

numbers of referrals has increased and have become comfortably consistent. This has left less time for networking but the cases often require contact with new services.

- Networking this year has included making or maintaining contact with:

Gordon Mivuti CAMHs Service Manager

Karen Watkins Anti Bullying Co-ordinator West Sussex

Sue Skarstein Mid Sussex College Student Support

Joan Fairbairn CAMHs Manager East Grinstead

Connexions teams in Crawley, Horsham and Eastbourne including the intensive PA team in Crawley.

Information Shops in Burgess Hill and Horsham.

Jeanette Miller at Positive Activities for Young People West Green.

Paul Miles at Denham Road Community House

ISDA manager Brian Crease in Hayward's Heath

Intensive family support team in Mid Sussex.

The Life Hostel in Hayward's Heath

All professionals in the inpatient and outreach team at the SCCYP.

South :

- During the last six months I have worked more closely with the CAMHs teams at Colwood and Orchard House with a number of clients which has helped me build better relationships with professionals and an understanding of how advocacy can support young people.
- I have also worked with young people in adult services, in particular a person based for a period of months at Centurion on a section three, and two other young people who had short periods at Meadowfield.
- I have continued to network and promote the service with, for example the Connexions Intensive Support Team, Young Carers, the Worth Project for YP who have been exposed to domestic abuse, the Autistic Society, the Sussex University LGBT project and Social Services.
- I am working with young people who are being identified as having BPD at seventeen and eighteen years and more young people identified as having behavioural problems in their early teens whose underlying trauma is overlooked and not supported. Clients disclosing histories of sexual abuse or that other people in the family experience mental health difficulties are consistently present in my case load.
- I am involved in more cases where young people are going through the legal system often without their solicitors having information about their unmet mental health needs.

Description of your Service

(to include where it operates e.g. venues etc and a brief description of the advocacy work.)

North:

- The Speak Your Mind service in the north of west Sussex is based at the Sussex Centre for Children and Young People (SCCYP) on the Princess Royal site in Hayward's Heath. The service covers the community across Mid Sussex including Burgess Hill, Hayward's Heath, East Grinstead, Crawley, Horsham and all surrounding villages. A flexible community base has been trialled in Burgess Hill at the Community House on Denham Road. This regular contact has led to attendance at Mid Sussex meetings around the issues of Homelessness, Young Carers and Anti-social behaviour as well as a link to many other groups for young people in the area.
- This year appointments have regularly been attended at New Park House in Horsham. There has also been some contact with West Sussex social services in Crawley, Horsham and Mid Sussex. Multi agency working has been maintained with teams at Connexions, the Information Shops and Positive Activities for Young People at West Green, Crawley.
- The work with young people from the community includes helping young people access statutory services. This has included supporting young people to gain referrals from General Practitioners, providing support in initial assessments and making sure that the help that is offered is the help the young person has identified that they want. As an example, I am in the process of helping a

young person access a talking therapy for difficult thoughts and feelings they have been having rather than taking the medication that has been offered, which the young person does not want to take due to adverse side effects.

- Work at the SCCYP has included attending reviews, assessments and goal setting meetings with young people. Communicating requests, complaints and queries with staff members on an individual basis as well as meeting with groups of young people to discuss and pass on general issues. I have been able to support that transition for young people when leaving the unit by connecting them with community services.

South:

- I am still regularly attending both Flintstones and the 39 Club Pupil Referral Units. My regular presence has helped break down some of the stigma around mental health which many vulnerable young people in these units experience difficulties with. Building up good relationships has enabled some of them to ask for help and representation and to be able to begin to be able to talk about their difficulties and discuss how linking with other community services can support them.
- I also continue to make visits to other youth forums and groups across the county in order to promote the advocacy service directing to young people and also the professionals involved in their care, for example the Be OK project which runs in Chichester and the LGBT consultation project in Worthing. I have also done one off drop in sessions at some of the family centres across the county to target young teenage parents.
- The most frequently requested support from young people is to help them access mental health services
- And provide information about other voluntary and community services that could help them. Issues around education and housing are also most common.
- The advocacy work itself is fairly evenly split between short pieces of issues based work, such as providing information , making a referral or a piece of straight forward representation and much longer term work that revolves around many complex and inter-related issues. This requires a different level of commitment and engagement to enable the young person to use advocacy in a way that supports their recovery.

Equal Opportunities Information

(Are you aware of any particular issues or known groups not receiving a service? How do you make sure awareness of the service is spread far and wide?)

North:

- It appears from contact with services in West Sussex that the ethnic minority groups are not represented within the service user groups. However, it is important to consider that the county has a lower than the national average of BME communities (13.5%) of around 5.7%. Crawley is the exception to this as it has a marginally higher BME population of around 15.2%. The reasons as to why these minority groups do not access mental health services are not clear. It may in part be due to the cultural difference in the ways in which these groups deal with mental health issues. However, with the increase of immigration groups from Eastern European nations it is surprising that so few young people from minority groups are accessing services.
- I have also noticed that there appears to be a difference in the economic status of individuals who are accessing CAMHS services in comparison to those who are attending the Pupil Referral Units, both in the medical and behavioural groups.

