PARLIAMENT STREET

partnership in policy

A 21ST CENTURY APPROACH TO MENTAL HEALTH

Compiled By Danny Bowman, Mental Health Spokesperson for Parliament Street

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Foreword

Danny Bowman, *Mental Health Spokesperson at Parliament Street*

At Parliament Street we believe mental health is one of the biggest issues of our generation affecting many people across the United Kingdom. We have been looking at innovative ways to forge what we call 'a 21st century approach to mental health' trying to outline key issues and find solutions to the problems.

Over the past 12 months Parliament Street has rolled out different initiatives to identify what the key issues are for professionals who come into contact with mental health every day and individuals who suffer from mental illness.

We held two mental health debates in the Houses of Parliament in March to openly discuss the barriers many professionals and people experiencing mental ill health feel are stopping progress from happening.

A 21st century approach must look to modernising an approach to mental health by revolutionising the way we treat mental illness. We must look to a range of initiatives that could reduce the pressure on our NHS. We must call on the government to appoint a minister for mental health who can lead the way for a 21st century approach. They can call for existing provision to be creative as well as promoting and encouraging new ideas and new models of care. New ideas currently emerging include: innovative on line therapies, support groups, websites and blogs. There are some excellent charitable organisations that involve people in the life of their communities and offer support, care and inclusion, helping to combat discrimination and stigma.

This report paper outlines the growing burden on public services and makes recommendations for future progress. The Police service and A&E Departments appear to be under significant pressure. Through our research we have discovered that the police are dealing with an astronomical amount of incidents involving mental illness and A&E Departments in England did receive more than a 100,000 admissions between January 2016 and January 2017, because of a mental health crisis or self-harm.

There is a need to modernise our approach to mental health in schools with more students suffering from an array of mental health disorders and who are not able to get the level of support needed from their educational establishment. Teachers often feel ill-equipped to deal with mental health concerns in their students.

This paper encapsulates the opinions of professionals from a range of backgrounds, including those individuals with lived experience of mental illness. It makes recommendations for moving forward and encourages the idea of an invest to save approach that will produce long lasting benefits for generations to come.

Thank you to everyone who made a contribution to this report.

A Minister for Mental Health

Parliament Street believes that to have a 21ˢᵗ century approach to mental health we need a Minister for Mental Health in the ruling government. This will not only help to implement key legislation that will support many people suffering from mental illness but also show that the new government is taking mental health seriously. Mental health affects the majority of governmental departments including The Department for Work and Pensions, Department of Education, the Home Office, Ministry of Justice, Department of Health and the Treasury. In Education young people suffering from mental health problems do not feel that they have the support to succeed.In the welfare system a sizeable portion of people suffering from mental health problems are finding themselves without a route forward.The police are struggling to deal with mental health and according to our research there were over 200,000 incidents in 2016.In the NHS long waiting times for treatment means help is simply not at hand and mental health alone is costing the economy £105 Billion a year (Young Minds, 2017.) It is simply too big an issue not to have its own minister. That's why Parliament Street is calling for the new government in power to show their commitment to mental health and implement a ministerial position for mental health. This would give mental health the voice it deserves in Parliament.

A dedicated Minister for Mental Health will help in ending this cruel social injustice in the 21ˢᵗ century.

This recommendation has been backed by many professionals including Dr Rob Wilson PhD and most notable by Alastair Campbell, former Director of Communications for Tony Blair who personally suffered from mental health problems.

Alastair Campbell,*former Director of Communications for Tony Blair and mental health campaigner*

"I comprehensively back Parliament Street's recommendation for the implementation of a Minister for Mental Health in the next Government. This will not only hold the government to account on mental health but help in pushing key changes through , that will support many people suffering from mental illness across the United Kingdom."

Investing to Save Money and Lives in Mental Health

At Parliament Street we argue that the best way to reduce the cost of mental illness as well as improving mental health provision is by using an Invest to Save Model. We believe by investing in mental health services and spending more money on training a new generation of mental health professionals.

