

Opening Statement to the Seanad Public Consultation Committee on Children's Mental Health in Ireland

June 2017



The Children's Rights Alliance unites over 100 members working together to make Ireland one of the best places in the world to be a child. We change the lives of all children in Ireland by making sure that their rights are respected and protected in our laws, policies and services.

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Ag Eisteacht
Alcohol Action Ireland
Alliance Against Cutbacks in Education
Amnesty International Ireland
ASH Ireland
Assoc. for Criminal Justice Research and Development (ACJRD)
Association of Secondary Teachers Ireland (ASTI)
ATD Fourth World – Ireland Ltd
Atheist Ireland
Autism Network Ireland
Barnardos
Barretstown Camp
Bedford Row Family Project
BeLonG To Youth Services
Care Leavers' Network
Catholic Guides of Ireland
Child Care Law Reporting Project
Childhood Development Initiative
Children in Hospital Ireland
COPE Galway
Cork Life Centre
Crosscare
Cybersafe
Dental Health Foundation of Ireland
Department of Occupational Science and Occupational Therapy, UCC
Disability Federation of Ireland
Down Syndrome Ireland
Dublin Rape Crisis Centre
Dun Laoghaire Refugee Project
Early Childhood Ireland
Educate Together
EPIC
EQUATE
Extern Ireland
Focus Ireland
Foróige
Future Voices Ireland
Gaelscoileanna Teo
GLEN- the LGBTI equality network
Immigrant Council of Ireland
Inclusion Ireland
Independent Hospitals Association of Ireland
Institute of Community Health Nursing
Institute of Guidance Counsellors
Irish Association for Infant Mental Health
Irish Association of Social Workers
Irish Centre for Human Rights, NUI Galway
Irish Congress of Trade Unions (ICTU)
Irish Council for Civil Liberties (ICCL)
Irish Foster Care Association
Irish Girl Guides
Irish Heart Foundation
Irish National Teachers Organisation (INTO)
Irish Penal Reform Trust
Irish Primary Principals Network
Irish Refugee Council
Irish Second Level Students' Union (ISSU)
Irish Society for the Prevention of Cruelty to Children
Irish Traveller Movement
Irish Youth Foundation (IYF)
Jack & Jill Children's Foundation
Jesuit Centre for Faith and Justice
Jigsaw
Kids' Own Publishing Partnership
Law Centre for Children and Young People
Lifestart National Office
Mental Health Reform
Migrant Rights Centre Ireland
Mounttown Neighbourhood Youth and Family Project
MyMind
National Childhood Network
National Organisation for the Treatment of Abusers (NOTA)
National Parents Council Post Primary
National Parents Council Primary
National Youth Council of Ireland
One Family
One in Four
Parentstop
Pavee Point
Peter McVerry Trust
Rape Crisis Network Ireland (RCNI)
Realt Beag
SAFE Ireland
Saoirse Housing Association
SAOL Beag Children's Centre
Scouting Ireland
School of Education UCD
Sexual Violence Centre Cork
Simon Communities of Ireland
Social Care Ireland
Society of St. Vincent de Paul
Sonas Domestic Violence Charity
Special Needs Parents Association
SpunOut.ie
St. Nicholas Montessori College
St. Nicholas Montessori Teachers' Association
St. Patrick's Mental Health Services
Step by Step Child & Family Project
Suas Educational Development
Teachers' Union of Ireland
Terenure Rugby Football Club
The Ark, A Cultural Centre for Children
The Prevention and Early Intervention Network
The UNESCO Child and Family Research Centre, NUI Galway
Traveller Visibility Group Ltd
Treoir
UNICEF Ireland
youngballymun
Youth Advocate Programme Ireland (YAP)
Youth Work Ireland

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Opening Statement

The Children’s Rights Alliance welcomes the opportunity to address the Seanad Public Consultation Committee on Children’s Mental Health Services in Ireland. The Alliance is a national movement uniting over 100 organisations to make Ireland one of the best places in the world to be a child. We change the lives of all children by making sure that their rights are respected and protected in our laws, policies and services.

The Children’s Rights Alliance is deeply concerned about the provision of mental health services to children and young people in Ireland. According to the report launched by Unicef last week, Ireland has the fourth highest teen suicide rate among high income countries.¹ Recent studies suggest that young people in Ireland may have a higher rate of mental health issues than similarly aged young people in other countries.² This has not resulted in a correlated level of service provision.³

All children have a right to the enjoyment of the highest attainable standard of physical and mental health under Article 24 of the UN Convention on the Rights of the Child. The UN Committee on the Rights of the Child has emphasised the serious nature of mental health problems for children and the need to tackle ‘behavioural and social issues that undermine children’s mental health, psychosocial wellbeing and emotional development’.⁴

In our Alliance Report Card 2017 grading the Government on its progress in 2016, mental health received a ‘D-’ grade reflecting the lack of progress on realising children’s rights in the area of mental health. Children’s rights should be respected and should be central to the provision of mental health care.

