



Being Myself

**A look at the Emotional Wellbeing of
young people in Daventry Town**

December 2020





Contents

Summary.....	2
Key findings	3
Healthy lifestyle	3
Dealing with difficult emotions.....	3
Use of services.....	4
Self-harm	4
Recommendations.....	5
Background.....	6
Method.....	7
What people told us	10
Young people’s survey	10
Parents/carers survey	22
Focus groups	27
Interviews	31
Acknowledgements	34
About Healthwatch Northamptonshire	35
About Connected Together	36
Appendix - Young people survey questions.....	37
Contact us.....	40



Summary

In the summer of 2019 Young Healthwatch Northamptonshire was commissioned by Healthy Young Daventry¹ to carry out a study into emotional wellbeing and self-harm among young people in Daventry.

A survey designed by Young Healthwatch Northamptonshire was shared with young people across Daventry. The survey looked at young people's physical and emotional wellbeing, the activities and services they currently use to maintain wellbeing and which services they feel would be beneficial to them in the future.

473 young people aged between 11 and 19 completed the survey between March and May 2020. A similar survey for parents/carers was also completed by 29 people. To gather the responses, we worked with two schools in Daventry - DSLV E-ACT Academy and The Parker E-ACT Academy.

Two focus groups were also held with 10 young people from The Parker E-ACT Academy.

As part of the project seven semi-structured interviews were conducted by Time2Talk with young people who were already accessing their service to find out more about why young people self-harm and what helps them.

The findings show that whilst only 20% of young people said they had used a support service for their emotional health, talking to friends, parents/carers or another trusted adult was something that 61% said they did to help them deal with difficult emotions. They also imply that schools may be suitable locations for support services for some but not all young people as some were concerned about confidentiality and stigma. Informal sport and exercise were also activities that helped some young people cope when things were difficult and more expressed an interest in using these activities in Daventry to help manage their emotional wellbeing. The focus group discussion suggested that fun and informal sport would help the most and that there is a need to remove barrier to participation, such as cost and caring responsibilities.

There were mixed opinions about how helpful the available support services were and the focus group felt that the services already provided in Daventry should be better promoted through a wellbeing festival.

Nearly one-third of the survey respondents said they knew or suspected that one of their friends had self-harmed but only around half had spoken to someone about it. Some people were trying to support their friends without seeking help from someone else whereas others had spoken to teachers, parents/carers and other trusted adults for advice as well as their friends.

Young people who had experience of self-harm (at a non-critical level) said that talking about their feelings and emotions with people who understood and did not judge them had really helped them cope with their self-harming. They felt that more people developing a better understanding of the issues around self-harm and listening to their experiences, as well as more access to services to support them would make things better for young people who self-harm. They found it helpful when people approached the issues and results of self-harm in as calm a way as possible.

¹ Healthy Young Daventry is a partnership of organisations in Daventry town that are working together to improve the way they work with children and young people.



Key findings

Healthy lifestyle

- Most young people, 88%, rated their lifestyle as moderately healthy (44%), healthy (34%) or very healthy (10%).
- Only 12% were eating the recommended five or more portions of fruit and vegetables a day, with an average of 2.8 portions.
- 42% of young people said that they engaged in 60 minutes of exercise/activity on five or more days of the week, with the average number of days being 3.9.
- The parent/carer responses around healthy lifestyle were similar to the young people's, with results for healthy eating, time spent exercising and overall rating of healthy lifestyle falling close to each other.

Dealing with difficult emotions

- When life got difficult, 55% of young people said they listened to music, with doing an activity they enjoyed (42%) and talking to friends (42%) also popular responses. 61% chose one of the four options involving talking to someone.
- One-quarter of young people (24%) said that exercise or sport currently helps them deal with difficulties in life. When talking about future services, more people (39%) said they would like to participate in exercise in Daventry to help them deal with difficulties, and 13% would like to be able to do sport or go to a community group. 25% would like the opportunity to express themselves through art (25%).
- The focus group discussed this further, saying they did like to take part in sport and exercise, but they preferred a less structured fun sport that was not competitive.
- Text message was the most preferred method (37% of people) for receiving support for managing difficult emotion, with face to face appointments also being popular (32%).
- Almost one-third (30%) wanted to receive support in school, with 24% saying the doctors or a health setting would be somewhere they would like to receive support and 21% online. Nine did not want support and two explained this was because of confidentiality concerns and mistrust.

“I don't want to share my personal information to the school.”

- There were some differences in the preferences in choice of places to access services between the parents/carers and young people. School was the most popular choice for both, but differences were seen in relation to access to online services, with 31% of adults but only 17% of young people choosing this option.
- Even though there were not many responses to the parent/carer survey, the difference between how adults believe young people would like to receive services and the views of young people themselves may highlight the need to ensure that development of services includes the views and opinions of young people at all stages.
- The focus group gave further ideas about what they felt was needed in Daventry. They were aware of various services already and felt that better understanding and awareness of what is already available is needed, which could be achieved through a wellbeing festival. The second focus group gave more ideas about what this event could look like.



Use of services

- The majority of young people (80%) had not had to access any services to help them manage their emotional health. Of those that had accessed a service, 38% had used their doctor, 31% a counselling service, 27% a School Nurse and 25% Child and Adolescent Mental Health Services (CAMHS).
- There were differences in the number of adults saying that their young person had accessed service to help them manage difficult emotions, with 48% of adults yes.
- Amongst those who had experienced difficulties in accessing services, over half (55%) were worried about confidentiality, 42% were concerned about the stigma attached to attending services, 42% about their parents being told and 35% about long waiting times.
- Most services were rated as both helpful and unhelpful by around half of those answering.

Self-harm

- 31% said they knew or suspected that one of their friends had self-harmed, with a further 19% not wanting to say.
- Between 50% and 63% of people had told someone about the self-harm (depending on whether just looking at those who had said they did know someone they thought had self-harmed, 63%, or all who answered, 50%)
- Of those who spoke to someone about their friend's self-harm, friends (38%), teachers (35%) and parent/carers (30%) were the most frequent answers. No-one selected a School Nurse, Mental health support/counselling service or Online support service.
- Over half of those who had spoken to someone (58%) about a friend's actual or suspected self-harm found their response helpful, with some saying this was because it resulted in help for their friend or because they received advice about what to do.
- Young people who were interviewed highlighted that diversionary tools that helped to move their focus away from the desire to self-harm had been useful, as well as the opportunity to discuss and understand their emotions.
- They said that talking about their feelings and emotions to people who understood and did not judge them had really helped them cope with their self-harming. The reduction in isolation that this brought about had also been helpful to them.
- The internet was not used by the young people interviewed to research or find support around self-harming, but some participants did use apps designed to help them manage emotions and to allow them to express what they were feeling.
- The lack of understanding that self-harming can often happen as a result of emotional distress and a view held by some individuals that people who self-harm were attention seeking were things that annoyed those interviewed.
- People approaching the issues and results of self-harm in as calm a way as possible was something that young people said was helpful to them.
- Young people said that other people developing a better understanding of the issues around self-harm and listening to their experiences, as well as more access to services to support them would make things better for young people who self-harm.

“I would like them to be more educated about self-harm so they could understand it more so they wouldn't say unhelpful, hurtful things. I would like them to listen and try to understand my experience. Teachers need more training. Doctors also.”



Recommendations

1. Consider developing services with young people that focus on a combination of physical and emotional wellbeing, such as fun and non-competitive sports groups. Seek ways to make these activities inclusive by removing barriers such as cost and caring responsibilities.
2. Young people also may benefit from further opportunities to talk to people about their emotional wellbeing, as this is something 61% would do to help them deal with difficulty emotions. Schools, health settings and sports centres or clubs could be suitable locations for this, although some would prefer a more confidential or anonymous setting such as online.
3. Review how support services are currently delivered to assess if they are being offered via mediums that are seen as useful by young people, including options ranging from text messages to face to face appointments.
4. Further promote the existing services so that young people know what is available and how to access support, such as through a wellbeing festival.
5. Explore how to help young people overcome issues around confidentiality and stigma that prevent them from accessing services.
6. Train staff, parents and other adults in positions of responsibility to respond to young people's requests for support, especially disclosures of self-harm, in appropriate ways.
7. Continue to engage with young people to ensure that health and wellbeing services and initiatives are developed in a way that is appropriate for them.



Response from Healthy Young Daventry

The Healthy Young Daventry Project is grateful to the Young People and Parents who took part in the surveys, focus groups and interviews which enabled Healthwatch to provide this report and set of recommendations. As a partnership we have considered the messages we have heard and have recognised that there are currently restrictions in place due to Covid19 which make some of the recommendations, such as a wellbeing festival for Young People impossible to deliver in the way they were originally imagined by the focus group, we will review these ideas with young people and adapt our plans in line with how you guide us.

Developing Activities with Young People - The Healthy Young Daventry project will enable key providers of:

- Sport and physical activity
- Environmental activity
- Wellbeing and relaxation

To work with young people to develop new opportunities which are appealing and accessible.

Responding to Young People at the point of disclosure of self-harm - The partner organisations will engage in training about self-harm, safety planning and emotion coaching to support those professionals in providing a helpful response to Young People. We will work with our Youth Counselling partners to develop a series of sessions to raise awareness and offer support to parents.

Raising awareness of the services and access points that are available to Young People and Parents - The team will work with the schools to develop a communication plan for the year to help Young People and families to gain a better understanding of what services are available, how to access them and what to expect. We will ensure that all Young People are aware of the Text Your School Nurse service and are able to identify safe adults they can speak to about things that concern them.

Advocate for Young People to have choice - We will commit to co-production in relation to all new service developments. We will promote the rights of Young People to make choices in how they wish to access and receive support.



Background

Research has shown that wards within Daventry District have significantly higher levels of self-harm than other areas of Northamptonshire and comparable areas of the country. A countywide health and wellbeing survey of secondary school children² found that 20% of young people were concerned about their mental health and 18% reported using self-harm as a way of dealing with worries. A workshop was held in May 2019 by Integrated Children's Services to understand and analyse the root cause of why young people in Daventry are self-harming. The aim was to explore all the issues that could cause or contribute to the problem before starting to consider a solution. It was recognised that it was important to give young people a clear and direct voice into the project and to increase understanding amongst professionals in Daventry about their views.

Method

Survey development

Young Healthwatch Northamptonshire designed a survey for 11 to 19 year olds to ensure that it was created in an engaging and appropriate way. The survey questions (see Appendix) were designed at one of Young Healthwatch's regular meetings. Due to the different areas of wellbeing and experience of support that the survey would cover it was decided that it would need to be of a slightly longer length than some other Young Healthwatch surveys. It was also agreed that the survey should be available online and in paper form. The survey questions were reviewed by the Child and Adolescent Mental Health Services (CAMHS) participation group for their input as users of mental health services for young people. The survey asked young people about their physical health, lifestyle and emotional health and included questions on how they manage difficult emotions and on anything that services could provide to help them with that. It also gave them the chance to let us know what things they felt would work for them and how they would like to receive health and wellbeing services.

The project team developed a second survey for parents and carers of 11 to 19 year olds to complement the questions young people were asked. Parents and carers were asked to complete similar information about their child and were also given the chance to say what they felt would work for their family and how they would like to receive services.