The nursing bursary has recently been abolished and already there has been a 25% reduction in nursing applications to universities.

This is affecting the whole health and social care sector with many areas of the sector struggling to recruit qualified staff effecting vulnerable people suffering from mental illness and dementia.

Firstly we must look at the overwhelming cost mental health has on the economy projected at £105 Billion per year (Young Minds, 2017). This encapsulates the growing cost of under investment in mental health provision which leads to higher costs to the economy and a reduction in life chances for those suffering from a mental illness.

Not having sufficient mental health provision in the United Kingdom is leading to other public services having to deal with mental health crises such as the Police and A&E Departments outlined in this paper.

You could argue that the lack of investment in mental health provision is leading to younger people dropping out of education, more people with mental health problems ending up on welfare benefits or ending up in our prison system which leads to even higher costs for the tax-payer. Recent research from 2014 by the (OECD, 2014) found that up to 370,000 people move onto disability benefit every year with the leading cause being mental ill-health costing the economy a substantial amount of money.

The human costs to people and family's in our society is great and the impact on future generations and productivity of our country extremely significant.

The government must make substantial investment which is ring fenced and targeted to significant areas of concern. People with mental illness need to be able to access effective care, treatment and support in a timely way if we are to begin to address the social and economic costs to our society and the growing strain on our public services.

The Invest to Save Model in Mental Health could see a short term investment deliver long-term savings and improve life chances for many people in our society.

Police and Mental Health

__Matthew Scott,__Police and Crime Commissioner for Kent

Mental health was at the forefront of my campaign to become Kent's new Police and Crime Commissioner. Why? Because for all the other challenges that modern day policing faces, responding to mental health incidents has now become one of the biggest pressures on policing resources. Forces across the country report that it is taking up substantial amounts of officers' time as they are being deployed to incidents.

It is now estimated that it takes up around one third of all Kent Police time now. This is not sustainable for policing, but also not fair on the individual, who might be in crisis and be alarmed by the presence of a Police uniform, or being detained in a Police cell.

Where there is a risk of threat or harm, it's absolutely right that the police are involved. In other circumstances they should not act in place of other services that should have been provided. I believe such instances add to the stigma, still sadly associated with mental health, that we have done so much to address.

Kent Police and I are already taking action. It has counsellors from the mental health charity Mind in the control room that have been funded to talk to vulnerable members of the public phoning Kent Police, where appropriate. This has allowed call handlers and frontline officers more time to deal with crime. I have continued to fund this initiative and am looking at way of expanding it.

I have also announced a £250,000 fund for projects that will reduce demand on Policing due to mental health. The NHS won't be able to access this, nor will it replace funding for statutory services. However, community based initiatives that help Officers and Staff ensure that people get the right support, from the right person, at the right time, are being asked to apply.

But we need to go further, particularly with new legislation banning the use of Police cells as a safe place for a child in mental health crisis under section 136 of the Mental Health Act, and for them only to be used in an "exceptional circumstance" if it is for adults. This will mean that section 136 pathways in the NHS need improving and strengthening and for there to be more places of safety. At present, much of the time Police spend with a person in crisis is waiting for a suite to become available or waiting in a health-based setting, like A&E. That has to change.

I am keen to see continued the excellent work of Inspector Michael Brown OBE, the College of Policing Lead, and Force Leads across the

country being applied with regards to improving training of Officers and Staff. They are not mental health professionals, and should not be treated as such. But it is important to raise awareness and train them so that they feel empowered to make the best decisions for people in mental health crisis.

It is also important to acknowledge the increase in Officers and Staff themselves suffering from mental health issues. They are nearly four times more likely to take a week off work for mental health rather than a physical health issue, with anxiety and depression the top two reasons for health related leave. In addition, we are seeing a rise in the number of Officers and Staff suffering from PTSD as a result of the incidents they have to respond to. The Police Dependents' Trust research in this area is powerful, and needs to be acted on.

