mum, I don't really know what I want to do, but shall I do a Maths degree or Science, or should I do Drama?" It was just lovely to see a young man who had so many possibilities and so much excitement about the future.

But it was only about six months later that things turned for the worse, and we found the boy who used to love going to school was very anxious about going to school. He started to lose interest in all the things he loved to do. He became withdrawn from friends, and there was a time at Christmas where he was really poorly with his anxiety and physically couldn't go back to school.

So I had to ring school and say he was really not well. We got no sympathy at all. It was just, "Well, he has to be in. He is not allowed to be at home for this sort of thing," and that they were going to call the Educational Social Worker. So that wasn't a good response really.

So I went to the GP with him. That wasn't good either really. The GP was sympathetic but mainly thought it was just a phase: just go home and he will get over it. They are all worried about things at this age.

But it didn't go away, and he couldn't go to school, and things just got a little bit worse. So we went back to the GP, who did then refer him to CAMHS.

We thought, "Oh brilliant, he is referred to CAMHS," just to be told he was on a waiting list. "If you have got any problems then ring us, and if you are really worried then go to A&E," but there was not any practical support or moral support, just, "We will let you know when you are on top of the list."

So a few months went by, and his mental health didn't improve. It just got worse. His behaviour sometimes was a little bit odd, and it was only a few months later that I really went back to CAMHS and said, "Look, he really needs to be seen."

I described his behaviours and things, and they agreed that they would see him, and he saw a psychiatrist.

Again, we were very hopeful that this would be another turning point, but it wasn't really, because the psychiatrist just said, "Oh, I don't think counselling would work, but we need to give him medication."

So we said, "Yes, okay." We trusted him. So he went on some antidepressants at 15, and basically we didn't see any improvement.

He was offered an increased dose, so we thought, “Okay, we will do that.” A few months later that didn’t work, and then he was offered another increase until he was on the very highest dose he could be.

No improvement had been made. He was still not going out. In fact, it made him more tired and more withdrawn, I think, than before.

So we ended up going back and pleading again: “Look, this isn’t working. Surely something else can be offered to him.”

So he went on a waiting list for some CBT. We eventually got that, and that was a breakthrough. That was amazing.

She was an amazing therapist. She gave him very, very tiny steps, which sound a bit strange now, but they did work, and there was that progress that you could see. It made a difference, and it was very helpful to him.

But I wouldn’t say he was that boy that I described at the beginning. He was better than that comatose boy that they saw. So he made that progress, but he was nearly 18 then.

We did feel there was a bit of, “Well, we have done the sessions, he has made this improvement, we have ticked a box now and we will sign you off.” He wasn’t high enough for adult services, and so we were just left really.

He was signed off. We didn’t really know where to go or what to do. He wasn’t well enough to go back to A levels, and we found our way, really, through muddling along and some help through education.

He has made improvements. He is a bit older now. He did go to university, and he has got friends, and he made an independent life for himself.

I would say that he still needs support, and that he still suffers with his mental health and that he has blips. He goes forwards and sometimes backwards.

I think what I would really like to ask is that children like him don’t wait so long. If he had a broken leg, you wouldn’t expect him to wait two years for treatment. If you have cancer, you are seen straight away. So why not mental health? The implications are so long lasting.

If you have early intervention, so much difference can be made. Less economic burden on society. Children achieving more in education.

So I would just ask whoever is listening.