² Northamptonshire Young People's Health and Wellbeing Survey 2017 - 18: A summary report of the Health Related Behaviour Survey. The Northampton Young People's Health and Wellbeing Survey was developed by the Schools Health Education Unit (SHEU) in partnership with the Northamptonshire Public Health and Wellbeing Team. The purpose of the survey was to obtain pupils' views regarding healthy eating, safety, emotional wellbeing and leisure time. www.northamptonshire.gov.uk/councilservices/children-families-education/schools-and-education/information-for-school-staff/Documents/Sheu%20Survey%20Summary%20Report.pdf



Survey distribution

The target was to have a minimum of 350 responses from young people in Daventry. The electronic survey for young people was shared with schools electronically and paper copies delivered to schools who requested them. The surveys were conducted in form time in school during January and February.

The parent's survey was shared by some schools but not all due to the timing coinciding with the national coronavirus lockdown. It was decided not to promote the survey further once the lockdown had begun as responses may have been different during this time.

The surveys were also shared across Young Healthwatch/Healthwatch, Daventry District Council and Northamptonshire County Council social media channels (Facebook, Instagram and Twitter).

Example social media images:



Focus groups

Two focus groups were held with 10 young people aged from 11 to 16 years old. The focus groups took place in the young peoples' school (The Parker E-ACT Academy), a setting in which they would feel comfortable. The first focus group was to develop ideas of the type of services young people would like to see and the second focus on the particulars of the event they wanted to hold.

Interviews

Seven semi-structured interviews were conducted by Time2Talk with young people who were currently accessing their service and had experience of self-harming.

Time2Talk is an early intervention, non-crisis, non-emergency therapeutic provision that delivers counselling support for those willing to participate with the aim of helping to improve the quality of a young person's mental health and emotional wellbeing. The aim is to help manage situations working towards improved mental health and resilience without the need for higher level clinical interventions. They receive referrals from the NHS and CAMHS and self-referrals that include some young people who self-harm but whose self-harm is not considered to be at a critical level. Approximately a quarter of their clients have some issue with self-harm.



The pandemic made it challenging for Time2Talk to arrange appointments with service users at which it would be appropriate for them to complete the interviews, meaning that fewer interviews were conducted than had been originally planned. It was also a challenge to fit the questions in alongside a counselling session and a number of people did not want to participate. Others said they would have completed it if they did not have to complete any forms or agree to signing anything as they were afraid of being identified.

Data analysis

Most of the survey questions were multiple choice to make it easier for young people to complete the whole survey, so were analysed quantitatively. Some questions gave the option to provide other answers and comments. These comments were brief so were coded, themed and quantitatively analysed.

Seven semi-structured interviews were conducted by Time2Talk with young people who were currently accessing their service and had experience of self-harming. The findings were summarised by question with illustrative comments.

The focus groups resulted in consensus opinions and suggestions that were collected on flipcharts and are listed.



What people told us

- 473 young people responded to the survey in January and February 2020.
- 29 parents/carers responded to the parent/carer survey in March 2020.
- 10 young people took part in the two focus groups in February and March 2020.
- Seven interviews were conducted with young people by Time2Talk between January and June 2020.
- All figures given are percentages of the answers received for each question, unless otherwise specified.

Young people’s survey

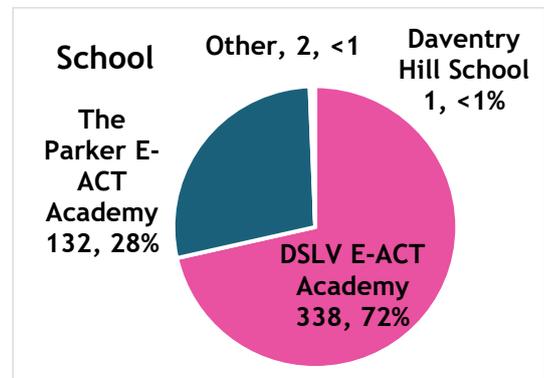
Demographics of those who took part

Residence

20% (92 of 460) said they did not live in Daventry, however all 92 did attend one of the schools in Daventry.

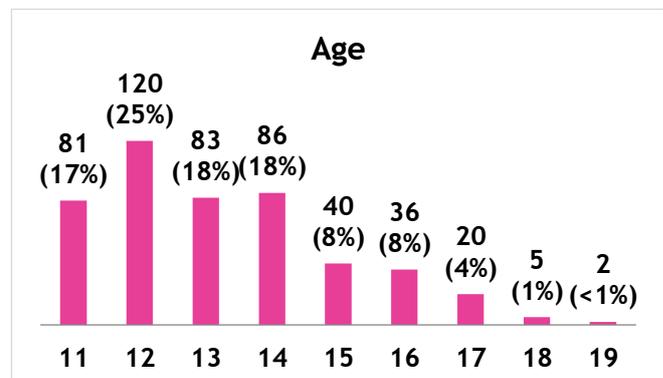
School

71% (338 of 473) attended DSLV E-ACT Academy, 28% (132) attended The Parker E-ACT Academy and one person said they attended Daventry Hill School (two others just said they attend “Sixth Form”).



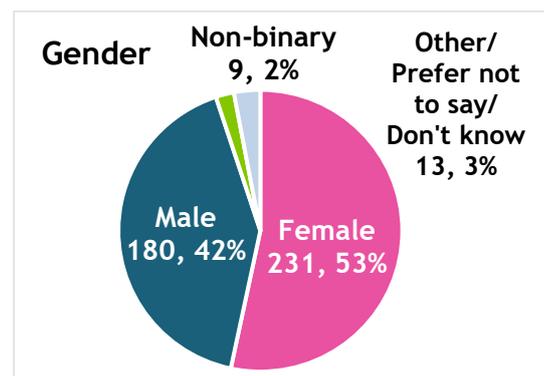
Age

78% (370 of 473) of participants were 14 years old or under.



Gender

Slightly more young people identified as female (53%) than male (42%). Nine (2%) identified as non-binary (433 responded). Six of 429 people (1%) said they were transgender.

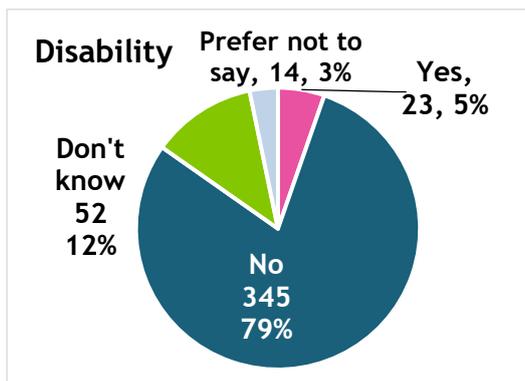
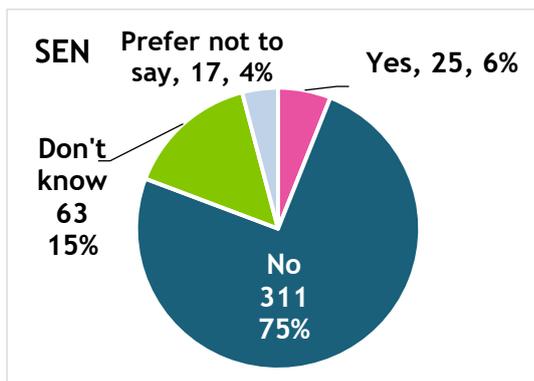


Sexuality

77% (325 of 421) said they were heterosexual, 5% (23) bisexual, 3% (13) gay or lesbian, and 2% (7) pansexual. Two people said they were asexual and one person said they were panromantic asexual. 22 people (5%) said they did not know and 28 people (7%) preferred not to say.

Special Educational Needs (SEN)

25 of 416 people (6%) said they did have a special educational need. 75% (311) said that they did not have any special educational needs and the remainder did not know (15%, 63) or did not want to say (4%, 17).



Disability

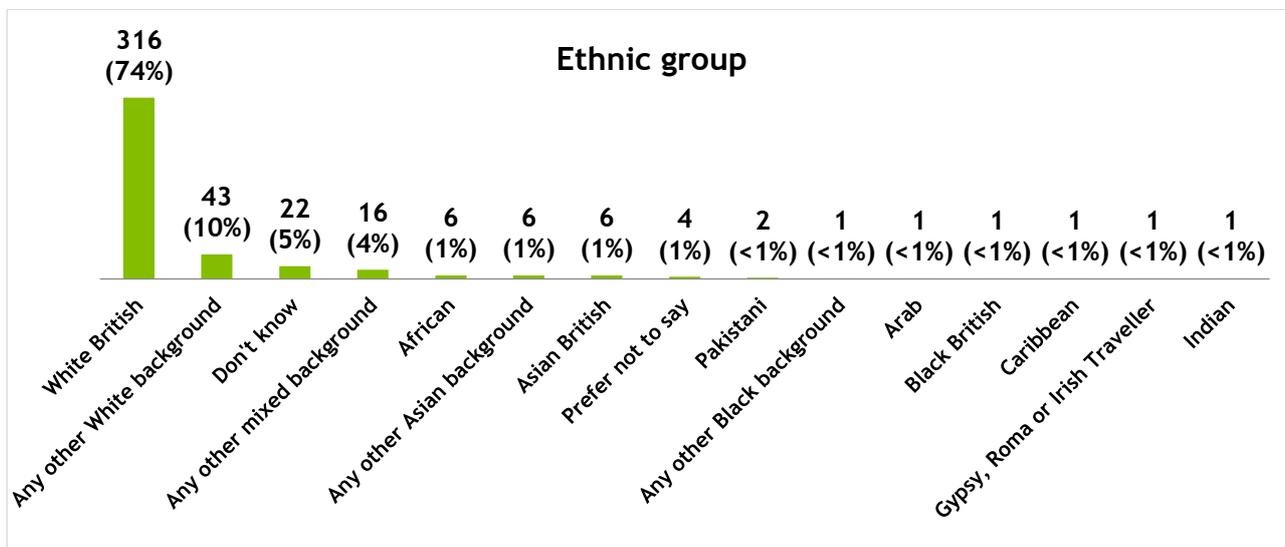
Most young people (79%, 345 of 434) said that they did not consider themselves to be disabled. 23 people (5%) did consider themselves to be disabled and 12% (52) were unsure. 3% (14) preferred not to say.

Religion

Over half of the young people (59%, 252 of 429) described themselves as having no religion and 25% (106) identified as Christian. Eight people (2%) said they were Muslim, two Jewish, one Hindu and one Sikh. 15 said they had another religion, 32 did not know and 12 preferred not to say.

Ethnicity

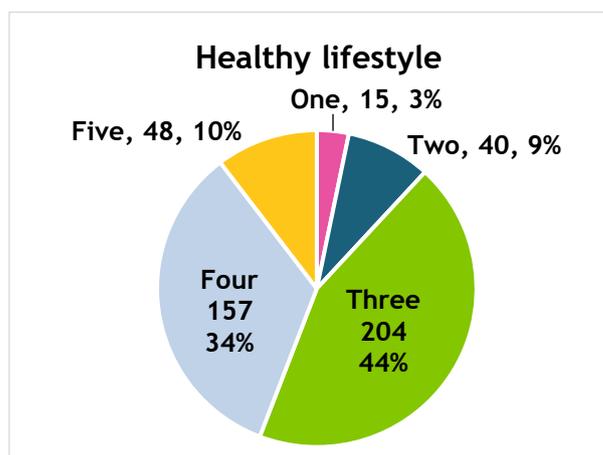
Almost three quarters (74%, 316 of 427) described their ethnicity as White British with the next largest proportion (10%, 43) describing themselves as 'Any other white background'.



Healthy lifestyle

Self-rating

We asked young people to rate how healthy they thought their lifestyle was, with One being not very healthy and Five being very healthy. Most people rated themselves as either Three (44%, 204 of 464) or Four (34%, 157). The average rating was 3.4, meaning most young people rated their lifestyle as moderately healthy.

