



What we need you to know

In this guide, we'll work to build your understanding of the challenges young people face when trying to access help, techniques to set up a positive interaction as well as advice directly from young people on what they look for in someone supporting them.

Key learning points:

By the end of this guide you will have:

- An increased understanding of the key challenges we face when accessing support
- An increased awareness of why we may be reluctant to reach out for help
- Insight into what matters most to us when we are in crisis
- Practical steps to set up a safe and non-judgemental space

Barriers and discrimination

Accessing care in a mental health crisis is really difficult and leaves us feeling extremely vulnerable. A lot of us will feel nervous or even afraid when speaking to you. Sometimes the person we speak to isn't as compassionate as we need them to be, which makes us feel like we have done the wrong thing by reaching out. It is important that we feel listened to without judgement when we reach out, and this doesn't always happen. We know that everyone is working hard to be the best they can be for us - that's why you're here, right? So we want to share our experiences and perspectives to help you, help us.

The first thing we're going to work towards is building your understanding of some of the challenges we face when

accessing care, and the ways that may affect us. Some of these things may be painful or uncomfortable to hear about. We know that you are trying your best, and working really hard to support us. We believe that by talking about our experiences we can improve things for everyone.

Addressing pain points

By the time we reach you, we have usually tried everything we can to alleviate our pain, and are still in need of support. We face many barriers when accessing care, so when a young person does see you, it may have been a long and complicated process to even get there

Many of the young people we spoke to reported that they felt dismissed, or belittled, receiving responses from crisis workers like 'you just want attention'. It is so hard to reach out for help and when we are in crisis, these types of responses make us feel like we have done the wrong thing. And they hurt!

Marginalised Groups

Many young people face additional barriers depending on their culture, race, gender, sexuality, religion, socio-economic class, and/or disability. These groups are subject to discrimination within our society and our health systems. In this guide, we will refer to the groups who face this discrimination as marginalised groups or marginalised people.

For those of us in marginalised communities, it can be even harder to access appropriate support. A lot of the time the support we receive isn't suitable for our needs, leaving us unlikely to seek help again. We have provided some key statistics to highlight these barriers.

14% of LGBTQ+ people avoid seeking care due to fear of discrimination from staff.

However, 52% said they had experienced depression in the last year (Stonewall, 2018)

Black people are four times more likely to be sectioned under the mental health act than white people (NHS Digital, 2019), and are far more likely to have

police involvement in our first contact with a mental health service (Bignal et al., 2019). Fear of what might happen to us when we seek help can stop us reaching out altogether.

69% of autistic people who were not offered adjustments by mental health services suggested that adjustments would have been required or helpful (Brice S, Rodgers J, Ingham B, et al, 2021). Adjustments are really important because they allow the person accessing services to feel respected, safe and communicate their needs. This promotes positive patient-healthcare professional interactions.

Young carers face significant barriers that prevent them accessing the support they need, while frequently reporting that their caring role can impact on their mental health. Barriers include fears of being seen as 'not good enough' to support their family member after disclosing, that a family member will be taken away, or that they will cause additional worry for a family member that they care for (Carers Trust, 2016).

Many neurodiverse people feel that they are expected to behave and present as if they were neurotypical in order to receive understanding and support. But this pressure adds unrealistic expectations and pressures. Build your understanding of both physical and cognitive disabilities and divergences.

This information will hopefully show the disparities many groups face when they access care. We encourage you to do further research to gain more understanding of marginalised groups and the unique struggles they face.

Useful resources

Centre for Mental Health have produced an Inequalities in mental health fact sheet <https://www.centreformentalhealth.org.uk/publications/mental-health-inequalities-factsheet>

The Centre for Mental Health's Commission for Equality in Mental Health have a range of briefings and reports exploring this topic <https://www.centreformentalhealth.org.uk/commission-equality-mental-health>

Ambitious About Autism's Know Your Normal gives an insight into young autistic people's experience of mental health https://www.ambitiousaboutautism.org.uk/sites/default/files/youth-participation/toolkit/Ambitious-about_autism-know-your-normal-full-report.pdf

The importance and availability of adjustments to improve access for autistic adults who need mental and physical healthcare: findings from UK surveys is available here <https://bmjopen.bmj.com/content/11/3/e043336.full>

LGBT in Britain (2018) report by Stonewall highlights key issues faced by the LGBTQ+ community. <https://www.stonewall.org.uk/lgbt-britain-health>

Carers Trust produced a report looking at young carers experience of mental health services 'Invisible and in distress' <https://carers.org/downloads/resources-pdfs/invisibleandindistressreport.pdf>

NHS Digital's Mental Health Act Statistics, Annual Figures 2019-20 <https://digital.nhs.uk/data-and-information/publications/statistical/mental-health-act-statistics-annual-figures/2019-20-annual-figures>

Having one or more diagnoses can both be a privilege and a barrier when we are accessing care. Allow us to be the experts in our experience and be willing to take our lead on what can help. Not everyone with the same diagnosis will exhibit the same symptoms, and those of us without a diagnosis still need to be taken seriously.

When we experience discrimination, especially when reaching out for help, it is really detrimental to our mental health and our trust in services. Navigating all of this alongside trying to access support can have further negative impacts on our health, and the effects are long lasting.

Everyone is worthy of help, but many young people will feel nervous or even afraid when accessing services. Understand that this is where many will be coming from.

What we need you to know

Creating a safe space

When we access crisis services we need a safe, non-judgemental space where we can have the opportunity to talk, vent, and receive care and support. In this section we will give you some tips on how to create that space!

