Supporting Children Young People and Families



From Increasing Awareness to Improving Outcomes:

Raising Expectations in Children's (Mental Health) Services



It's time to raise our expectations.

Let's support what's good, challenge what's not, and keep children, young people and families at the centre of it all.



Introduction

This paper is not a criticism of those working hard to support children and families. Most are doing so with commitment, care, and limited time. It is, however, a call for greater thoughtfulness — and a higher standard of scrutiny — in a system that increasingly rewards appearance over substance.

Children's mental health is receiving more attention than ever before. That visibility is welcome and long overdue. But alongside the increased focus has come a rapid expansion of services, training offers, and awareness campaigns — many of them well-intentioned, some under-examined, and a few that are knowingly trading on the demand.

It is now possible for organisations to operate in this space — shaping narratives, offering support, and influencing practice — without clear governance, evaluation, or accountability. Those working with children and families must often navigate these offers without guidance on what constitutes quality, what evidence underpins the work, or whether the provider has the expertise to be doing it.

Context

Three shifts have shaped the current landscape:

- Awareness of children's mental health has increased significantly
- Demand for emotional wellbeing support continues to rise across all sectors
- A growing number of organisations now offer social media presence (mental health promotion, awareness raising, challenging stigma) training, interventions, or advice

In principle, these should be positive developments. But in practice, they have exposed a lack of clarity around quality, credibility, and evidence. New services emerge quickly. Online platforms amplify content unevenly. Practitioners are left with few indicators to distinguish between meaningful support and superficial activity.

This is not simply a digital or generational issue. The trend reflects wider patterns in public services. Research across health, education, and social care points to increasing pressure on



organisations to remain visible — through media, partnerships, public statements, or highprofile events — as a way to demonstrate responsiveness or progress. In this climate:

- Engagement metrics are sometimes treated as proxies for effectiveness
- Public bodies may adopt symbolic or communicative actions in place of structural change
- Staff time is absorbed by meeting cycles, promotional activity, and initiatives that show intent but lack delivery traction

The boundary between comms and credibility has become blurred. Organisations known for careful, evidence-based work may be less visible than newer entrants with sharper branding. Complex issues are often reduced to slogans or single-point solutions. And well-meant activity can drift into theatre — signalling care without necessarily improving it.

In this context, the risk is not just that time and money are misdirected. It is that public confidence in mental health support becomes diluted, and the opportunity to make lasting improvements is lost to noise.

The Problem

For those working with children and families — whether in schools, health settings, local authorities, or the voluntary sector — the current landscape is difficult to navigate. Offers of support are increasing. Training, interventions, toolkits, and awareness campaigns are widely available. But few come with a clear account of their evidence base, relevance to local need, or alignment with existing provision. This leaves professionals, managers and commissioners facing a series of unclear choices:

- Which services or providers are credible?
- What expertise underpins their work?
- Do they understand the system they're entering or disrupting?

Without shared standards or oversight, services can enter the field without demonstrating effectiveness. In some cases, branding and visibility have replaced clarity and accountability. Public systems — including NHS Trusts and local authorities — have sometimes responded not by pushing for rigour, but by leaning into the same visibility-based logic: building



recognition through statements, campaigns or media-facing work, even where outcomes remain static. In this environment, the distinction between high-quality provision and low-accountability offers becomes harder to maintain. The result is a system where:

- Services may duplicate rather than complement existing support
- Training may prioritise accessibility over accuracy
- Messages aimed at public awareness may oversimplify, rather than inform
- Frontline professionals are left with the burden of sifting substance from style, without the time or tools to do so

This is not just inefficient. It actively risks undermining the clarity and coordination that effective support systems require. The more fragmented and performative the landscape becomes, the harder it is for families and practitioners to access meaningful help — or to know who to trust.

The Risks

1. Misdirection of Support

Children, young people, and families may be directed toward interventions that are poorly matched to their needs, or that offer little more than temporary reassurance. Where messaging substitutes for depth, families may receive information that is well-meaning but unhelpful — or, in some cases, misleading.

2. Dilution of Practice

Practitioners and services may invest time in training or partnerships that do not improve their ability to support children and families. Where external providers are commissioned without clear standards, the workforce may be drawn into cycles of repeated or superficial learning — rather than gaining tools that sustain improvement.

3. Misallocation of Resources

Public funding, charitable donations, and staff time are finite. Where offers are selected for their profile rather than their evidence, these resources can be diverted from more effective



or embedded work. In some cases, this creates a false economy: activity increases, but impact does not.

4. Erosion of Trust

When families or practitioners experience support that is disconnected, repetitive, or poorly delivered, it affects confidence. Trust in the quality and integrity of services takes time to build — and can be undermined by a series of small disappointments. Over time, this undermines both access and engagement.

5. Structural Fatigue

When systems become crowded with offers — many of them unevaluated — the result is not choice, but noise. Services begin to replicate one another. Frontline staff struggle to keep pace with new initiatives. And leaders find themselves pulled into coordination work that absorbs capacity without advancing outcomes.

Practical Reflections for Leaders and Commissioners

In a crowded and fast-moving field, these recommendations may may help a leader keep the focus on what matters.

1. Before adopting a new offer, map what's already in place

Where new services are introduced without clarity about their role or added value, duplication is likely. Before commissioning, endorsing, or engaging with any new offer:

- Review existing provision and how it's working
- Ask whether the new offer addresses a specific gap
- Consider whether its presence adds clarity or more noise

This kind of mapping doesn't have to be exhaustive, but it should be intentional. Decisions made without it can lead to fragmentation and loss of trust.

2. Ask providers to show how they reflect and adapt

Every offer should be open to scrutiny — and ready to evolve.

Ask how the service learns from experience



- Ask what they do with feedback
- Ask what they've changed when something hasn't worked

This doesn't mean demanding formal research. But if there's no evaluation process, no recorded learning, and no evidence of change over time, that should be a pause point. Good services are reflective, not just confident.

3. Protect your time and attention from performative pressure

In roles that involve oversight, commissioning or system leadership, time is often directed by visibility — events, briefings, updates, meetings. It's worth stepping back and asking:

- Where is my attention going?
- What decisions are being shaped by optics or expectation?
- What space do I have to focus on what's working or what's missing?

Being present at the table isn't the same as improving the system. If time is being used to manage appearance rather than progress, that's a warning sign. Quiet, deliberate attention often achieves more.

For a deeper exploration of how time is used — and misused — across children's services leadership, see the companion briefing: *Busy Being Busy: Reclaiming Time for What Really Matters in Children's Services* available at www.scypf.co.uk

Conclusion

There are people and organisations doing excellent work in children's mental health. They are thoughtful, credible, and committed to improving outcomes — often in difficult conditions. They deserve support, attention, and trust.

But the current system makes it hard to distinguish between services that are adding value and those that are simply more visible. When offers are accepted without reflection, or promoted without scrutiny, it becomes easier for low-accountability work to gain ground. Over time, this risks undermining confidence in the very systems that families rely on.

Raising awareness has its place. But it is not the same as making a difference.



This paper has argued for a shift in emphasis: from visibility to substance, from activity to outcomes, and from good intentions to accountable delivery.

It is reasonable to ask: what is this for, who benefits, and how do we know it's working?

Those are the questions that help keep services honest, and children and families at the centre of the work.

Raising awareness isn't enough. It's time to raise our expectations.

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