Responding to mental health incidents is a substantial issue and there will always be times where it is appropriate that a police response is dispatched. My ambition over the next four years is to find ways to reduce the amount of time Police spend responding to incidents of mental health crisis, whilst ensuring that those in need of help get the support they need from the appropriate service.

The NHS and Mental Health

Dr. Rob Willson, *Cognitive Behaviour Therapist, author and Chair of The Body DysmorphicDisorder Foundation.*

I've written a few self-help books, four of which with one of the UK's leading consultant psychiatrists. I'm also a member of our society and see the impact of mental health problems all around me. The social and economic cost of mental health problems, whether we are aware of it or not, is being felt by all of us.

As a human with family, friends and colleagues I have also seen numerous people I care about in my personal life be affected by a mental health problem. It's hard, of course, to write about one's experience of mental health services in the UK without running the risk of over generalising. However, to sum up my impression, I would say this: Inconsistent in quality, inadequate in quantity and for too many people, not easy enough to access.

I've been involved in helping people with mental health problems for over 20 years and I've heard of some incredibly positive experiences of as well as some that have been truly

appalling. In my experience getting good mental health care can be a bit of a lottery. At times it's hard not to feel pessimistic about mental health services when hearing about cuts to funding, but there are also sources of inspiration. The growth of people being prepared to blog or tweet about their recovery is incredibly helpful. The internet is becoming a far richer source of good information to help people understand their problems, reduce stigma, and find the right help.

There are some hugely dedicated people out there, researchers, clinicians, people in the emergency services, volunteers, campaigners. People who are determined to help and are working to improve mental healthcare.

Political pointing of the finger in the direction of family breakdown as the target for improving the nation's mental health seems, at best, to be a naïve oversimplification of the range of complex causal factors of mental health problems. At worst it seems like misdirection, given it is not at all helpful for solving the mental health problems of people who already have them. This needs significantly more resources and needs them now.

Ultimately as a country we need to come to terms with the reality that mental health problems are common, have always been common, and always will be common. Our brain is complicated and can be sort of tricky to manage. It's inclined to focus on threat (in an attempt to keep us safe) which can trigger anxiety. It's also inclined to shut down a bit and enter its

'conservation' mode (the inactivity and withdrawal of depression) if there is an absence of positive reinforcement and/or overload of adversity. This is a reality of how we have evolved and will never change. We need to understand better how to keep ourselves mentally fit, flexible and healthy. We need to understand what we can do for ourselves if we find ourselves mentally unwell. We also need to be able to readily access the correct, effective treatment when a mental health problem becomes more serious.

Undoubtedly greater use of technology, the internet and apps will help people identify their mental health problems access the correct advice more readily. However good, evidence based treatments will always be needed for serious problems and access remains far too difficult for many individuals.

IAPT is a worthy attempt to meet the need for effective psychological treatment, but does not go far enough. Many patients need a large number of sessions of very specialised psychological therapy in order to recover. Provision of specialised services must increase, and wait lists of over a year must become a thing of the past. Parity with physical healthcare for mental health services is still a long way from being a reality and must be a priority if we are to realistically affect the huge personal, social and economic burden of mental health problems.

Welfare and Mental Health

James Downs, *University of Cambridge Student*

As a sufferer of mental illness I have needed some support from the welfare system in this country to maintain my recovery. I have suffered from anxiety, an eating disorder and obsessional compulsive disorder which has been very difficult to deal with in my daily life.

I currently receive Personal Independence Payments (PIP) to support me in my day to day life but also due to the lack of mental health provision in the National Health Service (NHS) I use it to pay for private therapy. Due to the government's recent decision to bring in new changes to Personal Independence Payments (PIP) I worry that I will be left without the vital financial support I need. This loss of financial support could lead to me having a relapse and becoming more unwell. I believe this could lead to a larger amount of expense to the public purse in the long term. I categorically believe that keeping certain benefits in place for people with mental health problems is a good investment increasing the possibility of more of them gaining independence, social inclusion and dignity.