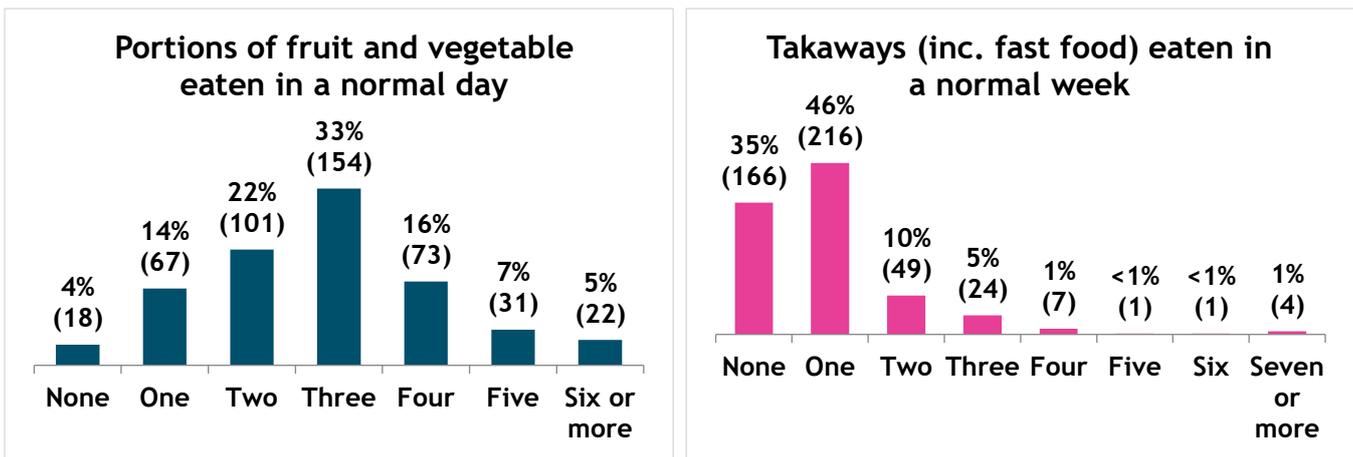




Diet

One third of young people (33%, 154 of 466) said that they ate three portions of fruit or vegetables in a normal day, with 12% (53) eating the government recommended five portions or more of fruit and vegetables a day. A small number (4%, 18) said that they ate no fruit or vegetables in a normal day. The average number of portions was 2.8 (counting ‘Six or more’ as 6).

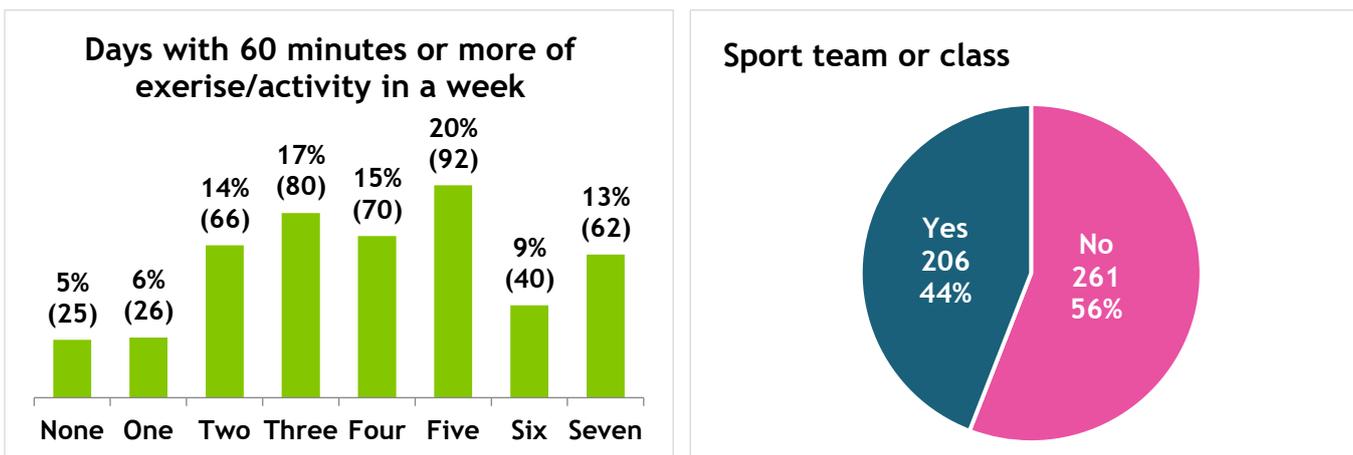
Almost half of participants (46%, 216 of 468) said that they ate one takeaway (including fast food) in a normal week and 35% (166) ate none. The average was 1.0. 86 people (18%) said they had more than one takeaway in a week and 37 (8%) had three or more.



Exercise

It is recommended that young people do 60 minutes of physical activity/exercise every day (not necessarily in a single session). 13% (62 of 461) said they had met this target in the last week. 42% (194) did 60 minutes of exercise/activity on five or more days in the last week. 5% (25) said they did not manage 60 minutes on any day during the previous week. The average number of days was 3.9.

Nearly half of young people said they were involved in a sports team or class that involved exercise (44%. 206 of 467).



Spare time

We asked young people to tell us what they enjoyed doing in their spare time from a list of 14 options. Listening to music had the highest response (71% of people), with watching TV or films (64%), using social media (59%) and playing computer games (50%) also popular. 91% (426) selected more than one option and 47% (208) selected more than four. Nine people did not give any answer.



What do you enjoy doing in your spare time? (Tick as many as you want)	Responses	% of 2021 answers	% of 466 people
Listening to music	333	16%	71%
Watching TV or films	299	15%	64%
Using social media	276	14%	59%
Playing computer games	234	12%	50%
Drawing or painting	149	7%	32%
Cooking	148	7%	32%
Sports clubs	119	6%	26%
Reading	108	5%	23%
Dance	77	4%	17%
Crafting	72	4%	15%
Playing an instrument	69	3%	15%
Drama	46	2%	10%
Youth clubs	21	1%	5%
Other:	72	4%	15%
<i>Dog walking/playing with pets</i>	14	1%	3%
<i>Fitness/gym/workouts/swimming</i>	7	<1%	2%
<i>Going out/playing with friends/family</i>	7	<1%	2%
<i>Sports or playing at home/outdoor activities</i>	5	<1%	1%
<i>Sleeping</i>	5	<1%	1%
<i>Roller skating/Roller Derby</i>	4	<1%	1%
<i>Cadets/Scouts/Explorers</i>	3	<1%	1%
<i>Singing</i>	3	<1%	1%
<i>Horse riding</i>	3	<1%	1%
<i>Fortnite computer game</i>	2	<1%	<1%
<i>Work</i>	2	<1%	<1%
<i>VR</i>	2	<1%	<1%
<i>Time with family</i>	2	<1%	<1%
<i>YouTube</i>	1	<1%	<1%
<i>Going out/playing with friends</i>	1	<1%	<1%
<i>Go Karting</i>	1	<1%	<1%
<i>Talking to friends</i>	1	<1%	<1%
<i>Eating</i>	1	<1%	<1%
<i>Hiding</i>	1	<1%	<1%
<i>Shakespeare</i>	1	<1%	<1%
<i>Relaxing</i>	1	<1%	<1%
<i>Games</i>	1	<1%	<1%
<i>Writing stories</i>	1	<1%	<1%
<i>Knitting</i>	1	<1%	<1%
<i>Photography</i>	1	<1%	<1%
<i>Playing with siblings</i>	1	<1%	<1%



Dealing with difficult emotions

When asked what they did to help them deal with things when life got difficult, 55% of young people (255) said they listened to music, with doing an activity they enjoyed (42%) and talking to friends (42%) and also popular responses. 61% (283) chose one of the four options involving talking to someone. Other things mentioned that helped when life felt difficult included crying (9), using social media such as TikTok and YouTube (8), playing video games (7), being by themselves (7) and being with a pet (6). Activities such as climbing (1), cooking (1), drumming and journaling (2) were also mentioned.

When life feels difficult for you, what helps you to deal with this? (Tick as many...)	Responses	% of 1509 answers	% of 462 people
Listening to music	255	17%	55%
Doing an activity you enjoy	196	13%	42%
Talking to friends	193	13%	42%
Talking to someone you trust	164	11%	35%
Talking to a parent/carer	128	8%	28%
Exercise/sport	113	7%	24%
Taking yourself out of the situation	100	7%	22%
Drawing	95	6%	21%
Dancing	47	3%	10%
Talking to a trusted adult, e.g. a coach, youth leader, teacher, etc.	45	3%	10%
Writing your emotions down	40	3%	9%
Listening to calming sounds	37	2%	8%
Online help	15	1%	3%
Meditation/Yoga	13	1%	3%
None of the above	22		5%
Other:	68	5%	15%
<i>Crying</i>	9	1%	2%
<i>Phone/social media/videos</i>	8	1%	2%
<i>Gaming</i>	7	<1%	2%
<i>Being left alone/contemplating</i>	7	<1%	2%
<i>Pets</i>	6	<1%	1%
<i>Nothing</i>	5	<1%	1%
<i>Breaking something/physical release</i>	4	<1%	1%
<i>Listen to music</i>	3	<1%	1%
<i>Talk to myself</i>	3	<1%	1%
<i>Spend time with friends/family</i>	2	<1%	<1%
<i>Writing it down/journaling</i>	2	<1%	<1%
<i>Eating</i>	2	<1%	<1%
<i>Playing an instrument</i>	2	<1%	<1%
<i>Used to self-harm</i>	1	<1%	<1%
<i>Languages</i>	1	<1%	<1%
<i>Cooking</i>	1	<1%	<1%
<i>Going for a walk</i>	1	<1%	<1%
<i>TV</i>	1	<1%	<1%
<i>Praying</i>	1	<1%	<1%
<i>Smoking</i>	1	<1%	<1%



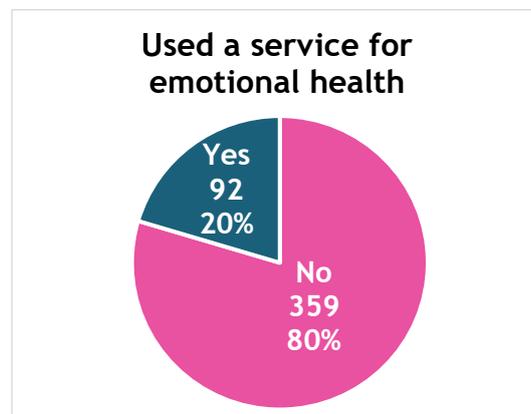
76% (351) selected more than one option and 25% (114) selected more than four. 13 people did not give any answer.

Use of services

The majority of young people (80%, 359 of 451) had not had to access any services to help them manage their emotional health (and 24 did not answer).

Services used

Of those that had accessed a service, 38% (35 of 93) had used their doctor, 31% (29) a counselling service, 27% (25) a School Nurse and 25% (23) Child and Adolescent Mental Health Services (CAMHS). Six people said they were unsure about what was available. 34 (37% of 93) had used more than one service and four said they had used more than three.



