British Psychological Society: Division of Clinical Psychology NI

07.11.2017

Opening address at Annual Conference 2017 DCP Northern Ireland

Changing Times: Changing Perspectives- Psychological Well-Being for All.

**Introduction**

Thank you for inviting me open this conference today. My name is Mairead McCafferty and I am the CEO of the Office of the Commissioner for Children and Young People. Also known as NICCY for short. Commissioner, Koulla Yiasouma sends her best wishes.

**Role of NICCY**

Before I make some reflection on the topic area of today’s conference - **‘Changing Times, Changing Perspectives, Psychological Wellbeing for all’,** I would like to begin by explaining the role and function of NICCY.

The Office was established in 2003 and the founding legislation sets out our primary aim to ‘safeguard and promote the rights and best interests of children and young people’. To achieve this overarching aim we have a range of duties and powers, these include:

* Monitoring and advising Govt in relation to CYP’s rights;
* Holding Govt and relevant authorities to account;
* Raising awareness of children's rights
* Reviewing the adequacy and effectiveness of law, practice and services for CYP;
* Issuing guidance and advice;
* Bringing or assisting in legal proceedings;
* Addressing breaches of CYP’s rights through our casework function; and
* Undertaking Investigations.

As well as taking account of the views of children and parents / carer givers in exercising the powers of the Office, the legislation requires us to have due regard to the United Nations Convention on the Rights of the Child.

The Convention sets out the minimum standards of State Parties for children's rights across all areas of their lives. These include civil, economic, social protections across the 42 rights set out within it including health, education and welfare provisions.

These rights are also not optional, as Rights Holders Children are afforded these rights irrespective of their circumstances and national identity.I am particularly emphasising this point to you today because I understand that a focus of the conference is on making psychological services accessible to newcomer children, dispersed families and children from diverse backgrounds.

The UNCRC also recognises that children's lives cannot be compartmentalised and must be understood as a whole, this notion of the ‘whole child’ should be the building blocks of all legislation, policy and practice.

The process of achieving a holistic, ‘whole child’ approach is something I know we all understand the value of and strive to include in our day to day engagement with the young people we work with. ‘Joined up working’, ‘interagency collaboration’ or ‘multidisciplinary working’ are all terms ‘used’ in policy making. Unfortunately however, all too often young people’s needs continue to be dealt with in a compartmentalised way.

There is a need for greater collaboration and co-operation between child and adolescent mental health services and key referral and service delivery agencies such as GPs, A&E depts, Social Services, Education and NGOs.

There is a growing body of research on the long-term impacts which experiences and events during childhood have on a person’s life chances and outcomes. Adverse Childhood Experiences (‘ACEs’) such as abuse, neglect or dysfunctional home environments have been shown to be associated with the development of a wide range of harmful behaviours and are linked to higher rates of both physical and mental health problems. The identification and recognition of the range of risk factors and adverse experiences highlight the need for joint care planning and co-ordination across a range of agencies which include social services, adult and child mental health services and education. Professionals, like you, who work with children and young people, often describe frustration at the lack of co-ordination, communication and integration within and between these key public services.

We all know that co-operation is the best route to sustained positive outcomes for children and young people. The Children’s Service Co-operation Act, is a new piece of legislation which we hope can support professionals to achieve this way of working and I will refer to this again before I finish.

At an event earlier this week on ‘ACEs’ Sean Holland lead Social Worker in the Department of Health announced that his Department is working on a social work anti-poverty strategy to address one of the most significant factors impacting on children's long term life chances.