I am really concerned not just by the changes being implemented in the benefits system against people who are suffering from mental illness but some government officials flippant approach to these changes namely George Freeman MP (Head of Number 10 Policy Unit) who stated benefits should only go to "really disabled people" not those ""taking pills at home, who suffer from anxiety."

In the welfare system there seems to be a lack of consideration for psychological issues with the approach that if someone can physically walk down the street the they're fit for work not taking into account the psychological impact that walking down the street has on the individual.

My recommendations from personal experience would be for the government to rethink their decision regarding Personal Independence Payment changes and look to develop a more person-centred approach to our countries welfare system. Finally we need to find parity of esteem in our welfare system to stop the denouncing of mental illness as a real problem.

James Downs is 27 and from Cardiff. He has experienced a major eating disorder from the age of 16 and although now well into recovery, he faced many barriers and a 6 year wait to access specialist treatment.

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The Education System and Mental Health

Lynn Crilly, *Award-winning counsellor*

The current statistics in people of all ages speak volumes about the ever-increasing need to raise more awareness and understanding about mental health. Encouraging children to speak openly about their feelings from an early age as their brain is developing should be every bit as part of the national educational curriculum as Mathematics and English.

However, talking about mental health and understanding it are two separate issues. What the education system appears to be deficient in is the overall lack of appropriate training, education and resources for those working with children and young adults. Identifying a mental health problem in an adult can be difficult enough but recognising it a child is even more complex, often due to the lack of open communication and understanding.

Social media plays a significant part in today's society too and some children are exposed to the internet earlier than others. Whilst the internet can be a very positive and powerful tool it can also be very damaging to a child with low self-esteem and low confidence, which can then lead to depression and other mental health issues.

The prospect of opening up and talking about mental health in schools may seem a daunting prospect but the message couldn't be any clearer for children - that mental illness is nothing to be ashamed of, it's a recognised medical condition, just like measles or mumps, and just like these physically visible conditions, most are manageable and treatable once recognised. Early intervention of a mental health problem is pivotal, as once a mental illness develops and becomes a regular part of a child's behaviour, the more difficult it is to treat.

Teachers, carers and professionals working with the young should be equally responsible and qualified in detecting the signs and indicators as early as possible. Enabling children to talk openly through arts, sports and drama is great starting point, along with providing the age-appropriate life skills, not just within a school environment but also post-education and beyond.

It's time to normalise mental health once and for all...and that can only start at one place, at the very beginning, educating the young in schools all over the UK.

Megan Garvey, *BSc Hons Psychology, MSc Clinical Psychology*

Throughout the educational system, mental health is unquestionably a prominent issue; an issue affecting many but discussed by none. Generally speaking, mental health is not sufficiently targeted within the educational system, is underestimated, underfunded, and most likely underdiagnosed in young, vulnerable individuals. From my personal experience, attending school from the ages four to eighteen, mental health was not something that was included in the curriculum, or even mentioned in any aspect of school life. Speaking to others, it appears this was the case in most educational establishments.

It was only when I reached sixth form, and chose to study Psychology, that I first came across mental health as a concrete concept. Even then, mental health was not the dominant theme, with social and cognitive psychology being taught the most frequently. This continued throughout my undergraduate Psychology degree, with mental health seldom the focus of the course modules. Only now, completing my Master's degree have I really gained a true insight into mental health, and its implications within society. Although every individual will bear a different experience, I do not believe that anyone should have to progress to this level of education before being properly educated about one of the biggest issues facing society today.