Which services have you accessed to help you to manage your emotional health?	Responses	% of 150 answers	% of 93 people who had used a service	% all 473 survey responses
Doctors	35	23%	38%	7%
Counselling services, such as Time2Talk	29	19%	31%	6%
School nurse	25	17%	27%	5%
CAMHS (Child and Adolescent Mental Health Service)	23	15%	25%	5%
Online support services	7	5%	8%	1%
Telephone helpline, such as Childline	6	4%	6%	1%
ChatHealth (text the school nurse)	2	1%	2%	<1%
Other:	23	15%	25%	5%
<i>School/Teacher</i>	6	4%	6%	1%
<i>Service 6</i>	2	1%	2%	<1%
<i>Therapy</i>	2	1%	2%	<1%
<i>Don't know/unsure</i>	2	1%	2%	<1%
<i>Parent</i>	2	1%	2%	<1%
<i>Mind</i>	1	1%	1%	<1%
<i>Social worker</i>	1	1%	1%	<1%
<i>Paramedic</i>	1	1%	1%	<1%
<i>Brambles</i>	1	1%	1%	<1%
<i>Specialist ASD doctor</i>	1	1%	1%	<1%
<i>CAMHS but they refused</i>	1	1%	1%	<1%
<i>Young Carers</i>	1	1%	1%	<1%
<i>Guidance counsellor</i>	1	1%	1%	<1%
<i>Shout</i>	1	1%	1%	<1%

Difficulties with services

When asked if they'd had any difficulties when using such services, 73 people selected one or more answer choice (including 17 who had not mentioned using a service in the previous question).



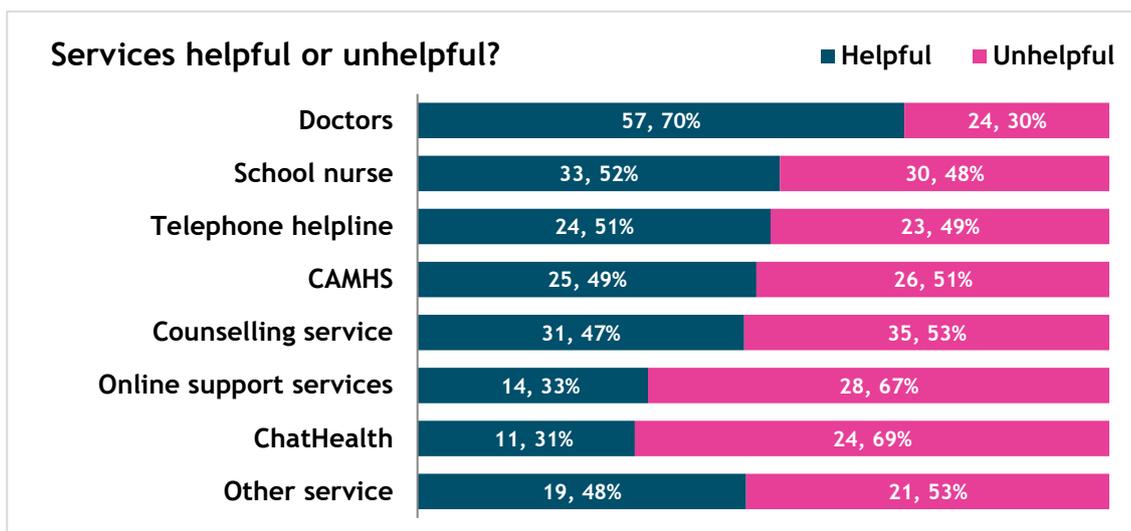
Amongst those who had experiences difficulties in accessing services, over half (55%, 20 of 73) were worried about confidentiality, 42% (18) were concerned about the stigma attached to attending services, 42% (17) about their parents being told and 35% (14) about long waiting times. 23 young people (32% of 73) selected more than one concern from the list.

If you have used services, did you have any difficulties using them?	Responses	% of 118 answers	% of 73 people
Worried about confidentiality	20	17%	55%
Worried about what people will think (stigma)	18	15%	42%
Worried about them telling my parents or other people (confidentiality)	17	14%	42%
Long waiting times	14	12%	35%
Not available outside of school hours, e.g. after school/weekends	10	8%	28%
Not aware of a service being available	10	8%	24%
Only available in a setting I didn't feel comfortable in	8	7%	22%
Services don't know about my issues	6	5%	21%
The right service was not available	5	4%	10%
Wasn't able to attend due to transport difficulties	3	3%	10%
Other	7	6%	9%
<i>Did not help me</i>	1	1%	1%
<i>Dislike talking about it</i>	1	1%	1%
<i>I don't want to go</i>	1	1%	1%
<i>Sometimes didn't believe me</i>	1	1%	1%
<i>Too busy</i>	1	1%	1%
<i>Only worried about stigma at school</i>	1	1%	1%
<i>Angsietia [Anxiety?]</i>	1	1%	1%

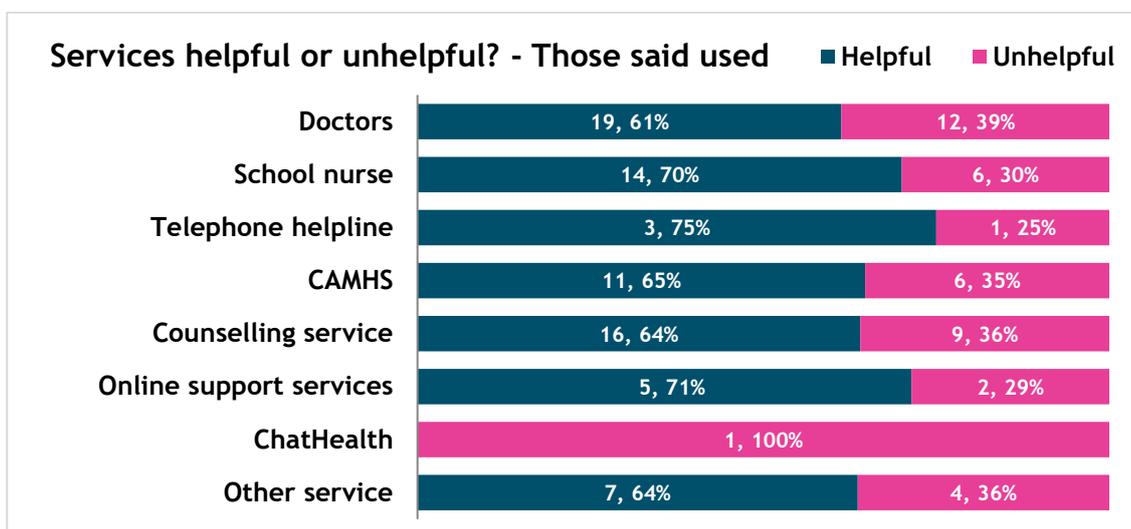
Helpfulness of services

Those that had used services were asked to rate if they were helpful or unhelpful. 131 people rated one or more service (and 22 rated all eight services) despite only 93 having previously said they had used one or more of the services to help manage their emotional health. These ratings may therefore reflect the use of services for wider health needs.

Most services were rated as both helpful and unhelpful by around half of those answering. More people had found their doctor to be helpful (70%, 57). 81 people rated the helpfulness of their doctor despite only 35 having said they had accessed their doctor to help manage their emotional health. Only around one-third found online support services (33%) and ChatHealth (31%) helpful.



If the results are filtered for just those who had said they had used the listed services to help them manage their emotional health, most services were rated helpful by a higher percentage of people.



Future services

What

When asked *what* they would like to do in Daventry to help them feel better when things are difficult over one third (39%, 123 of 314) said that they would like to take part in exercise, with the opportunity to express themselves through art the second highest response (25%, 80 of 314). 103 selected more than one option and five options were the most anyone selected (by seven).

When things are difficult, what would you like to be able to do in Daventry to help you feel better?	Responses	% of 470 answers	% of 314 people
Taking exercise (e.g. running/swimming/gym, etc.)	123	26%	39%
Expressing yourself through art (e.g. painting/drawing/dance/drama, etc.)	80	17%	25%
Peer support (talking to others who have similar concerns)	57	12%	18%
Sport or community groups	40	9%	13%
Expressing yourself through music (e.g. being in a band/choir/orchestra)	35	7%	11%
One to one support with a professional	28	6%	9%



Support group	26	6%	8%
Workshops to learn wellbeing skills, e.g. mindfulness	14	3%	4%
Counselling services	12	3%	4%
Crisis support	8	2%	3%
Structured support programmes (e.g. a 6 week programme)	3	1%	1%
Other	44	9%	14%
<i>None of the above</i>	8	2%	3%
<i>Nothing</i>	5	1%	2%
<i>Being alone/myself</i>	4	1%	1%
<i>Talking to friends</i>	4	1%	1%
<i>Spend time with family</i>	3	1%	1%
<i>Spending time with friends</i>	3	1%	1%
<i>Read</i>	2	<1%	1%
<i>Leave Daventry and go to Weedon</i>	1	<1%	<1%
<i>Cinema</i>	1	<1%	<1%
<i>Shopping</i>	1	<1%	<1%
<i>Running away</i>	1	<1%	<1%
<i>Smoking</i>	1	<1%	<1%
<i>Relax at home</i>	1	<1%	<1%
<i>Got to a gym, we are not allowed to go</i>	1	<1%	<1%
<i>Going to the park</i>	1	<1%	<1%
<i>Games</i>	1	<1%	<1%
<i>Colouring</i>	1	<1%	<1%
<i>Talk to my key worker</i>	1	<1%	<1%
<i>Charity sports events</i>	1	<1%	<1%
<i>Swimming</i>	1	<1%	<1%
<i>Listening to music</i>	1	<1%	<1%
<i>McDonalds</i>	1	<1%	<1%

How

In relation to *how* they would like to receive support to help with difficult emotions, text was the most preferred method (by 37%, 125 of 342), followed by 32% (109) choosing face to face support (people could select multiple options). Nine people said they did not want support or wouldn't get it, and two explained this in more detail:

"I don't want to share my personal information to the school."

"Nothing, I like to be left alone because I can't trust anyone."

If you need or may need help in the future dealing with your difficult emotions, how would you like to get support?	Responses	% of 428 answers	% of 342 people
Text	125	29%	37%
Face to face appointment	109	25%	32%
App or online	62	14%	18%
Live messaging	33	8%	10%
Support group	24	6%	7%
Peer lead support	13	3%	4%



Skype	11	3%	3%
Face to face drop in	5	1%	1%
Other	46	11%	13%
<i>Friend/family</i>	22	5%	6%
<i>Don't want any/none</i>	9	2%	3%
<i>Phone call</i>	2	<1%	1%
<i>WhatsApp, Instagram or Snapchat</i>	2	<1%	1%
<i>Talk with my key worker</i>	1	<1%	<1%
<i>Face Time</i>	1	<1%	<1%
<i>Myself</i>	1	<1%	<1%
<i>Talking</i>	1	<1%	<1%
<i>Real life people I trust</i>	1	<1%	<1%
<i>Don't want any</i>	1	<1%	<1%
<i>Find a trusted adult</i>	1	<1%	<1%
<i>Memes</i>	1	<1%	<1%
<i>Write to someone anonymously</i>	1	<1%	<1%
<i>Medication</i>	1	<1%	<1%
<i>Discord [an online platform that some youth groups are using to host virtual youth clubs]</i>	1	<1%	<1%

Where

When asked *where* they would like to go to receive this support, 30% (97 of 319) said school, 24% (77) the doctors or a health setting and 21% (67) online. Other comments included doing to individuals such as family and friends rather than a place or setting.