South:

- There continue to be a significant number of young people who are looked after or who have behavioural problems using the advocacy service.
- Also more young people who have heard about our service through word of mouth, who are struggling with issues around being gay or lesbian have accessed the advocacy service for help to find support because of the lack of specialist LGBT services in West Sussex.
- Encouraging young male clients and also young people from particularly deprived social backgrounds where mental health difficulties are common and enduring in the family and community is still a priority. These groups tend to find it difficult to engage or get a good outcome from statutory and community mental health services. Many dis-engage early in the intervention.

There is still stigma felt by young people about being associated with mental health services and so support accessed through the Connexions Service or the YOT tend to be requested and responded to better.

- Some of these young people's anger and frustration about their previous lack of, or inadequate support, takes a considerable amount of my contact time trying to encourage them to identify what they think they need and discussing the realities of their options which may often mean, re-engaging with past services or developing a more responsible approach to their own difficulties.
- From an advocacy point of view many young people labelled as having behavioural/self harm issues do not feel that they get enough support or that what is offered helps them. From their point of view services and professionals give up on them.

Difficult Issues

(Include any significant difficult issues you have dealt with within the last year and their outcomes. Are you aware of any particular locally generated issues? Are there any issues that need taking forward strategically as an organisation?)

North:

- The problems that arise from an individual being declared "intentionally homeless" have been apparent. The details that lead to this decision are often subjective and the way in which a young person perceives their situation seems easily deniable by housing services when other services or family members give their perspective. Often it seems that too little attention is paid to the mental health of the young person and their family history when making these assessments. In two such cases the fact that the young person has previously been in care has determined the outcome for short term (emergency) housing assistance, however this has not been without a struggle. The problems with these applications begins in Mid Sussex with the requirement of young people to travel to Hayward's Heath, this travel cost is not reimbursed. If a young person is allocated housing then the available places are limited and may not be close to the place that the young person has social or familial connections.
- If a young person between the age of 16 and 18 needs housing or benefits the process is difficult and frustrating. Professionals from Connexions and the Information shop are able to help with these processes but they are limited. The workers from the Information Shops do not have the capacity to leave their premises and both service providers are restricted by needing to maintain a positive working relationship with other statutory workers. This makes the advocacy role here essential, but it does highlight the need for this process to become more young person friendly but especially more accessible to the most vulnerable groups of young people. This could start with the simplest changes such as professionals having training in working with young people with mental health problems, and being flexible as to the way in which forms are filled out, i.e. with the support of professionals when necessary.
- It has been brought to my attention that there has been an ongoing problem of young people who attend the counties PRU's having access to CAMHS services. This problem has been tackled recently by the introduction of on site primary mental health workers. It is too early to see the effectiveness of this change, however it may be that advocacy has a role in helping this group of YP access CAMHS specialist services. This group of YP are however particularly difficult to engage and it seems that on occasions CAMHS will not work with individuals who present as having "behavioural" and not "mental health" issues. The distinction between these two groups mainly seems to lie in the way in which the individual presents their emotional distress. The issue being that if a young person presents as having little concentration, is angry, aggressive and quick to react negatively to peers, then it is likely that they will fall into the "behavioural category". If the person is constantly tearful, subdued and stops enjoying time spent with peers then it is more likely they would be seen as having a "mental health". The help that is available to these two groups of young people is very different and it is concerning that perhaps this would be an example of when someone could 'slip through the net' of early access of mental health services.

South:

- Trying to identify and engage a professional from a relevant LGBT service to support young people locally and regularly who are isolated geographically and socially. Although I was able to get an offer from a counsellor from Allsorts in Brighton he was not able to meet with the young person regularly. Because there was so little support the client's mental health deteriorated further and she had to wait for an assessment with CAMHS. She was finally offered medication

for depression and some contact time to talk about her issues.

- I do a lot of work with Looked After children, from referrals from PAR where the mental health issues of the young people are significant. I frequently have to advocate for more mental health support for this group who often end up being moved on, through a series of residential units, with no continuity of care because of the inability of the staff to cope with, manage and support the recovery of the young person. CAMHS see the onus of responsibility with the residential unit and vice versa and if further services are involved the opportunities to pass the buck only increase. Advocacy is essential in pressing for co-operative and effective partnership working.
- It is often messy, complicated and difficult to involve and include young people in plans and decisions around their care and treatment and the advocacy service is vital to ensure that this is not just paid lip service by overstretched and inflexible systems.
- There are sometimes tensions where the balance of care and control for vulnerable young people comes into play. For instance certain professionals feel that the advocate, by presenting the young person's wishes (which the professionals think are too unsafe or inappropriate) is being obstructive or wilfully risk-taking with that young person's potential positive outcome and recovery. We have to repeat over and over that we are representing the young person's views and wishes not our own.

