



# A SPACE TO BE ME

Young Changemakers tackling racial inequalities in Black young people's mental health

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# EXECUTIVE SUMMARY

England's mental health crisis among children and young people is severe, with one in five experiencing mental health issues, a significant increase from previous years. Black children and young people face compounded challenges such as poverty, over-policing, and inadequate mental health service access.

The Young Changemakers programme, a three-year initiative launched in August 2021 and funded by the People's Postcode Lottery and Comic Relief, represents a pioneering effort by UK Youth, The Diana Award, and Centre for Mental Health to reimagine mental health support for young people from Black communities. By collaborating with young people aged 14 to 25 and youth workers across England, the programme provided the tools and resources needed to develop youth-led social action projects addressing mental health inequalities, with a specific focus on those impacting Black young people.

The programme was created in response to systemic racial inequalities affecting young people's mental health in England. Research consistently highlights that young people from racialised backgrounds are underrepresented in early intervention and community-based mental health services, and are disproportionately referred to acute mental health settings. Systemic racism has resulted in discriminatory referral routes, higher criminalisation rates, and an overall lack of culturally sensitive mental health support. Tragic events such as George Floyd's murder and the disproportionate impact of Covid-19 further exacerbated these issues. And these challenges persist, as evidenced by the recent racist and anti-Muslim riots across the UK in the summer of 2024, which have deepened emotional distress within racialised communities. This underscores the urgent need for accessible and culturally responsive mental health care.

The Young Changemakers programme sought to address these challenges by supporting Black and Black mixed-heritage young people to lead and influence mental health support systems. A total of **92 Young Changemakers** were recruited nationwide, and they spearheaded **15 social action projects** designed to improve outcomes for young Black people. These projects advocated for policy and practice changes and sparked important conversations about mental health within their local communities. We also worked alongside a total of **26 Co-Producers** and **15 Peer Researchers** across all of the cohorts.

## The programme included:

- ⦿ A Youth Development Programme: Providing personal and professional skills development to young people and youth workers, focusing on youth social action and the current mental health landscape for young Black people. Overall, Young Changemakers and youth workers found the Youth Development Programme instrumental in deepening their understanding of racism and its effects on mental health. It also equipped them with the tools to advocate for change across different settings and levels through impactful social action.
- ⦿ Youth-led social action: Enabling young people to drive change in mental health support systems, through a diverse range of social action projects. These addressed critical issues such as hair discrimination, racism in schools, and the need for improved mental health support from GP services.



- ⦿ Several of these projects received further support through the partnership's accelerator programme to expand their reach and impact. For example, My Hair Story, a social media campaign, aimed to tackle racial discrimination faced by girls and women, particularly around hair. Similarly, Not So Micro sought to address racial microaggressions and racism in schools by advocating for enhanced teacher training. The young people involved have developed long-term strategies to continue their campaigns and collaborate with partners to drive ongoing change.
- ⦿ Working with young people as Co-Producers: Young people were recruited both externally and from the Young Changemakers cohorts to collaborate with programme partners in developing and implementing the programme over the three years. They received support from project partners and were compensated for their contributions.
- ⦿ Evidence building: Strengthening research on the mental health experiences of young Black people by working alongside them as Peer Researchers. Peer Researchers were trained and supported in the design and delivery of the evaluation and research projects.

This report consolidates three years of data and insights from the Young Changemakers programme, incorporating findings from both a comprehensive evaluation and primary research conducted with young Black people in 2023. It draws on feedback from programme participants and youth workers to offer a deeper understanding of the mental health landscape for young Black people.

Our research with young Black people identified several barriers to having their mental health needs recognised and effectively addressed. These include:

- ⦿ A lack of understanding about mental health concerns: Young Black people often lack adequate information about mental health, exacerbated by stigma and poor education about the impacts of racism
- ⦿ Barriers to support: Key barriers include systemic racism, lack of culturally sensitive services, and limited access to early intervention services
- ⦿ Cultural sensitivity: There is a strong demand for mental health professionals from similar cultural and racial backgrounds and for services that respect and understand young people's experiences, values and beliefs
- ⦿ Stigma and discrimination: Mental health stigma and discrimination, particularly within the Black community, hampers help-seeking and exacerbates mental health issues.