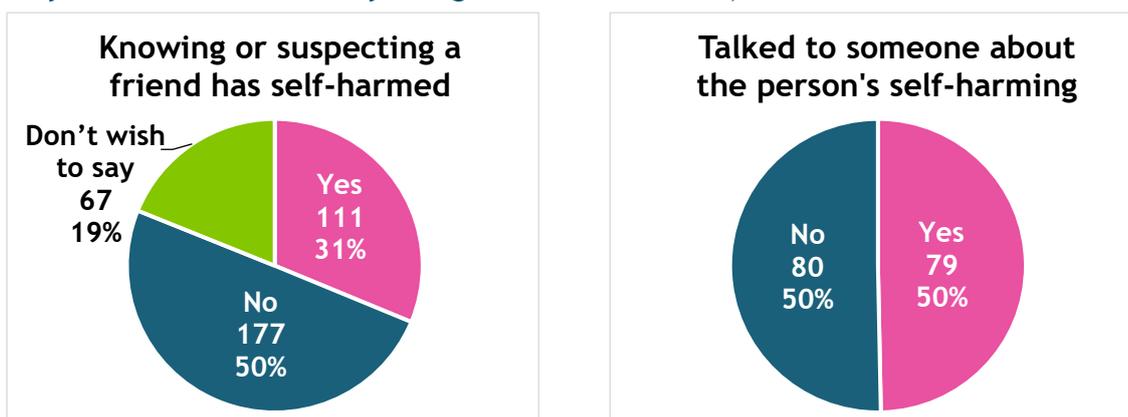
If you need any help with dealing with your difficult emotions, where would you like to go for this support?	Responses	% of 394 answers	% of 319 people
School	97	25%	30%
Doctors/health setting	77	20%	24%
Online	67	17%	21%
Sports centre/club	37	9%	12%
Counselling service	23	6%	7%
Youth club/service	18	5%	6%
Community centre	6	2%	2%
Other	69	18%	22%
<i>Home/family</i>	40	10%	13%
<i>Friends/family</i>	7	2%	2%
<i>Nowhere/None</i>	7	2%	2%
<i>Friends</i>	5	1%	2%
<i>Particular school staff member</i>	1	<1%	<1%
<i>Somewhere I can trust someone (not in school)</i>	1	<1%	<1%
<i>Talk to a responsible adult I trust</i>	1	<1%	<1%
<i>Play on my phone</i>	1	<1%	<1%
<i>Therapist</i>	1	<1%	<1%
<i>Myself</i>	1	<1%	<1%
<i>Away from everyone</i>	1	<1%	<1%
<i>Online YouTube/music</i>	1	<1%	<1%
<i>Nurse</i>	1	<1%	<1%



Self-harm

Nearly one-third (31%, 111) of the 355 who answered the question (or 24% of all 473 survey participants), said they knew or suspected that one of their friends had self-harmed, with a further 67 (19%) not wanting to say.

When asked whether they had spoken to anyone about their friend's self-harm, half (50%, 79 of 159) said yes. When just looking at the 111 who had answered yes to knowing someone who had, or they thought had, self-harmed, 63% (70) said they had told someone. (Eight of the remaining nine who had told someone had answered 'don't wish to say' to the previous question, implying they did know someone they thought had self-harmed.)



107 people told us who they spoke to. 75 of these had said 'yes' to having told someone so it is possible that the other 32 were suggesting who they might talk to if they chose to.

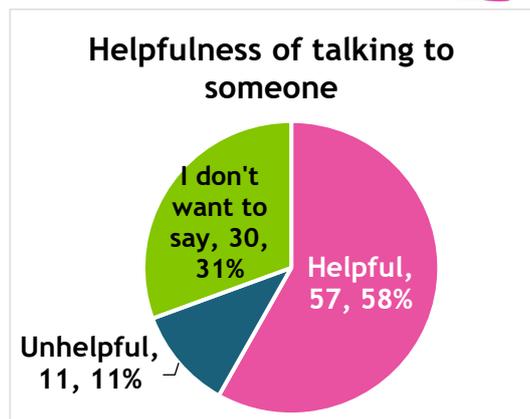
The question only allowed one answer but 23 people used the 'other' option to tell us they spoke to more than one person so these have been added to the totals.

If you did talk to somebody, who did you talk to?	All responses	% of 107 answers	Answers from those who told someone	% of 75 answers
Teacher	37	35%	29	39%
Friends	41	38%	30	40%
Parents/carers	32	30%	20	27%
Other trusted adult	10	9%	9	12%
Support worker at school	4	4%	2	3%
Other family members	7	7%	5	7%
Telephone helpline	1	1%	1	1%
Health worker	1	1%		
Youth worker	1	1%	1	1%
Other	8	7%	3	4%
<i>No-one</i>	5	5%	1	1%
<i>The person who self-harmed</i>	2	2%	2	3%
<i>Shout</i>	1	1%		

Teachers (35% of all who answered) and friends (38% of all who answered) were those most spoken to, followed by parents/carers (30%) and other trusted adults (9%). No-one selected a School Nurse, Mental health support/counselling service or Online support service.



Over half (58%, 57 of 98) felt the person they spoke to gave them a helpful response, rising to two-thirds (66%, 44 of 67) when just looking at those who had said ‘yes’ when asked if they had told someone about a friend’s actual or suspected self-harm. Only 11% (11 of 98) of all answers (or 7% of those who said they told, 5 of 67) said it had been unhelpful, although 31% did not want to say.



Eight people gave reasons for the responses being helpful: three said it resulted in help for their friends:

- “[Be]cause they got my friend help.”* - Support worker, friends, parents/carers
- “They spoke to her and made her stop.”* - Teacher and friends
- “They sorted out the situation.”* - Teacher and friends

Two said that it helped them:

- “They say kind things and help me.”* - Friends
- “Told me what to do.”* - Parents/carers

One said that the person they told spoke to others:

- “They spoke to the parents and the person dealing with it.”* - Teacher

Two just said it helped talking to teachers and friends.

Three people gave reasons for finding the person they told unhelpful:

- “Because they did nothing about it.”* - Teacher
- “They wouldn’t stop.”* - Didn’t indicate they had talked to anyone
- “I hate people.”* - Didn’t indicate they had talked to anyone

Two people who had not wanted to say how helpful the response had been were worried about confidentiality, implying they chose this option because they had not spoken to anyone other than the person themselves, rather than not wanting to comment on the helpfulness.

- “Because no one knows but me.”* - Didn’t indicate they had talked to anyone
- “They wanted confidentiality.”* - Didn’t indicate they had talked to anyone

Two others commented but without selecting either helpful or unhelpful:

- “I was pointed in the right direction.”* - Parents/carers
- “Because I was talking to them to make them better.”* - Didn’t tell anyone



Parents/carers survey

The survey for parents/carers asked the same questions as the young people’s survey but instead asked the parent/carer to answer about their child. The self-harm questions asked about whether their child had self-harmed rather than whether they knew anyone who had.

The survey was not widely distributed by the schools due to coinciding with the national coronavirus lockdown. It was completed by 29 parent/carers.

The responses around healthy lifestyle were similar for both the young people and the parents/carers surveys, with results for healthy eating, time spent exercising and overall rating of healthy lifestyle falling close to each other.

There were differences in the number of adults saying that their young person had accessed service to help them manage difficult emotions, with 48% of adults but only 20% of young people saying yes. This may be due to a difference in perception of the purpose of attending a service or because those that have used services are more likely to respond to the request to answer a survey. Alternatively, it could be due to reluctance of young people to disclose even anonymously that they had accessed services.

The preferences in choice of places to access services to manage emotional difficulties were also different. School was the most popular choice for both adults and young people, but differences were seen in relation to access to online services, with 31% (9) of adults but only 17% (6) of young people choosing this option. Even though there were not many responses to the parent/carer survey, the difference between how adults believe young people would like to receive services and the views of young people themselves may highlight the need to ensure that development of services includes the views and opinions of young people at all stages.

Demographics of those who took part

Residence

27 of the 29 (93%) said they lived in Daventry.

School of child

Most, 90% (26) had children attending The Parker E-ACT Academy. One had a child at DSLV E-ACT Academy, one said their child was 11 but still attending a primary school and one said their child was attending Northampton College’s Daventry campus.

Age of child

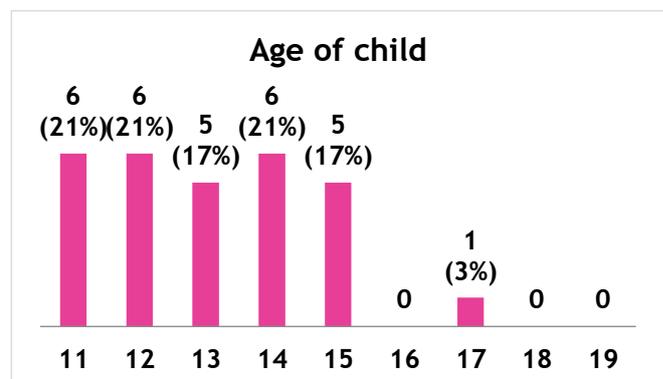
The children the parents/carers were talking about were mostly spread across the 11-15 age range.

Gender

The majority of parents/carers were female (90%, 26). Three (10%) were male. None were transgender.

Sexuality

90% (26) of parents/carers said they were heterosexual, one identified as gay/lesbian, one as bisexual and one as asexual.



Special Educational Needs (SEN)

One of the 29 said that they themselves had Special Educational Needs



Disability

When asked if they considered themselves disabled, 93% (27) said no, one said yes and one said they did not know.

Religion

45% (13) said they were Christian, one that they were Buddhist and 45% (13) were of no religion (one did not want to say).

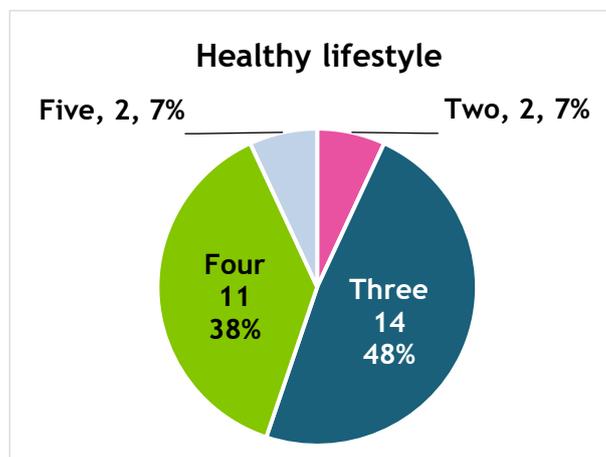
Ethnicity

90% (26) said they were White British, with two identifying as Any other White background and one as Chinese.

Healthy lifestyle

Healthy lifestyle rating

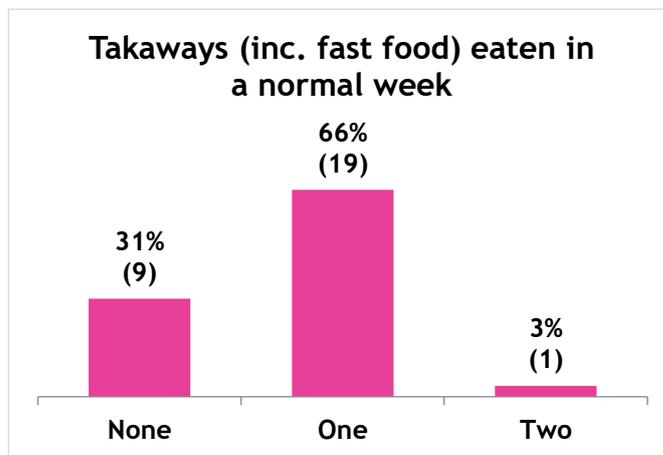
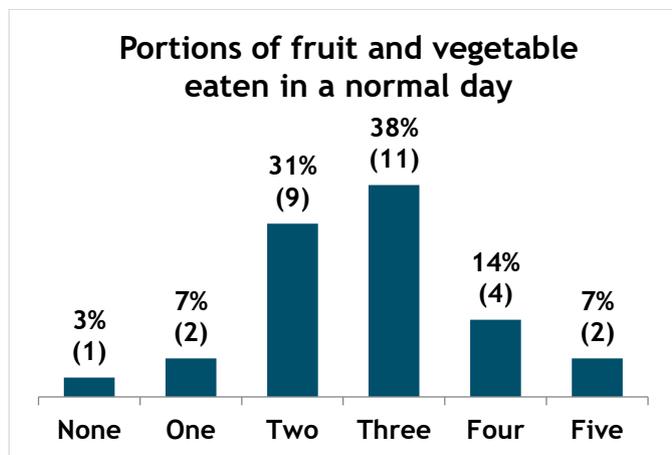
When asked how healthy they thought their child's lifestyle was, 86% (25 of 29) rated it as 3 or 4 (moderately healthy). The average rating was 3.4, the same as for the young people's survey.