The Children’s Rights Alliance welcomes the introduction of the Mental Health (Amendment) Bill 2016 which proposes, if passed into law, to introduce a prohibition on the admission of children to adult psychiatric units. However, as recognised by the Seanad Committee, there is a need to not only prevent the admission of children into adult in-patient units but to also address the underlying issues in the Child and Adolescent Mental Health Services which result in these admissions taking place.

In our presentation to the Committee today we will outline our views on the waiting lists for CAMHS, the persistent admittance of children to adult in-patient units, the need to develop an out-of-hours service to respond to the needs of children and young people and the introduction of an advocacy service for children and young people.

(1) Waiting Lists for CAMHS

The Child and Adolescent Mental Health Services (CAMHS) are underdeveloped and demand for CAMHS services continues to exceed availability. In the period January to March of this year, there were 2,818 children waiting for a first appointment with Child and Adolescent Mental Health Services.⁵ Of these 279 were waiting more than a year.⁶

¹ Unicef, Innocenti Report Card 14, Building the Future, Children and the Sustainable , Development Goals in Rich Countries (Unicef 2017) 22.

² Mary Cannon and others, *The Mental Health of Young People in Ireland: A report of the Psychiatric Epidemiology Research across the Lifespan (PERL) Group* (RCSI 2013) 7.

³ Health Service Executive, *Fifth Annual Child & Adolescent Mental Health Service Report 2012 – 2013* (HSE2014).

⁴ UNCRC ‘General Comment No. 15 on the Right of the Child to the Enjoyment of the Highest Attainable Standard of Health (Art 24)’ (2013) UN Doc CRC/C/GC/15 para 38.

⁵ Health Service Executive, *Performance Report January – March 2017* (HSE 2017) 21.

⁶ *ibid.*

In 2016, the Committee on the Rights of the Child expressed its concern about children and young people's access to mental health treatment in Ireland and the long waiting lists for mental health support and recommended the State take action to 'improve capacity and quality of mental health services'.⁷

The Alliance acknowledges there are significant staff shortages within CAMHS which contribute to the long waiting lists of children. Of the recommended 127 specialist teams needed for CAMHS to operate effectively,⁸ only 67 CAMHS teams are currently in operation, not all of which are operating at full capacity.⁹ There are geographic variances in service provision around the country, for example there are no services for 17 year olds in North Tipperary as the HSE has been unable to fill a clinician post.¹⁰

Achieving the full staff complement of CAMHS teams is vital to ensure children and young people are not put at risk by waiting too long for vital supports. Reducing these waiting lists requires ongoing investment in the development of Child and Adolescent Community Mental Health teams.

(2) Children in Adult Units

The UN Committee on the Rights of the Child states that, where placement in a psychiatric unit is necessary, adolescents should be separated from adults, where appropriate and emphasises that any decision on their care should be made in accordance with their best interests.¹¹ In 2016, the Committee expressed concern at the ongoing practice of admitting children and young people to adult wards in Ireland due to a lack of suitable facilities.¹² In particular they highlighted inadequate access to age-appropriate mental health units and recommended the State take action to address the issue by 'improving the capacity and quality of its mental health-care services for in-patient treatment...'.¹³

The Mental Health Act 2001 although only brought into effect in 2006, is outdated and is not in line with Ireland's international human rights obligations, particularly as these relate to children.¹⁴

The Act does not require that children and young people be admitted to age-appropriate mental health facilities. As a result, children and young people are routinely placed in adult facilities.

In 2016, 17.8 per cent of all admissions of children and young people to in-patient mental health services were to adult units.¹⁵ The Mental Health Commission's Code of Practice states that the placement of children in adult wards should be phased out by the end of 2011¹⁶ but it is clear that the non-legally binding Code has not been effective.¹⁷

There is an overall shortage of in-patient beds for children and young people and existing beds are not always being used to full capacity. A Vision for Change recommended that 108 CAMHS bed

⁷ UNCRC, 'Concluding Observations: Ireland' (2016) UN Doc CRC/C/IRL/CO/3-4, para 53 (b).

⁸ Department of Health, *A Vision for Change*, (2006 Stationery Office) (revised as per Census 2011). Health Service Executive, *Fourth Annual Child and Adolescent Mental Health Service Report 2011–2012*, (HSE 2012) 9.

