



Research Inspired by Service Experts

What support can be offered to young people while on waiting lists for CAMHS?



- There is no consistent approach to the help offered to children and young people on CAMHS waiting lists.
- This summary found little evidence to tell us about what is currently being offered to children and young people on CAMHS waiting lists.
- There is some evidence showing that offering support while on waiting lists improves mental health and engagement with treatment.



What did we find?

Citation Top Tip

If you see a little number above a word **like this¹** then go to the references section at the end of this report to see the source of the information.

What are waiting lists for CAMHS and why are they used?

A waiting list for CAMHS is a list of children and young people who are waiting to receive treatment after being referred to CAMHS following their first assessment. Waiting lists are used to provide help to the individuals most in need of treatment, and/or when there are limited resources within services, to ensure everyone is seen and treated.

What are the impacts of waiting lists on mental health?

NHS England introduced standards for waiting lists in 2016 for people waiting for psychological therapies. These targets were that 75% of referrals should be seen and treated within six weeks, and 95% within 18 weeks.¹ But young people still wait on average 13 weeks to start treatment, and 22% wait more than 18 weeks to receive CAMHS treatment.²

Individuals on waiting lists experience worsening mental health, lower motivation to seek help and benefit less from treatment as the waiting period gets longer.^{3,4} So, providing help to those who are waiting for treatment may help to prevent a further decline in mental health.

What support is currently on offer to children and young people on CAMHS waiting lists?

There was little evidence to show what is currently offered to children and young people on the waiting list for CAMHS across England. What individuals are offered while waiting varies depending on where they live, and there is no standard support offered.³ Support can range from written self-help materials, such as leaflets, to a referral to community resources, such as charity run support groups.³

What research is happening now?

There is an ongoing study called the WAIT (Waiting for Access Into Treatment) study which is looking at the current help offered to children and young people on CAMHS waiting lists.⁵ The study is trying to better understand CAMHS waiting times for different mental health disorders and across different areas of the country. It also aims to identify the types of support that are offered to young people on CAMHS waiting lists and find out how effective they are.⁵

No results from this study are ready yet, but we expect it to help us understand how to better support young people to access other help while on waiting lists, identify which types of support are most useful, and prevent worsening of mental health while on waiting lists. More information on this study can be found at [WAIT study \(institutemh.org.uk\)](https://www.institutemh.org.uk).

Other studies have also talked about the lack of support while on waiting lists, something that was highlighted by the young people who prompted this summary. One study interviewed young adults to understand their experiences of being on CAMHS waiting lists.⁶ Two of the questions young people were asked were, *'How did you end up coping during this time?'*, and *'What do you think could be done to assist with the growing issue of long mental health waiting lists?'*.

The young people talked about the lack of support available and all said they required various forms of extra support while waiting.⁶ The study found nearly all of the young people sought alternative help while waiting for treatment.⁶ This was mainly extra psychological treatment from other sources or medication.⁶ However, there was not one usual way that the young people were supported.⁶ They were often pointed towards free alternative services, which also tend to have limited session availability.⁶ Many young people had to develop their own coping mechanisms while waiting for treatment and relied heavily on social support from family and friends.⁶

What else is known about support for children and young people on waiting lists?

Does offering help while on the waiting list make a difference to children and young people's mental health?

We found evidence that offering help while on waiting lists does improve mental health. A study with adults found offering guided self-help immediately after identifying a person as suffering with anxiety and depression led to significant improvements in their mental health scores, compared to those who were offered it 8 weeks after their initial assessment.⁸

There was also evidence to show that people were more likely to participate in treatment if they were offered support while on waiting lists.^{8,9}

The evidence we found focused on young people mostly came from CAMHS service users, family members, and CAMHS clinicians. As some of the studies were conducted in adults, we are unsure if the results would be the same in children or young people.





Recent years have seen promises from the NHS to reduce waiting time for mental health treatment. But children and young people are still waiting a long time to receive treatment, often without additional support.

We could not find much completed research on what types of support are offered to young people while on waiting lists for CAMHS.