## **RECOMMENDATIONS**

The programme's findings also point to a series of policy recommendations that must be implemented to improve mental health outcomes for Black young people and their communities.

1. The Government must commit to tackling all forms of racism, discrimination, and exclusion through a comprehensive cross-government strategy. This should include action to address the specific injustices faced by racialised communities within key settings such as the health, education, youth, employment, and criminal justice systems.
2. The Government should reform the Mental Health Act 1983 to address the disparities faced by people from Black and racialised backgrounds. This could be achieved by:
  - Embedding a series of principles on the face of the bill on equity and rights
  - Introducing the use of Advance Choice Documents
  - Reviewing the use of Community Treatment Orders



- Introducing a competency test for children and young people
  - Improving access to culturally competent advocacy and interpretation services.
3. The Government should invest in Young Futures Hubs in every local area to ensure young people have access to high-quality early mental health support. It is crucial that the voices of Black young people are prominently included in the design and implementation of these hubs. These services should prioritise support, safety, and a sense of community, and they should be located in spaces where young people already gather – both offline and online – while building on existing youth work and social prescribing initiatives.
  4. The Department for Digital, Culture, Media and Sport should reaffirm its commitment to investing in youth work, building on schemes such as Youth Investment Fund, the Adventures Away from Home Fund, #iwill Fund and maintaining a youth focus as part of the Dormant Assets Scheme. This investment must also include a serious commitment to workforce development within the youth sector.
  5. The Department for Education should integrate training on racial microaggressions and anti-racism into mandatory teacher training, including both initial education and ongoing professional development.
  6. The Department of Health and Social Care should collaborate with the Department for Education, the Department for Digital, Culture, Media and Sport, and Black-led organisations to create a new campaign focused on addressing mental health stigma within Black communities. This initiative should provide funding for organisations led by and serving Black communities to develop and implement local, targeted programmes that reduce discrimination and improve attitudes toward mental health.
  7. The Department of Health and Social Care should prioritise race equity as a fundamental principle in the upcoming ten-year health plan. It is essential to involve Black people, particularly children and young people, in the coproduction of policy solutions for mental health as part of this plan. This collaborative approach should include specific measures aimed at improving Black young people's access to, experiences within, and outcomes from the mental health system.
  8. The Department of Health and Social Care and NHS England should expand training for Mental Health Support Teams (MHSTs) to increase understanding of the mental health experience of children and young people from Black and racialised backgrounds and to improve their outcomes in education.
  9. The Department of Health and Social Care and NHS England should collaborate with racialised communities to create racially equitable mental health advice, information, and support as part of the full implementation and resourcing of the Patient and Carer Race Equality Framework (PCREF). As part of this, NHS England and professional bodies must ensure that the mental health workforce, including MHSTs, reflects the communities it serves while actively promoting values of anti-racism, diversity and inclusion. This should include efforts to encourage young Black people to join the mental health workforce. Additionally, cultural competency and anti-racism training should be mandatory for all practitioners.
  10. NHS England should provide dedicated funding to integrated care boards to enhance the integration of youth services into their comprehensive mental health support for children and young people.

The programme also gathered valuable insights into young people's preferences for mental health support and their vision for reimagining the mental health system for young Black people. This has been presented in a visual illustration found on page 47.

## ACKNOWLEDGEMENTS

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## GLOSSARY OF KEY TERMS

**Black (ethnicity):** We use Black in this report to describe people from Black British, Black African, Black Caribbean, and any other Black background. We also use 'Black' as a shorthand for Black mixed-heritage young people.

**Racialised communities:** Ethnic, racial and cultural communities in the minority in the UK who have been racialised – that is, white-majority systems have categorised groups according to the colour of their skin or other cultural or religious features, and in doing so have 'othered' and marginalised them.

**Cultural competence:** The ability to reduce ethnic and racial health disparities by fostering a greater awareness and understanding of diverse cultures and communities. It encompasses a set of behaviours, attitudes and policies that enable professionals and services to operate effectively and deliver appropriate services for people from racialised backgrounds.