Turning to NICCY we are currently working on a number of key priority areas – some of which include:

1. **Child poverty:** Poverty in NI has been persistently stubborn and is predicted to rise further due to austerity and welfare changes The recent IFS report states that relative child poverty will rise by 7 percentage points up to 2022 – 75 % of which is due to benefit changes (Universal Credit, 2 child restrictions etc which are predicted to affect 400,000 children across the UK). We know that poverty has a severe impact on every aspect of children’s and young people’s lives including their health and educational outcomes.
2. **Educational inequalities:** NICCY has done extensive work in this area (refer to website for papers on this); there are too many of our children not fulfilling their potential in education - often because the additional challenges they face are not being fully addressed nor their needs met – such as socio economic disadvantage, mental ill health, lack of resilience and coping skills. **All** children and young people have a right to be enabled to develop their personality, talents and abilities to the full in line with Article 29 of the UNCRC
3. **Mental Health and Wellbeing of Children and Young People:** Children’s mental health receives less than 8% (7.8%) of the mental health budget, this is despite the fact that there is strong evidence that adolescent years is a peak time for the onset of mental health problems. To fully realise a child’s or young person’s good mental health, a comprehensive approach and suite of services is required to promote it and to identify and respond to need. It is essential that a ‘re-formed’ NI Executive prioritises children’s and young people’s mental health. This includes demonstrating greater strategic planning and investment in this area in order to embed consistency in the availability and quality of services from prevention and early intervention to specialist services.
4. **The Legacy Impact of the Conflict:** There is also now a growing acknowledgment of trans-generational impact of the conflict in NI where trauma and its impact is transferred from one generation to the next. It has been estimated that over 40% of children growing up in Northern Ireland are living in families who have ‘direct’ high or moderate adverse experience of the conflict[[1]](#footnote-1). Again, it is crucial that this form of ‘trauma’ is also effectively addressed. In recognition of the importance of this, we have added the **‘legacy of the conflict’** and its specific impact on children and young people’s rights to our key priorities and are involved with CVS in research in this area.

**Mental Health Review**: NICCY is currently carrying out a Rights Based Review of Mental Health Services for Children and Young People - a central focus of which is capturing their experiences of having had or trying to get help for their mental health. You can find out more about this work by going to the ‘Speak Your Mind’ page of the NICCY website. Early next year we will be engaging with professionals on the emerging findings coming from this Review and it is hoped professional bodies like yours will take part in this.

As the title of this Conference suggests, we are living through ‘changing times’-

Many of us have very grave concerns about the potential negative consequences of ‘Brexit’ on our society, but particularly children and young people who are inherently more vulnerable due to their age. Many of us our unsure of what these ‘changing times’ mean for NI society, economy, our cultural identity but also our public services - and in particular our health services. This includes concerns being raised by the children and young people we talk to who do not feel they are being listened or have a say in these matters, but will have to live with the consequences of decisions being made. Last week NICCY along with the Ombudsman’s Office in the RoI hosted a Young People’s ‘Brexit’ event to discuss their key concerns. Cross border health issues were one of the main areas they wished to talk about.

These concerns are compounded by the uncertainties we are facing from the current political instability in NI, including the impact current welfare reforms and policy changes are having and will have on the numbers of families with children pushed into poverty. Poverty, particularly persistent poverty, is one of the clearest root causes of poor mental health in our children and young people.

There are specific groups of children and young people at particular risk of having poorer outcomes in all aspects of their lives including poorer psychological wellbeing. These include looked after children, traveller children; children from ethnic minorities, newcomer / separated or unaccompanied children; children with a disability, children with additional needs and children from disadvantaged backgrounds - all young people who face complex and multi-faceted challenges and needs which cross professional disciplines and boundaries. It is also these children who are most likely to be in need of support to address social, emotional, mental, physical and educational needs. I am pleased that the focus of today’s conference recognises the need to better identify and support diverse groups who will benefit from psychological services and how these services can become more accessible to them.

It is important we acknowledge the significant positive changes made to child and adolescent mental health services in the last 10 years. In the current work NICCY is doing on mental health however, I have also been struck by the limitations in services, treatment and therapies available to young people - often availability and accessibility are not reflective of need but rather based on where young people live and what services are available there, how well resourced or busy the service is, service criteria or thresholds which have been set and whether they are over or under 18 years old.

