Q40. Would you benefit from a weekly youth/community group for maintaining positive mental health?
Yes
No
Prefer not to say

Q41. Please explain your answer:

Q42. Do you have any ideas about what you think a new young people’s mental health service in Stockport should offer?

Q43. What do you think a new young people’s mental health service in Stockport should be called?

Q44. What are your views on young people having their voices heard regarding mental health services for young people in Stockport?

Views and experiences of mental health services for young people
Kids, SAVY and Stockport and District Mind are working together to find out what the views and experiences of young people, parents/carers, and service providers are, about mental health services for young people. This will help to see whether there is anything missing from current mental health services for young people. The information you provide will help us design a new model of mental health service for young people in Stockport. We will not ask for your name and no-one will know what answers you have given.

This questionnaire is aimed at children and young people in Stockport.

Please post completed form to:
Stockport and District Mind, Dove House, 65 Union Street, Stockport, SK1 3NP
Section 1: About You

Postcode: ______________________

How did you hear about this survey?: ____________________________

Q1. Age (please circle):
   11 - 13  14 - 16  17 - 19  20 or older

Q2. Gender you identify most with (please circle):
   Male  Female  Transgender Male  Transgender Female  Pan Gender  Other
   Prefer not to say  Other: ______________________

Q3. What ethnic group do you consider yourself to belong to? (Please circle):
   White British  White Irish  White Other  White and Black Caribbean
   White and Asian  White and Black African  Caribbean  Black Other
   African  Indian  Pakistani  Bangladeshi  Chinese  Asian  Other  Roma  Traveller
   Prefer not to say  Other: ______________________

Q4. At the moment I am (Please circle):
   At school / college  At a Pupil Referral Unit  In training  An Apprentice
   Attending short course  Unemployed  Employed  Self-employed
   Prefer not to say  Other: ______________________

Name of School / college (if applicable): ______________________

Q5. What educational qualifications have you achieved? (Please circle all that apply):
   None  5 or more GCSEs (A-C)  Less than 5 GCSEs (A-C)  Diploma  NVQ or equivalent
   Apprenticeship  A Level
   Prefer not to say  Other: ______________________

Q6. Do you consider yourself to belong to any of the following groups? (Please circle all that apply):
   None  Low Income  Refugee or Asylum Seeker
   At risk of social exclusion  Lone Parent  Young Carer  Offender / Ex-Offender
   In care / leaving care  Sofa surfer / Homeless
   Prefer not to say  Other: ______________________

Section 3: How to improve mental health services

Q37. What improvements could be made to mental health services for young people (including anything that might be missing from mental health services)?
   e.g. some young people say that they would like to be notified of an approximate waiting time from referral to appointment or mental health services should only involve parents in appointments when necessary.

Q38. How do you think schools can support you with your mental and emotional distress?

Q39. What role should youth groups, charities, and community groups play in supporting mental health services for children and young people?
Please circle to what level you agree or disagree with the following statements:

Q28. I found accessing mental health services for young people easy.
Strongly Disagree  Disagree  Don't know  Agree  Strongly Agree

Q29. Whilst accessing mental health services, I felt supported.
Strongly Disagree  Disagree  Don't know  Agree  Strongly Agree

Q30. Whilst accessing mental health services for young people, I felt my needs were met.
Strongly Disagree  Disagree  Don't know  Agree  Strongly Agree

Q31. I knew what I wanted to gain from accessing mental health services for young people.
Strongly Disagree  Disagree  Don't know  Agree  Strongly Agree

Q32. I had a say in the type of mental health support I received (i.e. 1:1 support, group support, telephone support, internet support).
Strongly Disagree  Disagree  Don't know  Agree  Strongly Agree

Q33. During my first appointment, the mental health service for young people was explained to me in a way I understood.
Strongly Disagree  Disagree  Don't know  Agree  Strongly Agree

Q34. I received the right support.
Strongly Disagree  Disagree  Don't know  Agree  Strongly Agree