Within the school environment, academic support is widely available, similarly support for physical illness and disability. Yet there is little to no support for individuals who struggle with their mental health. Although progress had been made regarding stigma and attitudes towards mental health in recent years, it is still very much a taboo subject. Individuals would prefer to suffer in silence than admit to their family, teachers and peers that their mental health is not as it should be. Yet physical illness is discussed almost daily, and most individuals would not hesitate to disclose they had been unable to attend school due to the flu, or were suffering from a headache, for example. Indeed, physical illness is largely met with a sympathetic reaction and mental illness with uncertainty, avoidance, disbelief, and even fear. The school environment is designed to nurture crucial development, including the difficult transition through adolescence. It is therefore essential that educational establishments are equipped to deal with mental health, and promote an environment where open discussion of mental health is regarded as positive and helpful.

It is also interesting to note, that whilst schools encompass subjects to specifically target social issues, such subjects do not target mental health

(one of the greatest issues society faces this modern day). Physical, social and health education (PSHE) is regularly incorporated into the school curriculum, and targets issues such as bullying, sexual education, racism and alcohol and drug abuse. The subject is commissioned to promote positive lifestyle choices, yet does not educate on mental health or provide help seeking information. Individuals are simply not equipped to deal with any mental health problems they may encounter, meaning they cannot identity possible symptoms, cannot confide in the appropriate people, cannot seek help and ultimately cannot receive treatment.

It is therefore, of vital importance that the government aim to introduce measures addressing mental health in schools, and further education. Firstly, mental health needs to be introduced into the school environment and an appropriate age; students young enough that it is likely they have not yet experienced any mental health problems, and old enough to have the capacity to understand the concept of mental illness, and approach it with compassion and empathy. Mental health needs to be introduced as part of the curriculum; it is probably most viable to do this through PSHE, and other subjects addressing social issues. Funding also needs to be allocated to the provision of trained professionals, equipped to provide support to students suffering from mental health problems. Schools, and educational institutions alike, could also benefit from parental and community involvement when addressing mental health; a supportive school environment cannot be fully successful without a supportive family environment.

By providing the adequate education and resources, mental health stigma can be greatly reduced, and sufferers can seek the support and treatment they require. Teaching should not negatively differentiate mental health from physical health, and the concept of 'abnormality' associated with mental health should be strongly discouraged. Indeed, even the term 'mental health' could benefit from an agreed disuse. Undeniably, the word 'mental' bears connotations of danger, abnormality and aggression, concepts that are completely unrepresentative of the vast and ever growing number of individuals experiencing *common* and somewhat *inevitable* struggles with their own psychological wellbeing.

Ashley Curry from Cambridgeshire is an expert by experience of Obsessional Compulsive Disorder, a NHS keynote speaker and helps to advocate specialist training for therapists.

"I believe that a form of mental healtheducation should be part of the curriculum, from the first year at secondary school. It would give great insight/education into how mental health can manifest itself on a person, and how it can affect others that live with them and care for them on a daily basis. It would also enable possibly earlier intervention, if knowledge is there from a young age, which would equal less time for certain mental health problems to become deeply

ingrained, less lost years and less financial impact on all those who are involved with. It would and could also help reduce stigma and discrimination, as people's knowledge on the impacts it can have would possibly be reduced"

Research by Parliament Street

Over the last 12 months Parliament Street has undertaken research into two key areas where mental health has been identified as a main concern. The Two areas of research looked at the relationship between police incidents and mental health with the second piece of research looking at how many admissions A&E were receiving due to a mental health crisis or self-harm.

Police and Mental Health Research

Parliament Street did research to find out how many incidents the police had to deal with marked with the 'Mental Health' flag. The results were staggering with over 300,000 incidents recorded by police forces in the United Kingdom. The police force with the highest number of incidents was South Wales Police recording 38,712 followed by Nottinghamshire Police with 19,973 and Police Service Northern Ireland which recorded 19,668.

