



Mental and emotional health of 16-year olds



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Introduction

The Young Life and Times (YLT) survey has monitored the mental and emotional health of 16-year olds in Northern Ireland since 2004. ARK reported about 'Stress at 16' (Cairns and Lloyd, 2005), the extent of school bullying (Burns, 2006) and most recently about the issue of self-harm (Schubotz, 2009). In 2009, ARK was contracted by the Patient and Client Council (PCC) to ask 16-year olds a range of questions on their emotional and mental health and their attitudes towards, and experiences of, mental health services for young people.

The PCC was set up on 1 April 2009 to provide an independent voice for patients, clients, carers and communities on health and social care issues. The PCC has been set up to engage with the public to obtain their views on any part of health and social care. It promotes the involvement in the design, planning, commissioning and delivery of health and social care and aims to provide assistance to people making a complaint relating to health and social care. The PCC also gives advice and information to the public about health and social care services.

By placing questions in the 2009 YLT survey the PCC gave young people the opportunity to share their opinions and experiences of mental and emotional health care services. The 2009 YLT survey was undertaken in November and December 2009. Every 16-year old living in Northern Ireland who was born in February and March and registered to receive Child Benefit was invited to take part in the survey. 857 respondents completed the 2009 YLT survey.

Mental and emotional health problems

Respondents were asked whether they had experienced serious mental or emotional health problems in the past year for which they felt they needed professional support. Nearly three quarters of respondents (74%) reported that they had not had such problems. Of the 26 percent of 16-year olds who had experienced serious personal, emotional or mental health problems, only nine percent had sought professional help for these problems. Males were less likely than females to report emotional or mental health problems (79% and 71% respectively saying they had no such problems).

Whilst the differences between males and females are interesting, they are not statistically significant. This cannot be said about the differences in mental and emotional health problems between 16-year olds who come from well-off financial backgrounds and those who do not. As Table 1 shows, whilst over three quarters of YLT respondents from well-off backgrounds (78%) and average well-off backgrounds (77%) said they had had no or few emotional and mental health problems over the past year, only 57% of those from not well-off backgrounds said the same. In other words, more than four in ten 16-year olds from financially not well-off backgrounds (43%) reported that they had suffered from emotional or mental health problems in the past year. The finding that there is an association between financial well-being and mental and emotional health was confirmed by

Table 1: Prevalence of serious emotional and mental health problems, by financial background of parents

	%			
	Not well-off	Average	Well-off	All
Have you in the past year had any serious personal, emotional, behavioural or mental health problem for which you felt you needed professional help?				
Yes, but I did not try to get professional help	14	10	12	11
Yes, and I did ask for professional help	18	9	5	9
No, I have had few or no problems	57	77	78	74
I have had, or now have, serious problems, but have never felt the need for professional help	11	4	6	6

Table 2: Which of the following things cause you emotional problems?

	%		
	Male	Female	All
My appearance or body shape	28	64	50
Having too much homework	34	53	45
Having to cope with criticism from family and teachers	31	41	37
Not being confident with opposite sex	17	21	20
Being in debt	11	16	14
Thinking about suicide	9	15	12
Being concerned that I drink too much	9	7	8
Thinking I may be gay	5	5	5
Being pressurised to take drugs	6	4	5
Something else	13	15	14
None of the above	30	12	19

the result that 52 percent of respondents who reported they had been affected 'a lot' by the recent economic crisis reported serious mental and emotional health problems compared to just one quarter (25%) of respondents who said they had 'not at all' been affected by this crisis.

When asked what sort of things cause respondents emotional problems, 'appearance or body shape' was identified by the highest proportion of respondents (50%), as Table 2 shows. This was followed by the pressure they experience from 'having too much homework' (45%) and by 'having to cope with criticism from family and teachers' (37%). There were some significant differences between males and females in relation to these pressures. For nearly every issue, apart from 'drinking too much', 'being pressurised to take drugs' and 'thinking I may be gay', 16-year old females were more likely than males to say that it caused them emotional problems – sometimes significantly more so. For example, nearly two thirds (64%) of females said that their 'appearance and body shape' caused them emotional problems compared to just over one quarter of males (28%). Over half (53%) of females compared to one third of males (34%) said that 'having too much homework' caused them emotional problems. 'Having to cope with criticism from family and teachers' was also identified as causing emotional problems by 41 percent of females but only 31