Q35. Improved information on the range of help and services available and how to access them needs to be developed for young people, parents, and schools.
Strongly Disagree  Disagree  Don't know  Agree  Strongly Agree

Q36. I would like the option to receive support outside of normal working hours (i.e. evenings and weekends).
Strongly Disagree  Disagree  Don't know  Agree  Strongly Agree

Q.7 Would you describe yourself as someone who has experience of mental and emotional distress?
Yes, currently  Yes, Previously  No  Prefer not to say

Q8. If yes, what do you experience? (please circle all that apply):
anxiety  depression  psychosis  self-harm  suicidal thoughts
low self-esteem  ‘high’-mood  anger  stress  eating problems
sleep problems  panic attacks  phobias  personality difficulties
trauma  bereavement  identity crisis

Q9. Do you have a registered disability?
Yes  No  Prefer not to say

Q10. If yes, what registered disability do you have? (Please circle all that apply):
Learning Difficulty  Learning Disability  Sensory Impairment
Physical Impairment  Multiple Impairment  Prefer not to say

Q11. Do you consider yourself to have any additional support needs?
Yes  No  Prefer not to say

Q12. If yes, please state: __________________________________________

Q13. Does your registered disability and/or additional support need affect your mental health?
Yes  No  Prefer not to say

Q14. Would you describe yourself as a young carer for someone who has experience of mental and emotional distress?
Yes, currently  Yes, Previously  No  Prefer not to say

Q15. If yes, what do they experience? (please circle all that apply):
anxiety  depression  psychosis  self-harm  suicidal thoughts
low self-esteem  ‘high’-mood  anger  stress  eating problems
sleep problems  panic attacks  phobias  personality difficulties
trauma  bereavement  identity crisis

Other: ____________________________________________________________
Section 2: About your relationship with mental health services

Q16. What does the term ‘Mental Health’ mean to you?

Q17. What mental health support are you aware of in Stockport?

Q18. Have you ever used mental health services for young people? (please circle):
   - Yes, currently
   - Yes, Previously
   - No
   - Prefer not to say

Q19. How long have you used mental health services for young people? (please circle):
   - Never
   - Under 1 year
   - 1 – 3 years
   - 3 – 5 years
   - Over 5 years
   - Prefer not to say

Q20. In your own words, please tell us about your experience of mental health services for young people. (e.g. some young people say that they had to wait a long time for an appointment or didn’t know how to access mental health services)

Q21. Which services have you accessed or tried to access for mental and emotional distress? (please circle all that apply):
   - Not applicable
   - GP
   - Healthy Young Minds (formerly CAMHS)
   - Independent Options
   - Community-based Eating Disorders Service
   - Signpost for carers
   - Hope or Horizon Inpatient Units
   - SENDIASS (Special Educational Needs and Disability Information, Advice and Support Service)
   - SAVY Social Wellbeing Group
   - Counselling
   - Adult services
   - Hospital
   - Other service(s), please state: ____________________________________________________

Q22. How long did it take for you to receive help from mental health services for young people? (please circle):
   - Not applicable
   - Under 1 month
   - 1 – 3 months
   - 3 – 6 months
   - 6 – 12 months
   - Over 12 months
   - 1 – 3 years
   - 3 – 5 years
   - Over 5 years
   - Prefer not to say

Q23. Did the mental health service waiting times have any effect on your mental health?
   - Yes / No / Prefer not to say

Q24. Please explain your answer:

Q25. If you felt mentally and emotionally distressed tomorrow, where would you go for support? (please circle all that apply):
   - GP
   - Friend
   - Family member
   - Teacher
   - Crisis helpline
   - Healthy Young Minds (formerly CAMHS)
   - Community group, please specify: ________________________________________________
   - Social media, please specify: ____________________________________________________
   - App, please specify: __________________________________________________________
   - Internet, please specify: ________________________________________________________
   - Don’t know
   - Prefer not to say
   - Other, please specify: _________________________________________________________

Q26. What positive experiences did you have with mental health services for young people?

Q27. What negative experiences did you have with mental health services for young people?