⁹ Minister of State for Mental Health and Older People, Helen McEntee TD, Dail Debates, Topical Issue Debate, Mental Health Services Tuesday 7 March 2017.

¹⁰ *ibid.*

¹¹ UN Committee on the Rights of the Child (2003) *General Comment No. 4: Adolescent Health*, CRC/GC/2003/4, para 29.

¹² UNCRC, 'Concluding Observations: Ireland' (2016) UN Doc CRC/C/IRL/CO/3-4, para 53.

¹³ *ibid.*

¹⁴ Mental Health Commission, *Response to the Law Reform Consultation Paper on Children and the Law: Medical Treatment* (2010) 24.

¹⁵ Minister of State for Mental Health and Older People, Helen McEntee TD, Written answers, Mental Health Services Data, Wednesday 29 March 2017 [415578/17].

¹⁶ Mental Health Commission, *Code of Practice Relating to Admission of Children under the Mental Health Act 2001: Addendum* (MHC 2009).

¹⁷ Health Service Executive, *Health Service Management Data Report, September 2013*, (2013 HSE), 76.

should be operational across the country.¹⁸ However, at the start of the year there were only 66 beds in operation. Since then we have seen a 50 per cent reduction in the capacity in the Linn Dara unit, a state-of-the-art unit in Cherry Orchard, due to staffing issues. Steps need to be taken to ensure that all adolescent in-patient beds are available and units are fully staffed.

A 2013 inspection carried out by the Inspectorate of Mental Health Services on the admission of children to adult units has shown that 83 young people were placed in adult wards on 91 occasions.¹⁹ The basis given for these admissions was that there were no adolescent beds available. However, further inspection showed that in 64 per cent of these cases at least one adolescent bed was available on these occasions and sometimes up to 10. It also found that 21 per cent of the young people were in adult units for more than 10 days.²⁰ This led to a 2015 recommendation by the UN Committee on Economic, Social and Cultural Rights to 'take immediate measures to separate child patients from adults in psychiatric facilities'.²¹

The Children's Rights Alliance is clear that the State needs to invest in the provision of child and adolescent in-patient beds and the requisite staff as a measure to ensure that young people are not placed in adult units.

We also recommend that in tandem with investment in primary care services, emergency out-of-hours community supports and investment in the provision of adolescent beds, the Mental Health Act 2001 should be amended to prohibit the placement of a child under 18 years in an adult in-patient unit, save in exceptional circumstances where it would be in his or her best interests to do so. The Bill should put in place a comprehensive definition of what constitutes best interests and what oversight will be put in place to ensure that children's rights are respected. The Children and Family Relationship Act 2015 contains for the first time ever in Irish legislation a comprehensive definition of what should be taken into account when determining best interests.²² This should be considered and adapted for legislation seeking to amend to the Mental Health Act 2001.

(3) Advocacy Service for Children and Young People

An independent advocacy and information service exists for adults with mental health difficulties,²³ but there is no equivalent national, independent service for those under 18 years, particularly those using in-patient services. This means that a child cannot access their rights to information,²⁴ to be heard in decision-making,²⁵ and to participate fully as service users in mental health service provision.²⁶

The UN Committee on the Rights of the Child has recommended establishing a mental health advocacy service for children that is 'accessible and child-friendly'.²⁷ We recommend the establishment of a national specialist independent, advocacy service for all children under 18 years who are engaging with mental health services.

¹⁸ Department of Health, *A Vision for Change*, (2006 Stationery Office) 88 (revised as per Census 2011).

¹⁹ Inspectorate of Mental Health Services, *Child and Adolescent Mental Health Services 2013: Admission of Children to Adult Units 2013* (Mental Health Commission 2013) 1.

²⁰ *ibid* 5.

²¹ Committee on Economic, Social and Cultural Rights 'Concluding observations on the third periodic report of Ireland' (2015) UN Doc E/C.12/IRL/CO/3 para 22.

²² Children and Family Relationship Act 2015 s 63.

²³ Irish Advocacy Network <<http://irishadvocacynetwork.com/wp/>> [accessed 2 May 2017].

²⁴ Article 17 UN Convention on the Rights of the Child, A/RES/44/25 (20 November 1989).

²⁵ *ibid* Article 12.

²⁶ UN Committee on the Rights of the Child (2009) General Comment No. 12: The right of the child to be heard, CRC/C/GC/12, para. 36.

²⁷ UNCRC, 'Concluding Observations: Ireland' (2016) UN Doc CRC/C/IRL/CO/3-4, para 54 (c).