I have also been surprised and saddened at the differing ways in which children and young people with disabilities are provided with mental health support as it seems to reflect ‘administrative silos’ or measures such as IQ, rather than the needs of children. It is important to see all children as ‘children first’ i.e. put the child at the centre of decision making and provide services to meet their emotional and mental health needs, whatever their circumstances. We will be drawing out these findings, along with others, in our final report that is due out next year.

I also note that a topic area for today’s conference is on the impact of ‘trauma’ (referred to earlier in the context of the legacy of NI’s conflict). I welcome the focus on how we identify and respond to ‘trauma’, as it is only through ongoing learning and bringing innovative and creative perspectives to the table that we will advance this field of work.

We agree that there is a need to look at the degree to which vitally important psychological services are accessible to newcomer and refugee children. I would also add separated or unaccompanied children to this list. These are an extremely vulnerable group of migrant children we see in NI who are likely to have experienced considerable trauma in their home country and during their journey to NI. There are very challenging practical and cultural factors that need to be addressed when supporting young people for whom NI is an unknown and unfamiliar place. It is also important we recognise that the trauma experienced by this specific group of young people will be significantly different to that experienced by other groups of young people.

NICCY is very proud to have been involved in establishing a guardianship service for separated young people through the Human Trafficking and Exploitation (Criminal Justice and Support for Victims Act (Northern Ireland) 2015. This includes ensuring that they have access to a Guardian who will properly represent their best interests in all matters affecting them, who is informed and present in all planning and decision making processes, including those relating to immigration and appeal hearings and care proceedings, and who has the necessary expertise in all areas including in relation to the child’s legal, health and psychological needs.[[2]](#footnote-2)

In response to the second half of today’s conference title ‘…Changing Perspectives’, I would say that one of the most significant parts of key International Conventions like the UNCRC is that they can keep us grounded in key fundamental human rights principles at times when social, economic, political, cultural and civic uncertainly prevail.

This includes the 4 ‘guiding principles’ or ‘cornerstones’ of the UNCRC which must be in places for all other rights to be realised such as health, education, protection from violence and access to adequate standard of living.

These guiding principles are:

**Article 2** protects children from all forms of discrimination thereby recognising the child’s right to the best possible health and access to health services without discrimination

**Article 3** places an obligation on the state to ensure that the best interests of the child are assessed as a primary consideration in all actions affecting the child. This principle must be adhered to in all health related decisions concerning individual children or groups of children.

**Article 6** the right to survival and development is a fundamental right which is also the basis for Article 24 which upholds the right to the highest attainable standard of health and to facilities for treatment and rehabilitation.

Finally **Article 12** focuses on the right of children to express their view in all matters concerning them and for this to be given due weight in accordance with their age and maturity.

Children’s rights govern the work that our Office does but it must also be the guiding framework which underpins the work of everyone whose role affects the lives of children and young people. That includes everyone in this room today - children’s rights are protected, promoted and practically realised on the ground by professionals like you everyday.

I want to conclude by coming back to the legislation that I referred to earlier - the Children’s Services Co-operation Act (Northern Ireland) 2015. Many of the issues that children and young-people face in Northern Ireland require a cross-departmental and cross-agency approach - this includes young people’s mental and emotional wellbeing. NICCY is hopeful that the statutory obligation on Government Departments, Children’s Authorities and Service Providers to co-operate through this Act will ensure that deeper, societal issues which impact on determining successful outcomes for all children will be more fully addressed. We also wish to see the statutory duty to co-operate, allowing for cross-departmental and agency target setting under the PfG, improve the lives and wellbeing outcomes of children and young people across Northern Ireland including those in relation to their mental and emotional health.

Thank you again for the opportunity to address the conference this morning. I have no doubt that the programme today will provide interesting and thought provoking discussions.

1. CVS 2015- Towards a Better Future. [↑](#footnote-ref-1)
2. Service is due to be in place by 2018 [↑](#footnote-ref-2)