**Culturally sensitive support:** Support that is based around, actively incorporates and respects the beliefs, traditions and personal circumstances of people from racialised communities. It does not try and impose a white-centric frame for support but offers support that feels caring, appropriate and kind to those accessing it.



# INTRODUCTION

Young Changemakers is a groundbreaking programme delivered by UK Youth, The Diana Award, and Centre for Mental Health, engaging young people from racialised backgrounds to reimagine what mental health support can and should look like. The programme equipped young people aged 14-25 with tools to produce youth-led social action projects aimed at tackling mental health inequalities. The programme also sought to catalyse community-led change focused on raising awareness and directly addressing mental health inequalities experienced by Black young people. The three-year programme, launched in August 2021, was generously funded by players of the People's Postcode Lottery and by Comic Relief.

This final report draws together the learning from the past three years of data and insights gathered by working with young people, youth workers and programme leads. It discusses the findings of the programme, how the programme has impacted the young people and youth organisations it has served, and what learnings can be transferred to the wider mental health system and practitioners supporting young people. This report not only draws on research carried out for the evaluation of this programme but also a series of focus groups carried out as primary research with young Black people. This was done to widen our knowledge and deepen our understanding of the current mental health landscape for young Black people.

## **WHY WAS THIS PROGRAMME NEEDED?**

The programme was developed in response to growing concerns about the impact of racial inequality and discrimination on young people's mental health in England. Young people from racialised backgrounds are currently underrepresented in early intervention and community-based mental health services yet overrepresented in acute mental health settings (Le *et al.*, 2022). Research has shown that systemic racism also results in discrimination in referral routes to mental health services and disproportionate rates of criminalisation. For example, Black children are ten times more likely to be referred to NHS Children and Young People's Mental Health Services (NHS CYPMHS) via social services and youth justice teams than through the GP or other voluntary routes, compared with white British children (NHS Race & Health Observatory, 2022). People from Black and other racialised communities were also less likely to seek help from mental health services for fear of discriminatory treatment. The Howard League explains that a similar disproportionality is amplified at every stage of the criminal justice process and results in the overrepresentation of Black, Brown, and other children from racialised backgrounds in prisons, where poorly funded regimes and limited mental health support make release and return to prison a 'revolving door' (Howard League for Penal Reform, 2023).

Research in the UK evidencing the barriers that impact young Black people is often anecdotal and rarely discusses constructive solutions about what can be done. This report attempts to fill some of those gaps and use the research gathered by hearing from over 100 young Black people to offer strong and usable recommendations that improve support for young Black people.

The tragic murder of George Floyd in 2020, the disproportionate impact of Covid-19 on Black communities, and the ongoing failure of services to meet Black people's health needs (whether in maternal mental health or the overuse of restraint on Black people in mental health hospitals) continues to fuel racial trauma. In addition, the recent racist and anti-Muslim riots across the UK in the summer of 2024 have compounded emotional distress within racialised communities.

Mental health was an emergent theme during the #YoungAndBlack campaign launched in 2020 by UK Youth and The Diana Award. Young people shared how racism has harmed their mental health and emphasised the lack of appropriate support, a sentiment strongly supported by research.

A qualitative study by King's College London and Centre for Mental Health, for example, found that racism at systemic, institutional, interpersonal, and internalised levels impacts the mental health of young people and their parents. Microaggressions and covert forms of racism, as well as racism related to eugenics, colourism, and anti-Blackness, negatively affected both parents and teenagers (Simela *et al.*, 2023; Abdinasir and Ahmadzadeh, 2023).

The partnership was formed to respond to these concerns and young people's calls for safe spaces to discuss the impact of racism. For the past three years, the programme has also been committed to advocating for systemic change within the mental health system and beyond.

## **THE MENTAL HEALTH OF BLACK CHILDREN AND YOUNG PEOPLE**

The mental health of children and young people in England is at crisis point. Recent data from NHS Digital reveals that approximately one in five (20.3%) children and young people aged 8-25 have reported experiencing a mental health problem (NHS Digital, 2023). This marks a significant increase from one in nine in 2017 (*ibid*). Moreover, the prevalence of mental health difficulties increases with age, with 23.3% of 17-19 year olds and 21.7% of 20-25 year olds reporting high levels of distress (*ibid*).

