Response to the Government’s consultation on the ‘Transforming children and young people’s mental health provision: a green paper’

February 2018

Introduction

1. The Nuffield Council on Bioethics is an independent organisation that examines and reports on ethical issues arising from developments in biological and medical research that concern the public interest. We welcome the opportunity to respond to the Government’s green paper, and endorse its observation that “it is our collective duty to ensure that we take action to promote and protect the mental wellbeing of our children and young people.”

2. The Council’s response draws on the conclusions and recommendations of our reports on Children and clinical research: ethical issues¹ and Cosmetic procedures: ethical issues.² We focus on four key points.

1) “A better journey through mental health services, working in partnership”

4. We welcome the participatory approach adopted by the green paper in relation to young people’s ‘journey through mental health services’. We particularly welcome the observation at paragraph 41 that “in order to make changes that are meaningful to children, young people, parents and carers, we need to ensure their continued involvement in all key decisions – about their care, about service design and evaluation, and about commissioning.” The importance of involving children and young people in the decisions and policies that affect their lives was a central theme, and an integral part of the ethics framework, in our report on Children and clinical research: ethical issues. We urge the Government to continue to promote meaningfully young people’s involvement in mental health provision.

2) “Every child will learn about mental wellbeing”

5. The impact of appearance dissatisfaction on young people’s mental health and wellbeing is a key focus of concern. We recommend that the Department for Education act to ensure that all children and young people have access to

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evidence-based resources on body image, whether through PSHE lessons or through other (compulsory) elements of the curriculum.³

6 In terms of your pledge to consult on draft statutory guidance on RSE (and potentially PSHE) in paragraph 105, the Be Real campaign (which evolved from the All Party Parliamentary Group on Body Image and Campaign for Body Confidence) develops and promotes evidence-based teaching resources on body image.⁴ They campaign for such materials to be included in the PSHE curriculum and recommend that PHSE should be compulsory. We emphasise the importance of all children having access to such resources.

3) Body image

7 We welcome a focus on body image concerns (paragraphs 76–7). Over the course of our two-year inquiry on cosmetic procedures, our findings highlighted the impact that appearance dissatisfaction has on young people. We found many sources that suggest that appearance dissatisfaction is growing in the UK and in other western countries, especially among young people. During our inquiry, we spoke to a number of groups of young people who all emphasised the degree of pressure to obtain “the perfect body”.⁵

8 While unhappiness and dissatisfaction with appearance are more likely to be identified in girls than boys, the evidence is complex and changing. The Government strategy should consider emerging evidence on boys’ body image concerns, as well girls’.⁶

4) Social media

9 We welcome the Government’s focus on determining the impact of social media on young people’s mental health. Exponential growth in the use of social media and a growing ‘visual diet’ of appearance-related images have been associated with greater unhappiness about appearance, particularly among children and young people.⁷ However, it is imperative that further research is undertaken to confirm these associations, and how they might be addressed in the future.

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⁴ Be Real: the campaign for body confidence (2018), available at https://www.berealcampaign.co.uk/.
⁵ Nuffield Council on Bioethics (2017) Cosmetic procedures: ethical issues, see paragraphs 1.8–1.13
10 We support the Government’s intention to convene a working group of social media and digital sector companies to explore what more they can do “to help keep children safe online, in terms of the impact of the internet on their mental health and wellbeing” (paragraph 113). This echoes recommendation 4 of our cosmetic procedures report, which calls for the social media industry (including Facebook / Instagram, Snapchat, Twitter, and YouTube) to collaborate to establish and fund an independent programme of work, in order to understand better how social media contributes to appearance anxiety, and how this can be minimised; and to take action accordingly.

11 We also welcome the Government’s recognition (paragraph 56) that there is a need for up-to-date data on the prevalence of mental health problems amongst children and young people, and the commitment to commission a survey – which will include a focus on the impact of social media – every seven years from 2018. In addition to these seven-yearly surveys, however, we suggest that the Government should encourage further independent research to be undertaken on the impact of social media on young people’s appearance anxiety in order to contribute to a fuller account of evidence in this area, and should strongly encourage social media companies to do likewise.

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