(See Appendix)

Comment from our Mental Health Spokesperson

"These findings reveal the shocking numbers of mental health issues currently being dealt with by police forces across the country. It's time to recognise that Britain needs a better funded strategic plan to ensure people who are suffering with mental health problems are properly cared for by specialist health services"

A&E Departments and Mental Health Research

Recent research by Parliament Street identified that there were a significant number of admissions into Accident and Emergency departments in England due to a mental health crisis or self-harm. The research provided from 62 Trusts showed that between the 1st January 2016 and the 1st January 2017 there were 169,970 admissions.

The highest number of admissions came from Blackpool Teaching Hospitals NHS Foundation Trust who received 10,545 admissions followed by Sandwell and West Birmingham Hospital NHS Trust with 6,573 and University Hospital Southampton NHS Foundation Trust with 5,433.

(See Appendix)

Conclusion and key recommendations

In the past year Parliament Street has done research in to key areas where mental health is an issue, we have listened to professionals from across the United Kingdom including Clinical Psychologists, Alastair Campbell, Police and Crime Commissioners (PCC's,) Mental Health Nurses, Counsellors, University Students and people who have experienced mental illness gaining a large amount of insight into the barriers all areas of mental health are facing. With that said,as well as outlining key trends that have appeared in each section covered in this report, we have identified some key recommendations for government and society. These recommendations have been formulated from what we have heard from professionals, students and people who have been directly affected my mental ill health.

The NHS and Mental Health

Key Themes

From our research and conversations with professionals and service-users there seems to be key themes that are being repeated time and time again. If we are going to create 'a 21st century approach to mental health, many believe we need to address these barriers first.

One of the key areas of concern seems to be the absence of quality mental health provision available, with service- users and professionals defining NHS mental health treatment as a "postcode lottery." It is becoming extremely prevalent in rural communities such as in the Highlands, in which many service-users have to travel great distances to receive any sort of quality and meaningful mental healthcare. It seems that the chance of an individual receiving quality mental health provision is defined by the geographical location in which they live and for some individuals they find themselves becoming more unwell due to this. One must question how much this is affecting the British economy.The lack of quality mental healthprovision is subsequently leading to vulnerable people having insufficient support, care and treatment. It is impacting on their education,employment, life and wellbeing and in many instances is resulting in an individual ending up on welfare or even ending up in prison.

We have heard from professionals that they believe the "over simplification" of blaming bad mental health on social problems such as family breakdown as "naïve"

echoing that whilst social problems can be a factor in mental illness there are many other contributors and every person is different.

There has been a large call for the need for the internet to play a larger role in providing information and support through blogs, websites and tweets. With others specifically calling for Apps to play a bigger role in the treatment of mental illness but it is important to stress that although the internet can be useful for information and directing people to the correct support Dr Rob Wilson PhD reminds us that 'evidence based treatments will always be needed for serious problems and access remains far too difficult for many individuals.

It has been continually outlined by professionals that the social and economic cost of mental illness of £105 Billion (Centre for Mental Health, 2017) can only be reduced by an 'Invest to Save Model' in the NHS with many conveying the need for billions of pounds worth of funding which they and Parliament Street believe would reduce the high social and economic costs of mental illness.

It is important to outline our research that found that there were over 100,000 admissions to A&E because of a mental health crisis or self-harm related incident. You could argue this shows that the lack of investment in prevention, early intervention, immediate response and crisis care is seeing other areas of our National Health Service left to deal with people who reach crisis point.

Recommendations

- We are calling on the NHS to **invest more money into online support** which we believe will reduce the burden on mental health services and could play a vital role in prevention and early identification of a mental health issue.

- **De-centralise certain areas of mental health provision** to make sure everyone can access quality mental health support regardless of their geographical location putting an end to the 'postcode lottery' of past years.

- **Invest to save in mental health** raising the amount of ring-fenced investment in mental health every year from the beginning of the next parliament.

- **Ring-fence all money for children and adolescent mental health services** so the money goes where it is supposed to and is not used by Clinical Commissioning Groups to plug holes in other areas.