The demand for mental health support among young people has surged dramatically in recent years. A review of the NHS conducted by Lord Darzi revealed that referrals to NHS CYPMHS have tripled, increasing from 40,000 in 2016 to nearly 120,000 by 2024 (Darzi, 2024). Furthermore, data from the NHS Benchmarking Network showed that by the end of 2023, 213,000 children and young people were on waiting lists for NHS CYPMHS, a rise of 7% from the previous year (Bell, 2024).

Many young people face significant barriers to accessing support for their mental health. According to the Local Government Association (LGA), NHS CYPMHS were turning away one in three young people referred for treatment (LGA, 2023). Furthermore, young people who do receive care often face difficulties in engaging with mental health services, particularly during the transition period between the ages of 16 and 18 (Appleton *et al.*, 2022). This phase has historically been referred to as a "cliff edge" of support, where those aged 16-25 are at risk of falling through the gaps in available services.

Young people from racialised backgrounds are particularly affected by these challenges, as they face significant social inequalities that negatively impact their mental health and wellbeing. For example, over half (51%) of Black/African/Caribbean and Black British families live in poverty, compared to 24% of white families (DWP, 2024). A recent report by Centre for Mental Health, the Children and Young People's Coalition, and Save the Children UK highlights the inextricable link between child poverty and mental health, noting that children growing up in poverty are four times more likely to experience mental health difficulties (Rainer *et al.*, 2024; Morrison Gutman *et al.*, 2015).



Research also highlights the harmful effects of racism within the education system. According to Mind, 70% of young people who had experienced racism at school said it had negatively impacted their mental health (Mind, 2021). A survey from the Young Changemakers programme revealed that while less than a third of teachers have ever received training on racism or microaggressions, 94% believe such training should be provided to all school staff (Treloar *et al.*, 2023).

Black children and young people are also over-policed and under-protected compared to their white counterparts, adversely affecting their mental health. For example, recent analysis of Home Office data by the Runnymede Trust found that Black children are 6.5 times more likely than white children to be strip searched by the police (Runnymede Trust, 2024). Data from the Independent Office for Police Conduct (IOPC) on the use of tasers on children under 18 during a seven-month period in 2022 found that over a quarter of such incidents (27.5%) involved taser discharge on a Black child (IOPC, 2023).

Young Black men face some of the harshest inequalities when it comes to their mental health. A Centre for Mental Health study found that they are significantly more likely to experience housing insecurity, unemployment, and unsafe living conditions. Young Black men also encounter greater challenges within the education system, including disproportionately higher rates of fixed and permanent exclusions (Khan *et al.*, 2017).

Additionally, a recent qualitative study explored the impact of gang affiliation on the mental health of young Black men, revealing a vicious cycle driven by racism, inequality, and poverty. Alarming, there is a significant lack of trauma-informed support to address this issue (Dodzro, 2023).

Furthermore, these inequalities significantly affect young Black people's experiences of mental health services. A recent article by *The Independent* revealed that Black and mixed-heritage children accounted for 36% of young people detained in mental health hospitals (based on unpublished data from NHS Benchmarking Network). Conversely, young Black people made up just 5% of those accessing community-based children and young people's mental health services (Thomas, 2022). These stark disparities underscore the critical need for more equitable access to mental health support within the community for Black young people.

## **THE POLICY CONTEXT**

In response to these challenges, NHS England published the Advancing Mental Health Equalities Strategy (2020) to address inequalities in mental health, aiming to improve access, experience, and outcomes for racialised communities, among others. A key component of this strategy is the development and implementation of the Patient and Carer Race Equality Framework (PCREF), NHS England's first anti-racism initiative, which seeks to enhance the mental health of racialised communities (NHS England, 2023). The PCREF programme supports the development of initiatives that directly address inequalities, offering funding and guidance to enhance service delivery, including within children and young people's services. Work is currently under way to embed the framework across the mental health system which presents opportunities to improve the lives of Black children and young people.