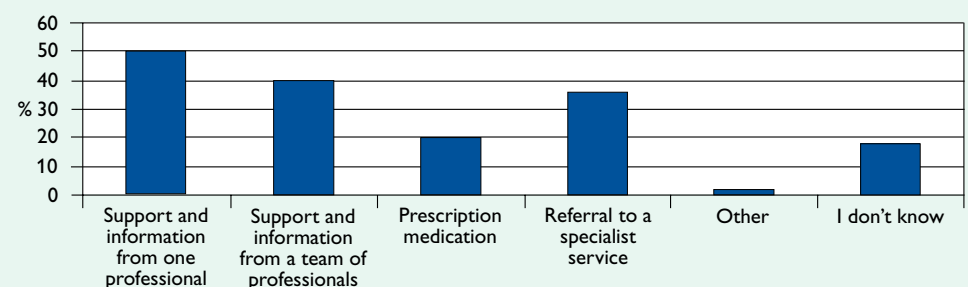
percent of males. Nearly three times as many males as females said that none of the listed issues would cause them emotional problems.

Sources of support

When asked what type of professional support would be helpful for a young person with emotional or mental health problems, 50% of respondents felt that support and information from one understanding professional would be most appropriate, as Figure 1 shows. The least popular option among respondents was that prescription medication should be given with one in five respondents (20%) giving this response.

Respondents were given a list of potential sources of support that young people with emotional or mental health problems may consider contacting and

Figure 1: What kind of professional response would be helpful to a young person who has emotional/mental health problems?*



* Respondents were allowed to choose more than one response option.

were asked to rate on a 4-point scale how helpful they felt these sources would be to them. Figure 2 shows the level of helpfulness anticipated by respondents expressed as a mean or average score. The higher this score, the more helpful respondents felt this source of support would be to them. As Figure 2 shows, respondents' friends and mothers were identified as the most helpful sources of support. The mean score for friends was 3.4 and that for respondents' mothers was 3.34. The sources identified as least helpful were a school nurse (mean score: 2.05) or a minister, priest or religious leader (mean score: 2.08). Respondents could also identify other helpful sources of support, and 13 respondents identified 'teachers'.

Attitudes to mental and emotional health

Finally, YLT respondents were asked how much they agreed or disagreed with 12 statements focusing on emotional and mental health issues and services. Some of these statements were directly related to the provision of mental health services for young people. A 5-point response scale was used, from 1 (strong agreement) to 5 (strong disagreement) In order to be able to calculate and compare the extent to which young people agreed with each statement, the mean scores of the responses were calculated. Those who said they did not know how to respond to the statements were excluded from the analysis along with those who failed to respond to these questions. Table 3 shows the responses to these statements and compares the respondents who said they had suffered from mental or emotional health problems over the past 12 months with those who did not.

Figure 2: How helpful do you think these sources would be to you if you had emotional or mental health problems? (Mean score)

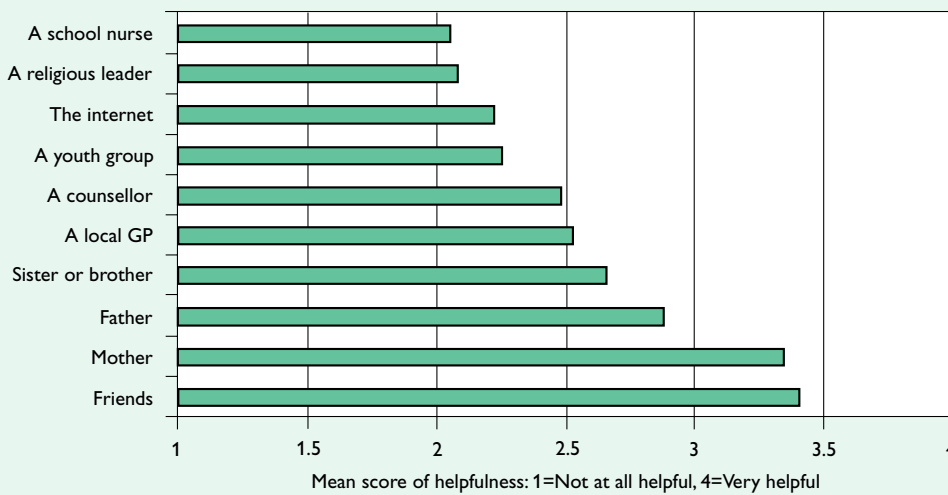


Table 3: Level of agreement or disagreement with statements. By reported mental or emotional health problems in past 12 months.