The Police and Mental Health

Key Themes

Over the past couple of years there has been a large surge in the number of mental health incidents the police are dealing with. People involved in the police force and people with mental health problems believe that the police should not be dealing solely with people in acute mental health distress.

In this report we heard from Matthew Scott, Police and Crime Commissioner for Kent (PCC) who has been doing some fantastic work in this area to try and reduce the amount of police time spent dealing with mental health crises; including his announcement of £250,000 for projects helping to reduce the burden on the police. He conveyed that about a 1/3 of police time in Kent was spent dealing with mental health which he said was 'unsustainable for policing.'Mr Scott has outlined certain initiatives that have helped Kent Police including people from the mental health charity Mind spending time in the control room allowing police call handlers to deal with more crimes.

A common theme outlined by Mr Scott is the need to improve and strengthen the section 136 pathways so that there are more places of safety available stating that most of police time dealing with a mental health crisis is spent waiting for a suite to become available or in a health based setting.

Police officers and staff working in the police do an incredible job protecting us but it is important to emphasize that they are four times more likely to spend a week off work for a mental health issue than a physical health issue. It has been said by Mr Scott that the top two health related reasons for time off is anxiety and depression. He has stressed that there is rising number of officers suffering from PTSD. We must recognise that police officers and staff working in the police put themselves in extremely difficult situations to keep us safe, as a society we must make sure help is available for them too.

Recommendations

- **Improve and strengthen section 136 pathways** and look at expanding the range of places of safety available for people suffering from mental health problems

- **Ring-fence funding to train more police officers** and staff in the police force on how to deal with a mental health crisis.

- **Encourage and invest in more projects helping to reduce the strain of mental health on the police.**

The Education System and Mental Health

Key Themes

Education is one of the most important parts of a person's development but mental health and the lack of support in the education system is stopping many from learning. The key themes that are coming up time and time again are the lack of support available to students in the British education system and the lack of mental health training and resources available to teachers.

A key finding from discussions with students and professionals is that they believe there is a lack of understanding in the education system which many would argue is due to the lack of training for teachers. Megan Garvey, a masters student studying clinical psychology at Newcastle University said that the only time any mental health awareness was implemented into her earlier schooling was when she studied Psychology at A Level, she added "this has to change.'

You could argue for people to succeed at school, college or university they need a level of mental health provision available to them should they need it.

Lynn Crilly, an award-winning councillor conveys the need for education on mental health from an early age arguing that 'a 21st century approach to mental health' needs to mean more resources and support for students and teachers alike.

Ashley Curry, an expert by experience on mental health conveyed a key observation that we have heard from many other in our Education System that putting mental health into the school curriculum could help the early identification of mental health issues. One could argue that identifying mental health early could prevent the need for further support in the future saving money for the taxpayer and saving lives.

After speaking with a diverse range of people in the education system Parliament Street will put forward a suggestion of a 'Mental Health Education Partnership'.This would include pupils, parents, teachers, local NHS trusts, local authorities and local charities. We believe by all of the above working together it could help spread awareness of mental health through training, improve communication between NHS trusts and educational establishments and with collaboration between all parties help to provide the precious resources needed in schools.

Recommendations

- **Create 'Mental Health Partnerships'** across the United Kingdom to help improve communication, understanding, provide training and deliver the resources needed to help schools tackle mental health.

- **Implement compulsory mental health education into the curriculum from year 6 onwards**. This would help students generate more understanding about mental health and destigmatise mental health for future generations.

Key Recommendation from Parliament Street

- Whoever is in power after the general election, Parliament Street recommends that they **appoint a minister for mental health within their new administration.** This would signal the commitment of the government to mental health andgive recognition that for future generations to succeed, it is essential to have a minister, with mental health as their key focus. This will help drive through the required changes needed to have 'a 21st century approach to mental health.' This proposal is backed by Alastair Campbell.