Diet

In relation to how many portions of fruit or vegetables their child ate in a normal day, over a third (38%, 11) said three, with 7% (2) reporting that they ate five portions a day.

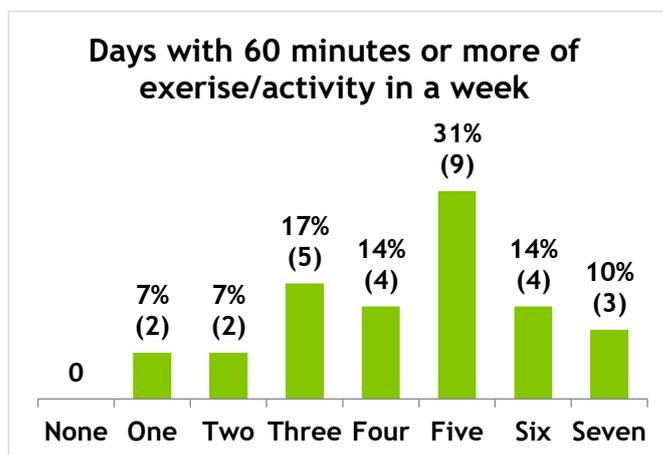
Two thirds of parents (66%, 19) said that their child ate one takeaway in a normal week. One said they ate two and 31% (9) said their child did not eat any.



Exercise

When asked how many days in the last week their child did 60 mins or more of exercise or physical activity, the largest proportion (31%, 9) said they did five days a week. The average number of days was 4.4, 0.5 days higher than the young people's survey.

45% (13) of parents/carers had a child who was a member of a sports team or class that involved exercise.





Spare time

Watching TV, listening to music and using social media were how the most children enjoyed spending their free time, as they were in the young people's survey.

What does your child enjoy doing in their spare time? (Tick as many as you want)	Responses	% of 147 answers	% of 29 people
Watching TV or films	24	16%	83%
Listening to music	23	16%	79%
Using social media	20	14%	69%
Drawing or painting	13	9%	45%
Cooking	13	9%	45%
Playing computer games	12	8%	41%
Reading	9	6%	31%
Sports clubs	7	5%	24%
Dance	7	5%	24%
Crafting	6	4%	21%
Playing an instrument	4	3%	14%
Drama	3	2%	10%
Youth clubs	2	1%	7%
Other:	4	3%	14%
<i>Singing/Karaoke</i>	2	1%	7%
<i>Board games</i>	1	1%	3%
<i>Spending time with friends, going to the park</i>	1	1%	3%

Dealing with difficult emotions

79% of parents/carers (23) thought that when life was difficult for their child talking to a parent/carer helped them deal with this. This is much higher than the 28% of young people who gave that answer. The other top answers were more similar to those given by the young people.

When life feels difficult for your child, what helps them to deal with this?	Responses	% of 129 answers	% of 29 people
Talking to a parent/carer	23	18%	79%
Doing an activity they enjoy	16	12%	55%
Talking to someone they trust	16	12%	55%
Listening to music	14	11%	48%
Talking to friends	12	9%	41%
Talking to a trusted adult, e.g. a coach, youth leader, teacher, etc.	10	8%	34%
Writing their emotions down	8	6%	28%
Taking themselves out of the situation	8	6%	28%
Exercise/Sport	7	5%	24%
Dancing	6	5%	21%
Drawing	3	2%	10%
Online help	2	2%	7%
Listening to calming sounds	2	2%	7%
Meditation/Yoga	0	0%	0%
None of the above	1	1%	3%
Other: Being around a pet	1	1%	3%



Use of services

Services used

48% of parents/carers (14) said their child had accessed support to help them manage their emotional health, compared with 20% of young people. It is likely that parents/carers of those who had used services were more likely to voluntarily complete the survey.

CAMHS (22%), Doctors (22%), Counselling services (19%) and School nurse (19%) were the most accessed services.

Which services have you accessed to help you to manage your emotional health?	Responses	% of 25 answers	% of 14 people who had used a service	% all 27 survey responses
CAMHS (Child and Adolescent Mental Health Service)	6	24%	43%	22%
Doctors	6	24%	43%	22%
Counselling services, such as Time2Talk	5	20%	36%	19%
School nurse	5	20%	36%	19%
Telephone helpline, such as Childline	1	4%	7%	4%
Other:	2	8%	14%	7%
<i>Private counsellor</i>	1	4%	7%	4%
<i>Staff within school/at dance classes</i>	1	4%	7%	4%

Difficulties with services

Eight parents/carers had experienced difficulties in trying to access services for their young person. Three had experienced long waiting times, two were worried about what people might think, one person found the services not being available outside of school/work hours difficult, and one person was not aware of what services were available. Four people gave other answers:

“Doctor was unable to help and signposted back to school (which she felt uncomfortable talking to).”

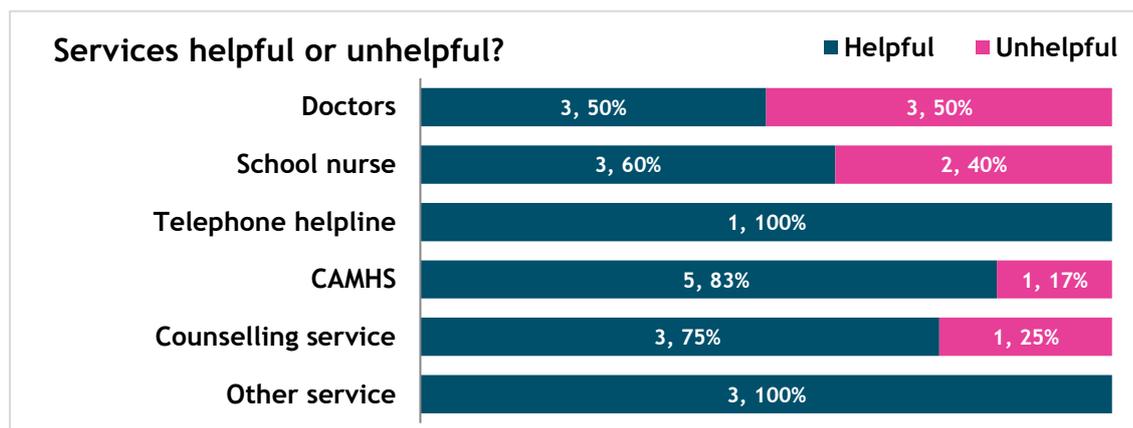
“Was offered school nurse but never received appointment.”

“Private healthcare is expensive.”

“Doesn’t feel comfortable talking to an adult she doesn’t know.”

Helpfulness of services

15 people rated services they had used. CAMHS was the service used by more than one person that was most rated as helpful by five of six parents/carers.





The three other services rated as helpful were Cleft team psychologist, School support and Private therapist. One person commented how CAMHS and/or counselling services were helpful because of “the way they have helped us cope.”

Future services

What

Workshops to learn wellbeing skills (e.g. mindfulness) were seen by parents as something that could help their young people feel better (57%), with peer support (54%) and counselling services (43%) also seen as useful. These answers were all less chosen by the young people.

When things are difficult, what would you like your child to be able to do in Daventry to help them feel better?	Responses	% of 104 answers	% of 28 people
Workshops to learn wellbeing skills	16	15%	57%
Peer support	15	14%	54%
Taking exercise	14	13%	50%
Counselling services	12	12%	43%
One to one support with a professional	12	12%	43%
Structured support programmes	9	9%	32%
Expressing themselves through art	9	9%	32%
Sport or community groups	6	6%	21%
Support group	5	5%	18%
Expressing themselves through music	4	4%	14%
Crisis support	2	2%	7%

How

In relation to how parents think their child would like to receive service to face to face (52%), via apps or online (41%) were the most popular choices. These are similar to those chosen by young people.

If your child needs or may need help in the future dealing with your difficult emotions, how do you think they would like to get support?	Responses	% of 70 answers	% of 29
Face to face appointment	15	21%	52%
App or online	12	17%	41%
Live messaging	11	16%	38%
Text	8	11%	28%
Support group	8	11%	28%
Peer lead support	8	11%	28%
Face to face drop in	7	10%	24%
Skype	1	1%	3%

Where

Parents said that school (59%) or counselling service (59%) were the places they would most like to see their child receive support to help them manage their difficult emotions.



If your child needs any help with dealing with their difficult emotions, where would you like them to go for this support?	Responses	% of 76 answers	% of 29 people
School	17	22%	59%
Counselling service	17	22%	59%
Doctors/health setting	13	17%	45%
Online	9	12%	31%
Youth club/service	8	11%	28%
Sports centre/club	5	7%	17%
Community centre	4	5%	14%
Other	3	4%	10%
<i>Parents</i>	2	3%	7%
<i>Family</i>	1	1%	3%

Self-harm

Six parent/carers (21%) knew or suspected that their young person had self-harmed. Five of these had spoken to someone about it, with three having spoken to teachers, one a mental health support or counselling service and one to other family members. Three people had found the response from the person they talked to helpful (from one teacher, one mental health support or counselling service and one other family member). The two others who had spoken to teachers did not want to say if their response had been helpful or unhelpful.

Focus groups

Focus group one - developing ideas for services

The first focus group was to develop ideas of the type of services young people would like to see.

What is good wellbeing?

The group discussed what good wellbeing was to them and gave the following responses:

- Taking care of yourself
- Mental health, relaxation
- Positive, confidence
- Good food, good diet
- Sport/keeping fit
- Good mental health/emotions
- Talking and not being scared to share feelings
- Positive sense of wellbeing



They then came up with two different definitions of good wellbeing:

“Emotional wellbeing is about managing the different emotions that we may feel. The way we look after our bodies with good food, sleep, physical activity and relaxation also helps our emotional wellbeing. We all experience a range of different emotions every day, some are easier than others to manage.”



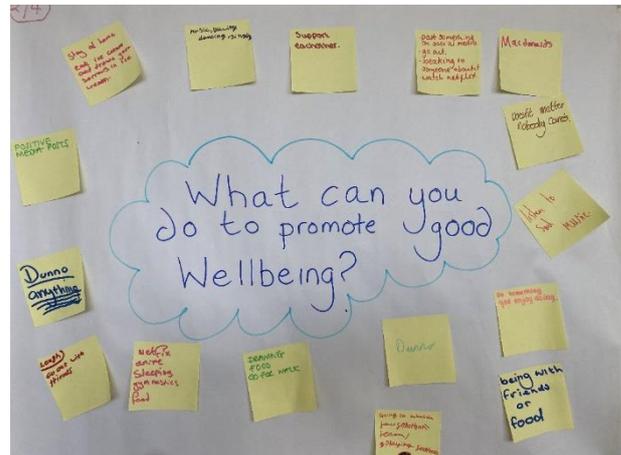
“A positive sense of wellbeing which enables an individual to be able to function in society and meet the demands of everyday life; people in good mental health have the ability to recover effectively from illness, change or misfortune.”