A new study is looking at what is offered to children and young people on CAMHS waiting lists. This is needed because studies show that young people's mental health improves when offered help while on waiting lists.

Previous studies have also shown the need for further work in this area as many young people feel that there is a lack of support offered while they are waiting for treatment, and they have to rely on alternative services, medication and social support from family and friends.

Although there is currently a lack of evidence to answer this question, this does not mean that CAMHS are not offering support for those on waiting lists. This review highlights the need for further research that will help to find out what help is on offer, what support is most useful for children and young people, and the impact of offering this support while on waiting lists.

What did young people ask us?

Children and young people were asked about their experiences of Child and Adolescent Mental Health Services (CAMHS) in Devon and what questions they would like us to answer. Children and young people also rated which questions were the most important to them. One of these questions was, “What support can be offered to young people while on waiting lists for CAMHS?”.

The children and young people who discussed this question felt that long waiting lists were more likely to lead to self-medication (e.g., drugs or alcohol), and there was limited signposting to other types of support. They would like to know what evidence there is for the help offered to children and young people while on waiting lists for CAMHS.

What did we do?

We searched for evidence to answer the question, “What support is offered to children and young people who are on CAMHS waiting lists?”.

To do this, we searched several databases including MEDLINE, APA PsycINFO, Trip, HMIC and Google Scholar. This search was not intended to be comprehensive. The evidence from these searches was then compiled and presented as this summary. The searches were last updated in March 2022.

Experts in the CAMHS referral system and young CAMHS service users reviewed this summary to make sure it is accurate and easy to understand.



Scientific databases used:

MEDLINE: Medical Literature Analysis and Retrieval System Online database
APA PsycINFO: American Psychological Association Psychological information database
TRIP database: Turning Research into Practice database
HMIC: The Healthcare Management Information Consortium

References

1. Department of Health & Social Care. Achieving Better Access to Mental Health Services by 2020. 2014 [cited 2022 12/04/]; Available from: <https://www.gov.uk/government/publications/mental-health-services-achieving-better-access-by-2020>.
2. NHS Benchmarking Network. Mental Health Sector - Children and Young People's Mental Health. 2020 12/04/2022]; Available from: <https://www.nhsbenchmarking.nhs.uk/mental-health-sector#childrenyoung>.
3. Brown, S.A., J.D. Parker, and P.R. Godding, Administrative, clinical, and ethical issues surrounding the use of waiting lists in the delivery of mental health services. *J Behav Health Serv Res*, 2002. 29(2): p. 217-28.
4. Crouch, L., et al., "Just keep pushing": Parents' experiences of accessing child and adolescent mental health services for child anxiety problems. *Child: Care, Health and Development*, 2019. 45(4): p. 491-499.
5. The Institute of Mental Health - University of Nottingham. WAIT study. 202212/04/2022]; Available from: <https://www.institutemh.org.uk/research/projects-and-studies/current-studies/wait-study>.
6. Punton, G., A.L. Dodd, and A. McNeill, 'You're on the waiting list': An interpretive phenomenological analysis of young adults' experiences of waiting lists within mental health services in the UK. *PLOS ONE*, 2022. 17(3): p. e0265542.
7. Broglia, E., A. Millings, and M. Barkham, Challenges to addressing student mental health in embedded counselling services: a survey of UK higher and further education institutions. *British Journal of Guidance & Counselling*, 2018. 46(4): p. 441-455.
8. Lucock, M., R. Kirby, and N. Wainwright, A pragmatic randomized controlled trial of a guided self-help intervention versus a waiting list control in a routine primary care mental health service. *British Journal of Clinical Psychology*, 2011. 50(3): p. 298-309.
9. Stone, W.N. and E.B. Klein, The Waiting-List Group. *International Journal of Group Psychotherapy*, 1999. 49(4): p. 417-428.

Note: This work was funded by the NIHR Clinical Research Network South West and the NIHR Mental Health Programme as part of the NIHR Applied Research Collaboration South West Peninsula (PenARC). The views expressed here are those of the authors and not necessarily those of the National Institute for Health Research or the Department of Health and Social Care.