Creating a safe space where we feel comfortable opening up is essential in being able to build a relationship, establish positive communication and ultimately provide support and comfort.

Please keep in mind that when we talk about safe spaces we are referring to a space where we can be ourselves and fully express ourselves and what is happening without fear of judgement.

Here are our top tips on creating a safe space:

If you are meeting someone in person, make sure there are no sharp objects or potentially triggering images in your space.

Give us the option to talk alone or with others. Even if we arrive with friends or family, we may not be safe or comfortable talking around them.

If you are on the phone or online, ask if we are in a safe and comfortable space, and allow us the time to adjust anything, or move to a new location.

Be open minded and accepting. Allow us to be ourselves without criticism and respect and encourage our individuality and unique perspectives.

You don't need to know everything. We understand that your knowledge may be limited - and that's okay. It's much better to admit when you don't know something. Don't judge what you don't know. We don't expect you to know everything, and it's always better to ask than to assume incorrectly.

Young people in crisis may have physical injuries from self harm. When this happens, it's important not to stare. Instead, work to understand that these are often coping mechanisms, and may be the only way we know how to deal with, express or manage the amount of mental distress we are in. Similarly with other behaviours that you may consider harmful, don't judge or scold. This will allow for more open dialogue around these subjects and will help us feel safer opening up to you.

Try to understand where we are coming from. Work on your understanding of mental health, discrimination and acceptance. Understanding these things, and coming to every interaction with an open mind will set the tone and allow for a positive, meaningful experience for both parties, and help foster a safe space for the young people you see.

The only thing that is safe to assume, is that the young person is trying their best. Give them the benefit of the doubt. Don't blame them for their behaviour, and understand that to end up in crisis, the young person has gone through a series of potentially traumatic events, or is in severe psychological distress - perhaps both.

Reflection space

Are there any interactions you've had with young people which stood out to you when you read through this guide?

Are there any immediate changes to practice or the environment that you can make to ease young people's access to care?

Individualised Treatment

Listen to the needs of the individual in front of you. Meet us where we are, and bring with you genuine curiosity and compassion for us.

Mental health treatment is not a one size fits all concept. Everyone will have their own individual ways of coping, understanding, and communicating their needs. We want to be treated as unique individuals with a full complex identity, all which needs to be considered when supporting us.

Asking with genuine curiosity and listening is a great place to start. Many of us will be aware of our needs, and how best to communicate them. Ask us what works, and if there is anything we're aware of that will help.

Additional communication options for disabled and neurodiverse people such as BSL support, paper to write things down, and using pictures or colours to describe experiences or emotions can help facilitate effective communication. It shows your effort to meet us where we are, curiosity and compassion for us.

Although some of us have similar diagnoses, we might exhibit different physical or mental symptoms, so don't dismiss what someone is saying just because it doesn't 'fit' with their diagnosis. People with mental health needs should have the same access to services and support as people with physical health needs.

Do you have BSL support or other measures already in place?
If not, who can you speak to about making it available?

What we are looking for

So what are we looking for in a person that supports us in crisis? Well, we asked young people from across England and have put together the top 4 traits we want you to have:

Empathy and understanding

Acknowledge that you don't know everything, and that you can't necessarily relate to everything the young person is experiencing, but that you are working to understand where they are coming from.

Active Listening

Young people want to feel heard. In a world that often diminishes our importance, be someone who is there to listen. Remember to listen with the intention to understand, not necessarily to respond.

Trust us and recognise we are doing our best

When we do share something we're going through with you - believe us. Trust what we are saying to you. Don't dismiss it or push it to the side.

Show genuine interest in us

It's really beneficial when someone shows genuine interest in what we have to say. Not only believing, but genuinely wanting to hear more.

"One worker honestly restored my trust in services. His attentiveness and gentle nature made him really easy to get along with. He advocated for me and proved that he genuinely cared about my recovery. He acknowledged the flaws in the system and the severity of my experiences all while insisting he had faith in me. The experience and his kind words have stayed with me. Having someone really try to connect with me and pay close attention to things that mattered to me, all while ceaselessly chasing up referrals was invaluable. "

Jas, Young Advisor

Reflection space

Are there any traits you land strongly on, and others you don't? How can you ensure you can bring these 4 traits into practice? Which are harder when you are busy and feeling stressed?

Conclusion

You've heard from us today about where some of the key pain points are for us when receiving care in crisis. Some of this is hard to hear, but we feel that by sharing our experiences we can work together to improve things for everyone. Hopefully you have more insight into why we may seem reluctant to reach out or talk about what we are going through. By showing your compassion and empathy, you can create a safe, non-judgemental space that really helps us open up. We also talked about what matters most to us when we are in crisis; empathy, understanding, trust and active listening. And finally, Jas' example of a positive experience shows how this can work in practice.

Thank you for listening to us. Reading this today shows that you genuinely care and want to help us in the best way possible.

You can view the video guide for this document for free at www.crisistools.org.uk

This learning guide was produced with support from NHS England



About Crisis Tools

Unique, co-produced learning guides to increase knowledge and confidence for anyone supporting young people in a mental health crisis.

Crisis Tools is relevant to anyone who may find themselves supporting a young person in crisis including parents, carers and professionals. The Crisis Tools website features a resource sharing hub and bite-sized learning guides aimed at improving your knowledge and understanding of young people's experiences when getting help in crisis. Co-designed and delivered by young people with lived experience, these unique learning guides will cover key themes including attitudes, communication, practical strategies and complexities when delivering care remotely.

Crisis Tools is complementary to, but not a replacement for clinical training. This unique program is designed to amplify the voices of young people.

www.crisistools.org.uk