What can you do to promote good wellbeing?

The group discussed what they could do themselves to promote their own wellbeing. They talked about the things that they did when they were not feeling great and the things that made them feel better. Food was a theme that ran through the conversation and we discussed the importance of healthy eating.

Responses:

- Stay at home and eat
- Music, drawing, dancing, singing
- Support each other
- Post something on social media
- Go out and speak to someone about it
- Watch Netflix
- McDonalds!
- Listen to sad music
- Do something you enjoy
- Being with friends or food
- Go to watch your favourite football team
- Go for a walk
- Netflix, anime, sleeping, gymnastics
- Laugh!
- Go out with friends
- Positive media posts
- Doesn't matter nobody cares



What have you got in Daventry already?

The group discussed what they knew already existed in Daventry. They talked about activities such as roller skating, which they enjoyed. The group discussed the fact that they did like to take part in sport and exercise, but they preferred a less structured fun sport that was not competitive. As a group they discussed the barriers that may be in place for other young people in Daventry who may not be able to access such activities due lack of money or caring responsibilities. They talked about some of the support services that were available locally, such as CAMHS and Time2Talk but they did not speak positively about these services. As a group we discussed the fact that the services may have worked well for other young people living in Daventry and that it is still a service that is available.

Responses:

- Swimming
- Army cadets
- Food - McDonalds
- Hospitals and charities
- Shops, country park
- Coffee shops
- Leisure Centre
- Young carers
- CAMHS
- Parents
- My room, my iPad, my phone
- Crappy time to talk!





What is needed in Daventry?

When the group were asked ‘What is needed in Daventry?’ they spoke of some services which were already available such as an anonymous texting service. We asked the group to think about what all young people in Daventry would need and after coming up with some ideas they concluded that better understanding and awareness of what is already available is needed. With this in mind, they spoke about a wellbeing festival to inform more young people and their families of what was already out there.

Responses:

- More mental health centres that can make people happier in town - 24hrs!
- Young kids to have a ‘hide out’ to get away from parents
- More school trips
- Swimming in school
- Fundraisers to pay for things to help others
- Free sweet stalls/free giveaways
- Animal therapy
- More clothes shops
- Parks, fun centre
- Proper gyms in schools
- Centre you can go to talk to someone
- Better awareness of what’s out there
- To see my Dad!
- Anonymous texting service
- Stress toys
- Wellbeing festival



Focus group two - wellbeing festival/fete suggestions

The second focus group, mostly composed of the same people as took part in group one, discussed the particulars of the event they wanted to hold. They had decided on a wellbeing festival that would inform the students and their families of what services are already available to young people in Daventry.

What would this festival consist of?

Responses:

- Within school on a drop down day (non-structured day)
- Old summer type fete events
- Stands from health and wellbeing providers (awareness/ask questions)
- Festival for the whole school
- Food carts
- Freebies/giveaways
- Lessons indoors put on by services

What stalls/who would you want at the event?

Stalls:

- Drug and alcohol advice
- Emergency services
- Northamptonshire sport
- CAMHS/Mental Health services
- Rape Crisis
- Universities

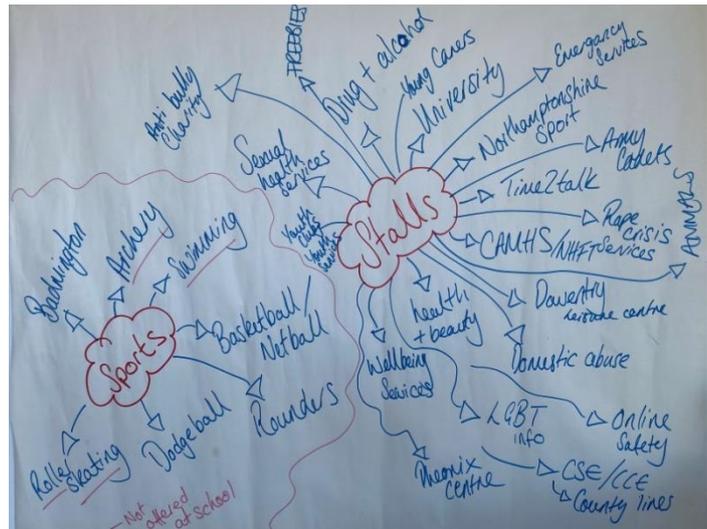




- Anti-bullying
- Youth clubs/services
- Health & Beauty
- LGBT info
- Online safety
- Phoenix centre

Sports:

- Archery
- Swimming
- Dodgeball
- Rounders
- Badminton
- Roller-skating
- Swimming
- Basketball/Netball
- Sports not offered at school



Any other specifics

On the day:

They discussed what their ideal day would look like and that there would be three or four indoor sessions/lessons that students could pick to take part in. They would be able to choose from things like mindfulness, mental health first aid, confidence boosting, journal writing. They would all be things that would boost or help good emotional wellbeing. They wanted the sessions to be provided by organisations that already provided services in the area. They also wanted to include taster sessions of non-competitive sports such as roller skating.

- Three or four indoor sessions
- Sign up to sessions before hand
- School fete outside
- Year groups around the marketplaces/stalls
- Open to families/parents towards end of school day to share experience together/educate parents

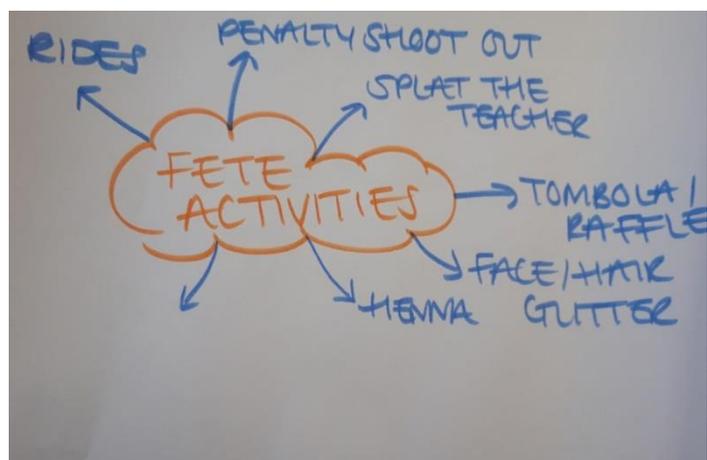
People:

- Councillors
- Managers of services
- Parents and families (part of the day)

Fete:

The students wanted a selection of fete games and rides on the day. They felt that it would be a reward for those that have attended would give people something to look forward to but could also act as a fundraiser for a local wellbeing charity.

- Fund raising
- Getting people together
- Encourage social atmosphere
- More awareness about services
- Feel good day





The young people that we spoke to knew that food on the day would be important and talked about the healthy alternatives to junk food that young people are usually offered. They talked about some students making some of the food to sell and some being provided by outside caterers.



Interviews

Seven semi-structured interviews were conducted by Time2Talk with young people who were currently accessing their service and had experience of self-harming. Illustrative comments have been included below.

Question 1: Can you talk a bit about the first time you self-harmed? Was there anything in particular that led up to it?

In response to this question young people talked about how incidents of self-harm often occurred when they were experiencing strong emotions that they were struggling to deal with.

“After an argument, felt really sad, cut myself with a razor whilst shaving, so initially an accident, but it felt good, and became a way of coping.”

“Stress over college and parents arguing.”

“I was upset, I had been friends with my best friend since we were at infant school, no one was talking to me and I felt alone, my mum said it will be OK in a few days but it wasn’t. I cut myself with a compass point, that’s when it started.”

Question 2: Are there things that helped you manage your (or your desire to) self-harm better?

Young people identified that the use of diversionary tools that helped to move their focus away from the desire to self-harm had been useful, as well as the opportunity to discuss and understand their emotions.

“My mum found out and I was taken to see the doctor who said it might help to see a counsellor. The counsellor helped me understand my feelings and give me the things to do, so that I didn’t cut myself and I could cope with the feelings that I was having.”

“Rubber band on wrist, music, TikTok, cats - stroking and talking to them.”



“No not at the moment. Sometimes it helps to talk to someone, later not at the time.”

“Play football and watch football helped me take the desire away.”

Question 3: Have you ever used the internet or apps to get support or guidance around self-harm? If yes can you share with us the kinds of sites you visited and how useful or not, they were for you?

The internet was not used by the young people interviewed to research or find support around self-harming, but some participants did use apps designed to help them manage emotions and to allow them to express what they were feeling.

“Calm Harm - Didn’t stop completely self-harm but lessened the need.”

“Daylio. Every day I write down how I am feeling and you can pick up when or what dates. I found the site good”

“No, I have done no research.”

Question 4: Can you share with us what really doesn’t help or work for you?

The things that had not worked for interviewees tended to be different from person to person with no obvious overarching themes. Various elements of receiving support were listed as problematic by different people, suggesting that offering support in a variety of ways may help engage a wider proportion of young people.

“Find phoning crisis line difficult if I don’t know the person, same for Samaritans. I find it really hard to talk about my problems and feelings to people who I don’t know.”

“I didn’t want anyone to know what I was doing so I hid it.”

“People crowding me and fuss over me. I want my own space sometimes to be on my own.”

“People saying they want to help me and they don’t (adults at school) so no support.”

Question 5: Are there things that annoy you about people’s attitudes or responses to self-harm?

The lack of understanding that self-harming can often happen as a result of emotional distress and a view held by some individuals that people who self-harm were attention seeking were the issues that most interviewees mentioned.

“Young people say I do it for attention / When I am crying or screaming inside.”

“You’re attention seeking - faking it - manipulation.”

“I don’t talk about it much so not many people know, but I’m not going to kill myself some people think that’s what it’s about.”

“When people say ‘Don’t do that you are beautiful don’t harm yourself’ or they say ‘Stop it, just sort it out, don’t do it’ or ‘You are just doing it for attention.’”

Question 6: Can you share with us what really has helped or worked for you?

Young people said that talking about their feelings and emotions to people who understood and did not judge them had really helped them cope with their self-harming. The reduction in isolation that this brought about had also been helpful to them.



“Opening up about it. Gaining a wider support system, weight lifted, not hidden. Being in school amongst friends.”

“People understanding. People listening to my feelings/experiences without judgement.”

“Learning to distract myself and learning to keep busy when I feel I want to do it.”

“Talking to a counsellor, she showed me how not to bottle up my emotions and talk to someone.”

Question 7: Are there things that are particularly helpful about some people’s attitudes or responses to self-harm?

The people around them trying to approach the issues and results of self-harm in as calm a way as possible was something that young people said was helpful to them.

“When people have a calm reaction - Similar to if a child cuts their knee, this is what needs to be done. Not shocked or over reaction.”

“People being straight up with me, which lessens confusion. Good friends to listen. Removing dangers (mum removing razors).”

“When they know I’ve done it, but don’t make a big deal or a friend holding my arm.”

“Understanding that we are not all the same.”

Question 8: Do you feel in control of your self-harm or would you say it was in control of you? (What makes it feel like that?)