Evidence of Service User Involvement

(Please list evidence of formal/informal/multi agency service user involvement. Also summarise any users views that you have directly received in addition to the evaluation form comments)

North:

- I have been asked to communicate to other professionals my experiences of local services in relation to the extent to which they are accessible and effective for young people. I have endeavoured to answer these queries using my own perspective and also through informal consultation with young people.
- In my role at the SCCYP I have organised focus groups for service users. One example was discussions around the quality of food provided by the unit. The outcome of this meeting was passed on to senior staff and resulted in a refresher training course for staff in charge of preparing food. It also meant that previously where young people with eating disorders had to eat 6 digestive biscuits each day as part of their treatment programme; they are now able to have a wide choice of snacks many with more nutritional content.
- A piece of consultation work that encouraged the young people to prepare an application to the League of Friends resulted in the acquisition of a Nintendo Wii games console and games for the unit.
- I have carried out some consultation work in addition to my advocacy role commissioned by CAMHS school attendance project in West Sussex. The consultation (held on behalf of the CASA project) was held with groups of young people in the Burgess Hill PRU, Crawley PRU and St Wilfred's Comprehensive School in Crawley. The consultation developed two self help leaflets for young people aged 11-16 who may be struggling with mental health problems that was affecting their attendance or performance at school. The young people were involved in deciding on content and design of the leaflets.
- I have also been involved in consultation work in the Bridging the Gap project in Brighton and Hove.

South:

- Over the course of the 4 years that I have run this service I have encouraged and listened to what my clients have said about what they need from me as an advocacy worker and have raised these with my manager and supervisor consistently. Typically requests are for more contact time, more representation at meetings and with other professionals and visits arranged to meet their time and location needs. I also offer clients the chance to give feedback in a 'comments' book and to take part in various groups I run in the PRUs.
- Clients viewpoints about what they want from other services and professionals are, for example:
 1. "listen, be easy to talk to", "one of us"
 2. "provide an outreach service to their homes or a service that can be accessed through youth venues such as the Information Shop, Connexions Offices and other youth

community settings.”

3. “be available consistently and for the duration of their period of difficulty or until things have improved or until they have real mechanisms for managing.”

The Advocacy Service is well received by young people and in part this is because, they mostly have the opportunity to meet me, and have their issues listened to, I respond relatively quickly and am able to provide information and advice about other services and help them engage with these.

Complaints/Accidents

(Please provide any information regarding any complaints/accidents during the past year)

North : None

South : None

Service Development

(Please outline any ideas you have for service development)

North:

- I would be keen to make contact with the privately run children’s homes in the region and promote the advocacy service within these settings. Other areas I feel it would be beneficial to have contact with are the hostels that house vulnerable young people who may or may not be accessing services. In both these instances I feel that meeting staff and service users are important but also for them to have promotional materials, such as posters and leaflets, would be very helpful.
- I have continued to network widely, and was asked to make a presentation to Sussex Midwives in Crawley. Some of the mums they work with are young people, and workers felt the advocacy project would be useful.
- I have been quite disappointed at the number of referrals I have received from Tier 3 CAMHs. I feel that approaching this through networking in team meetings would be helpful but also some promotional materials for the service on the walls of the reception areas of CAMHs would be likely to have a better response than a leaflet hidden in a messy rack!
- The professional meetings that include young people have proven to be variable in the extent to which they are engaging and accessible. I would like, through some consultation with young people at the SCCYP, to find ways that I could improve this. I feel that if the young people were better informed about the nature of the meeting, who will be attending and what is likely to be discussed before the date of the meeting, then they will feel better prepared and will feel as though they have more autonomy over their meeting. It would also be important, particularly for those over the age of 16, for the young person to have a say in information that they DO NOT want discussed in the meeting, in light of who may be attending. I feel that all this could be done with the help of the Headspace toolkit, and perhaps some adaptation of documents within this pack.
- Mid Sussex Youth Homelessness project was set up, and this was a good networking opportunity, as well as enabling me to make contact with housing providers, which proved helpful to clients in East Grinstead and Hayward’s Heath.

South:

- With Mind in Brighton & Hove’s expertise in offering services for the LGBT community, I would like to see Mind looking at developing something, maybe in partnership with other organisations for young people in West Sussex.
- The number of services continuing to approach us for advice or partnership working in their SUI projects indicates a clear need and I would like to see this area developed as an additional service that we could offer.
- Hilary Benn, granddaughter of Tony Benn was standing as the local parliamentary candidate for the Labour party in east Worthing. As a young person herself, she has expressed a wish to pursue the interests of young people and I think it would be good to make links with her and see what she could

do for the SYM service and the issues we deal with in the way of raising awareness and campaigns.