	Mean Score		
	Emotional or mental health problems in past 12 months	No reported emotional or mental health problem	All
I believe that doctors and nurses understand and respect my right to confidentiality when it comes to my emotional or mental health problems.	2.18	1.84	1.93
There are very few services for young people who have emotional or mental health problems.	2.66	3.02	2.90
When you have emotional or mental health problems it is easy to trust and talk to school nurses and health visitors.	3.90	3.55	3.64
The voice of young people who have emotional or mental health problems is not heard by health professionals.	2.63	2.88	2.81
I feel that I could get help from services in an emergency if I had emotional or mental health problems.	2.83	2.46	2.57
Young people are able to influence the delivery of health care that relates to their emotional or mental health needs.	3.04	3.01	3.02
There is no support in the health service for families who have a young person with emotional or mental health problems.	3.21	3.43	3.35
When young people have emotional or mental health problems there are suitable activities and facilities in the local community that they can attend to help them.	3.44	3.02	3.15
Young people like me have difficulty talking to anyone about their own emotional or mental health issues.	2.16	2.66	2.51
There are lots of organisations that can help me if I have emotional or mental health problems.	2.98	2.67	2.77

1= Strongly agree, 2= Agree, 3= Neither agree nor disagree, 4= Disagree, 5= Strongly disagree

The table shows that those 16-year olds who had reported serious mental or emotional health problems over the past 12 months had more negative attitudes and experiences of mental health services than their counterparts. Most of these differences were statistically significant. For example, the majority of respondents who had experienced serious emotional or mental health problems disagreed that there were 'suitable activities and facilities in the local community that they can attend to help them'. On the other hand, most 16-year olds who had *not* reported such mental health problems agreed that there were suitable activities and facilities available. Furthermore, 16-year olds who had reported mental or emotional health problems were less likely to agree that there were lots of organisations that can help them if they experienced such problems than 16-year olds who had no such problems. Respondents with emotional or mental health problems were also more likely to agree than those without such problems that the voice of young people who have emotional or mental health problems is not heard by health professionals.

The views of respondents were most similar in relation to the statement that 'young people are able to influence the delivery of health care that relates to their emotional or mental health needs' with the majority neither agreeing nor disagreeing. A positive finding of the YLT survey is that 16-year olds were most likely to agree that doctors and nurses understand and respect their right to confidentiality. On the other hand, disagreement was strongest with the statement that it is easy to trust and talk to school nurses and health visitors when they have emotional or mental health problems.

Conclusions

The findings of the 2009 YLT survey raise a number of questions with regard to the emotional and mental health of 16-year olds and their attitudes to services available to them in this field. First and foremost, the survey reinforces the findings from recent YLT surveys that there is a significant relationship between the emotional and mental health of 16-year olds and the financial wellbeing

of their families. Those who say that they come from financially not well-off families are significantly more likely to suffer from emotional and mental health problems than their averagely well-off or well-off counterparts. Whilst it is also important to highlight the differences between females' and males' mental and emotional health, a focus on gender differences in the planning of mental health provision for young people would divert from the main correlation between poor mental health and poverty.

Nevertheless the YLT survey also shows that 16-year old females are much more vulnerable than their male counterparts with regard to the stress factors that they experience that *potentially* may cause them emotional health problems. Two of these factors relate directly to their

school experiences, namely the criticism from teachers and the level of homework that they have to deal with. Thus, the YLT findings challenge the focus of the educational debate solely on academic achievement. A more holistic view on schooling suggests that there should be as much concern on how the existing school structures affect the emotional and social wellbeing of all pupils, alongside their academic achievement.

Finally, the 2009 YLT survey gives evidence that those 16-year olds who suffer from poorer mental and emotional health have significantly more negative attitudes towards, or experiences of, mental health services. These findings suggest that the service provision for young people in relation to their mental and emotional

health needs to be improved. One way of doing this could be by strengthening young people's voices in the planning and delivering of emotional and mental health services. This could significantly reduce barriers of access to such services and could help in the promotion and better understanding of young people's mental and emotional health in general.

As the YLT survey shows, lay people – namely friends and relatives – remain by far the most likely source of support sought by young people with mental and emotional health problems. Arguably, a de-stigmatisation of mental and emotional health issues and awareness raising in this field would therefore benefit the mental health of young people and should at least complement the further improvement of professional health services.

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The **Young Life and Times (YLT) survey** is carried out annually and records the attitudes and experiences of 16-year olds in Northern Ireland. YLT is a joint project of the two Northern Ireland universities and aims to provide an independent source of information on what the young people think about the social issues of the day. Check the website for more information on the survey findings (www.ark.ac.uk/ylt) or call the survey director on 028 9097 3947 with any queries.

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