There was an almost even split between those young people who felt in control of their self-harming and those who felt it was in control of them. Some interviewees said that their ability to feel in control depended on the situation they were in and the strength of the emotions they were dealing with. The responses to this question could have been affected by the length of time young people had been receiving support with Time2Talk for their self-harming.

“In control of me, overwhelming feeling that leaked into all aspects of my day and thought processes.”

“I did feel in control of cutting but now I am in control of not cutting but my feelings are mine.”

“It depends on the strength of the feeling. When the feelings are strong I feel out of control to stop it. Then it feels like it is in control of me.”

“Yes, I control it.”

Question 9: What would you like other people (such as parents, teachers, health staff, counsellors, and youth workers) to understand and to change to make things better for young people who might self-harm?

Young people said that other people developing a better understanding of the issues around self-harm and listening to their experiences, as well as more access to services to support them would make things better for young people who self-harm.

“I would like them to be more educated about self-harm so they could understand it more so they wouldn’t say unhelpful, hurtful things. I would like them to listen and try to understand my experience. Teachers need more training. Doctors also.”

“More places to talk, not having to wait to talk.”



“Have a better understanding of self-harm and why we go to hide it, because something is wrong and we might need help and support.”

Question 10: Is there anything else (such as a service), that you think would help you or others?

Drop-in services and support groups were highlighted as something that would be helpful, with the opportunity to access services quickly and in an anonymous way also being seen as important.

“Would like places to go which are more anonymous, so it’s not obvious to others. Feels everyone would think negative things if they saw me going into a Crisis Café, like ‘She wants to kill herself’. Longer term counselling with someone who I trust.”

“Not having to wait too long to talk to someone if I feel like talking about it.”

“Time2Talk helped me.”

“A group or something to help others.”

“The Trevor project for people from the LGBTplus.”

“Somewhere you could just drop in.”

Acknowledgements

We are very grateful to all those who took the time to share their views and experiences with us. We would especially like to thank all who shared our survey, including:

- The Parker E-ACT Academy, Daventry
- DSLV E-ACT Academy, Daventry
- Time2Talk, Daventry
- All the organisations and people who shared the survey on social media.



About Healthwatch Northamptonshire

Healthwatch Northamptonshire is the local independent consumer champion for health and social care. We are part of a national network of local Healthwatch organisations. Our central role is to be a voice for local people to influence better health and wellbeing and improve the quality of services to meet people's needs. This involves us visiting local services and talking to people about their views and experiences. We share our reports with the NHS and social care, and the Care Quality Commission (CQC) (the inspector and regulator for health and social care), with recommendations for improvement, where required.

Our rights and responsibilities include:

- We have the power to monitor (known as “Enter and View”) health and social care services (with one or two exceptions). Our primary purpose is to find out what patients, service users, carers and the wider public think of health and social care.
- We report our findings of local views and experiences to health and social care decision makers and make the case for improved services where we find there is a need for improvement
- We strive to be a strong and powerful voice for local people, to influence how services are planned, organised and delivered.
- We aim to be an effective voice rooted in the community. To be that voice, we find out what local people think about health and social care. We research patient, user and carer opinions using lots of different ways of finding out views and experiences. We do this to give local people a voice. We provide information and advice about health and social care services.

Where we feel that the views and voices of Healthwatch Northamptonshire and the people who we strive to speak on behalf of are not being heard, we have the option to escalate our concerns and report our evidence to national organisations including Healthwatch England, NHS England and the Care Quality Commission.

Find out more at www.healthwatchnorthamptonshire.co.uk





About Connected Together

Connected Together Community Interest Company (CIC) is the legal entity and governing body for Healthwatch Northamptonshire.

The remit of the Connected Together CIC includes:

- Contract compliance
- Legal requirements
- Financial and risk management
- Sustainability and growth
- Agreeing strategy and operations
- Agreeing policies and procedures



Connected Together
First for Community Engagement

Connected Together CIC is a social enterprise and a partnership between the University of Northampton and Voluntary Impact Northamptonshire. It aims to be first for community engagement across the county of Northamptonshire and beyond.

By using our expertise and experience, we can help you in delivering community engagement programmes including workshops, research, surveys, training and more. Contact us to find out how we can help your community.

We welcome ideas and suggestions for projects that benefit Northamptonshire and its community.

Find out more at www.connectedtogether.co.uk





Appendix - Young people survey questions

1. How old are you? (This survey is only for 11-19 year olds)

11 / 12 / 13 / 14 / 15 / 16 / 17 / 18 / 19

2. Do you live in Daventry? (This survey is only for people who live in Daventry)

Yes / No

3. What School do you go to?

Home educated / DSLV E-ACT Academy / The Parker E-ACT Academy / Daventry Hill School / Other (please specify)

Emotional wellbeing is about managing the different emotions that we may feel. The way we look after our bodies with good food, sleep, physical activity and relaxation also helps our emotional wellbeing. We all experience a range of different emotions every day, some are easier than others to manage.

4. How healthy would you say your lifestyle is? (With 1 being not very healthy and 5 being very healthy)

1 / 2 / 3 / 4 / 5 /

5. How many portions of fruit and vegetable do you eat in a normal day? (One portion is 1 medium sized piece of fruit or vegetable such as a banana, apple, pear or orange)

None / 1 / 2 / 3 / 4 / 5 / 6 or more

6. How many takeaways do you have in a normal week? (Including fast food restaurants e.g. McDonald's)

None / 1 / 2 / 3 / 4 / 5 / 6 / 7 or more

7. It is recommended that young people take 60 mins of physical activity/exercise every day. This may not be in a single one hour session but can be in several parts over the day. How many days in the last week did you get 60 mins or more of exercise or physical activity? (Physical activity simply means movement of the body that uses energy. e.g. Walking to school or skateboarding, you can include your games/PE lessons too)

None / 1 / 2 / 3 / 4 / 5 / 6 / 7

8. Are you part of a sports team or class that involves exercise?

Yes / No

9. What do you enjoy doing in your spare time? Tick as many as you want.

Youth clubs / Sports clubs / Dance / Drama / Playing an instrument / Drawing or painting / Reading / Listening to music / Watching TV or films / Using social media / Cooking / Playing computer games / Crafting / Other (please tell us what)

10. When life feels difficult for you, what helps you to deal with this? (Tick as many as you want)

Doing an activity you enjoy / Online help / Talking to someone you trust / Listening to music / Listening to calming sounds / Writing your emotions down / Talking to friends / Taking yourself out of the situation / Exercise/Sport / Drawing / Dancing / Meditation/Yoga / Talking to a trusted adult, e.g. a coach, youth leader, teacher, etc. / Talking to a parent/carer / None of the above / Other (please tell us what)



11. Have you ever needed to access any services to help you to manage your emotional health?

Yes / No

12. If yes, which services have you accessed to help you to manage your emotional health?

Telephone helpline, such as Childline / Counselling services, such as Time2Talk / CAMHS (Child and Adolescent Mental Health Service) / School nurse / Doctors / Online support services / ChatHealth (text the school nurse) / Not used any / Unsure about what is available / Other (please tell us)

13. If you have used services, did you have any difficulties using them? If no leave blank

Long waiting times / Services don't know about my issues / The right service was not available / Wasn't able to attend due to transport difficulties / Not aware of a service being available / Worried about confidentiality / Only available in a setting I didn't feel comfortable in / Not available outside of school hours, e.g. after school/weekends / Worried about them telling my parents or other people (confidentiality) / Worried about what people will think (stigma) / No difficulties / Other (please tell us what)

14. Were the services helpful or unhelpful? (Only rate the services you have used, otherwise leave it blank)

Telephone helpline, such as Childline / Counselling service, such as Time2Talk / CAMHS (Child and Adolescent Mental Health Service) / School nurse / Doctors / Online support services / ChatHealth (text the school nurse) / Other [choice of helpful or unhelpful for each]

What made the services helpful or unhelpful? (Please let us know which of the services you are talking about)

15. When things are difficult, what would you like to be able to do in Daventry to help you feel better?

Peer support (talking to others who have similar concerns) / Support group / Crisis support / Counselling services / Sport or community groups / Structured support programmes (e.g. a 6 week programme) / Expressing yourself through music (e.g. being in a band/choir/orchestra) / Expressing yourself through art (e.g. painting/drawing/dance/drama, etc.) / Taking exercise (e.g. running/swimming/gym, etc.) / One to one support with a professional / Workshops to learn wellbeing skills, e.g. mindfulness / Other (please tell us what)

16. If you need or may need help in the future dealing with your difficult emotions, how would you like to get support?

Live messaging / App or online / Face to face appointment / Face to face drop in / Text / Skype / Support group / Peer lead support / Other (please tell us what)

17. If you need any help with dealing with your difficult emotions, where would you like to go for this support?

Youth club/service / Doctors/health setting / School / Community centre / Sports centre/club / Counselling service / Online / Other (please tell us where)

The following questions are about self-harm, if you would prefer to skip these please go on to question 22

18. Do you know or suspect that one of your friends has self-harmed?

Yes / No - go to question 22 / Don't wish to say

19. If yes, did you talk to anyone about the person you know having self-harmed?



Yes / No

20. If you did talk to somebody, who did you talk to?

Teacher / School nurse / Friends / Parents/carers / Other family members / Other trusted adult / Support worker at school / Health worker (e.g. doctor or nurse) / Mental health support/counselling service (e.g. Time2Talk) / Youth worker / Telephone helpline (e.g. Childline) / Online support service / Other (please tell us who)

21. If you did talk to somebody, was their response helpful or unhelpful?

Helpful / Unhelpful / I don't want to say

Please tell us why

22. What is your ethnic group?

African / Arab / Asian British / Bangladeshi / Black British / Caribbean / Chinese / Gypsy, Roma or Irish Traveller / Indian / Pakistani / White British / Any other White background / Any other Black background / Any other Asian background / Any other mixed background / Prefer not to say / Don't know

23. Do you consider yourself to be disabled?

Yes / No / Don't know / Prefer not to say

24. Are you:

Heterosexual/straight / Gay/lesbian / Bisexual / Prefer not to say / Don't know / Other (please tell us)

25. Do you have special educational needs? (SEN)

Yes / No / Don't know / Prefer not to say

26. Please say which gender you identify as

Male / Female / Non-binary / Other / Don't know / Prefer not to say

27. Are you transgender?

Yes / No / Prefer not to say / Don't know

28. What is your religion?

Christian / Muslim / Hindu / Sikh / Buddhist / Jewish / Other religion / No religion / Don't know / Prefer not to say



Contact us

Address: Healthwatch Northamptonshire
Moulton Park Business Centre
Redhouse Road
Northampton
NN3 6AQ

Phone: 0300 002 0010

Text: 07951 419331

Email: enquiries@healthwatchnorthamptonshire.co.uk

Website: www.healthwatchnorthamptonshire.co.uk

Facebook: [Healthwatchnorthamptonshire](https://www.facebook.com/Healthwatchnorthamptonshire)

Twitter: [@HWatchNorthants](https://twitter.com/HWatchNorthants)



We confirm that we are using the Healthwatch Trademark (which covers the logo and Healthwatch brand) when undertaking work on our statutory activities as covered by the licence agreement.

If you require this report in an alternative format please contact us at the address above.

© Copyright Healthwatch Northamptonshire 2020

Part of Connected Together Community Interest Company Registered in England and Wales.
Company No. 8496240

Email: hello@connectedtogether.co.uk

Facebook: [ConnectedtogetherCIC](https://www.facebook.com/ConnectedtogetherCIC)

Twitter: [@ConnectedCIC](https://twitter.com/ConnectedCIC)

Website: www.connectedtogether.co.uk

