

Promoting Emotional Well-Being

**Keeping young people with
learning disabilities emotionally strong**

SUMMARY

Young people with learning disabilities want to enjoy full, happy lives. However, they are at higher risk than other young people of developing mental health problems, especially at times of stress and change.

Positive mental health must be promoted among young people with learning disabilities and schools and colleges have a crucial role to play in this. Friends and family, meaningful activities, good physical health, a sense of self-worth and control over one's life are the building blocks of emotional well-being. Services need to develop plans to address these needs.

BACKGROUND

Young people with learning disabilities are at high risk of developing mental health problems – more so than young people who do not have learning disabilities. Factors which protect some children and young people against the stress and adversities they will encounter include having a measure of control over one's life (Rutter, 1984). Others include:

- family-related factors: strong, stable relationships, including with at least one adult; clear, firm parenting styles; a high standard of living and good housing.
- school and community-related factors: good relationships and role models; safe and inclusive environments; high expectations and shared values; a range of opportunities; a wide support network.

There is a lack of research into what promotes resilience in young people with learning disabilities.

THE INQUIRY

In response to the growing evidence that their mental health needs are not being met, the Foundation for People with Learning Disabilities held a one year (2001–2002) UK-wide inquiry to look at meeting the mental health needs of young people with learning disabilities aged 13 to 25.

It was set up to review and report on interventions to promote the emotional well-being of young people with learning disabilities as well as identify good practice and make recommendations for developments in policy and practice. The inquiry committee considered evidence from a range of sources, including accessible evidence forms from young people with learning disabilities and feedback from focus groups facilitated by two young people with learning disabilities, Emma Wilson and David Green, as well as information from family carers.

The committee wanted to discover what families and services can do to help young people with learning disabilities develop resilience – the capacity to cope with stress and difficulties – and protect their emotional well-being.

MAIN FINDINGS

Supporting the family

Parents have a unique insight into their children's needs and 'parents' observations must be heard', the inquiry was told. The central role that families often play in young people's emotional well-being was highlighted many times. 'My baby sister makes me happy. My family makes me happy as well,' said one young person.

Promoting children's and families' coping skills from an early age is important to encourage good mental health and avoid problems at stressful times. The partnership between families and professionals plays a crucial role in addressing this.

Some of the most vulnerable families, such as those from minority ethnic communities, lone parents and parents with learning disabilities, may need greater support.

Taking risks

Independence is fundamental to self-esteem and young people need support to try out new activities. They also need to be kept safe. Parents are more likely to allow their sons and daughters to take risks if they know and trust the staff involved (Alaszewski 1999).

'Jason benefited from going on adventure holidays and from learning to use public transport. When he was mugged, he was supported to take control by reporting the attack and giving evidence. Supporting his dreams has meant he is now leading an active and independent life with support,' one parent told the inquiry.

Health

There needs to be better screening, early diagnosis and treatment of physical health problems, which are frequently ignored or misdiagnosed in people with learning disabilities, who are at higher risk of some conditions. Primary care staff need extra training, advice and support from specialist services to ensure that they can provide proper care to young people with learning disabilities.

Planning and implementing

Young people wish to be directly involved in all aspects of planning for their future, including individual education plans and transition plans;. They may need support for example through pictures, photos, signs, symbols or appropriate computer packages to make informed decisions about their lives and in implementing these decisions.

Education

The role of schools and colleges in young people's lives is central to helping emotional growth and well-being. Curriculum activities which promote independence and explore relationship issues are beneficial in supporting the mental health of these young people (Lawson & Fergusson, 2001). Initiatives such as peer mentoring and support need to be expanded to assist pupils with learning disabilities in mainstream education. Link and taster courses are a good way of forward planning, and are helpful for easing the transition to College.

Work, purposeful activity and friends

'Work and social life makes me laugh and happy,' one young person told the inquiry. There are currently insufficient supported employment and training opportunities for young people with learning disabilities. Leisure and social activities that enable young people to make and keep friends need to be developed and supported by service providers, for example by using local authority direct payments schemes, whereby young people employ helpers directly to support them in their social life.

Advocacy and communication

Young people with learning disabilities need access to independent advocacy. They need support in communicating and exercising control over their lives – key elements of staying mentally healthy. Communication passports, which record what young people want to say about themselves, including their likes, dislikes, aims, abilities and how they prefer to communicate, are one method (Foundation for People with Learning Disabilities, 2000, 2002). Staff need communication training, including how to listen to young people and their families, as a precursor to developing a genuine partnership with them.

KEY RECOMMENDATIONS

The continuing problem of poverty amongst this group needs to be urgently addressed. The UK government has a target of halving child poverty by 2010 and eradicating it by 2020. This timetable should be amended so that all families where there is a disabled child are out of poverty by 2010.

The government should fund research into the effectiveness of early intervention and evaluate treatments and therapies for young people with learning disabilities and mental health problems.

Local strategic partnerships should develop plans which address the need to improve the quality of life of young people with learning disabilities and their families.

Relevant statutory services (e.g. health, social care, education, housing, transport, employment) should also address these needs in their plans, which should be underpinned by clear protocols for partnership working.

Health promotion agencies should ensure that staff, carers and young people have accessible information about promoting their emotional well-being.

Schools and colleges should help young people to develop their self-esteem and self-efficacy through the curriculum, for example, personal, social and health education (PSHE) and citizenship.

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