Under the previous government, efforts were made to overhaul the 1983 Mental Health Act to address the disproportionate detentions of Black people. The new government has committed to introducing a Mental Health Bill to modernise the Act, along with a new Race Equality Act as part of the 2024 King's Speech. There is also a firm commitment to ensuring that every primary and secondary school in England has access to mental health support. This support must be comprehensive and holistic, integrating approaches that involve collaboration with various practitioners, such as youth workers, both within and around the school environment.

The Labour government has committed to rolling out Young Futures Hubs to offer young people open access to mental health support within their communities. Backed by £95 million and part of a broader Young Futures programme (Labour, 2024), these hubs present a crucial opportunity to enhance early support for young people from Black and racialised backgrounds. Research shows that young Black people are significantly more likely to engage with and benefit from community-based counselling and hub-based provision compared to statutory services (Duncan *et al.*, 2020), as these settings are often seen as less stigmatising and more flexible. It is essential that the voices of young Black people are central to the design and delivery of these hubs, which should be developed through partnerships between the voluntary and community sectors (particularly the youth sector), NHS Children and Young People's Mental Health Services (CYPMHS), health and public health services, children's services, and other key agencies. These proposals represent a significant opportunity to achieve lasting positive change for young people by promoting racial equity and justice in mental health care.

Similarly, the new government has pledged to develop a ten-year health plan by 2025 to outline a long-term strategy for improving the nation's health. As part of this plan, addressing the mental health needs of Black children and young people should be a key focus. This report offers actionable insights and recommendations that could be integrated into the plan.

Furthermore, youth work plays a crucial role in offering young people information and advice about their mental health, and in providing early support, especially to those from marginalised backgrounds. Often, youth workers or other trusted adults are the first point of contact for young people experiencing mental health difficulties. Research conducted by UK Youth and commissioned by YoungMinds found that youth workers can bridge gaps where formal mental health support may not be suitable, offering essential care and attentive listening that helps prevent issues from worsening. However, a survey of youth workers included in the study found that 87% of those working with individuals under 25 regularly support their mental health but feel inadequately equipped to recognise the warning signs of distress (UK Youth, 2022). An evaluation of the Bruce Grove youth club in Haringey by Centre for Mental Health found that integrating psychologists into youth services helped bridge the gap by providing young people with timely access to mental health support, while also equipping youth workers to better address their concerns (Harris *et al.*, 2022).

Later in this report, we make recommendations for policy and practice based on learning from the Young Changemakers programme.



# 1 ISSUES AFFECTING YOUNG BLACK PEOPLE'S MENTAL HEALTH: PRIMARY INSIGHTS

## BACKGROUND

In year one of the programme (2021/22), Centre for Mental Health worked alongside four Changemaker Peer Researchers to write *A Voice for Change*, a briefing exploring some of the issues affecting the mental health of young people from racialised communities and their access to support. It found that young people from racialised communities often have low levels of trust in mental health services, driven by prior experiences of racism or rigid, formal service delivery models.

Some of the issues identified regarding the mental health of young people from racialised communities included:

- ⊙ Negative perceptions towards mental health support and care, with young people from racialised communities being more likely to expect bad experiences from mental health services and less likely to trust and seek formal support
- ⊙ A need for young Black people to have access (free of charge) to services that are led by and for young Black people
- ⊙ Limited and involuntary pathways to mental health services. Children and young people from racialised groups were more likely to access mental health services through compulsory than voluntary care pathways
- ⊙ Lack of mental health awareness: in studies across the UK, children and young people from racialised communities reported poor awareness around mental health and available support
- ⊙ Lack of culturally appropriate support, with data indicating a major need for the development of culturally sensitive, readily accessible mental health information and support tailored to children and young people from racialised communities
- ⊙ Mental health stigma, with higher levels of stigma among people from racialised communities observed globally.

As a result of these findings, Centre for Mental Health wanted to explore with young Black people what barriers to access they faced and what good mental health information and support looked like for them. Over the course of three participatory focus groups in 2023 carried out with 32 young Black people, Centre for Mental Health explored these topics, alongside Peer Researchers from the Young Changemakers programme. All participants were paid for their time and engaged using participatory research methods (see Obateru *et al.*, 2024).

In addition to these focus groups, three Co-Producers, Corinne Baker, Hannah Abdalla and Naomi Adesiyan, developed their own survey to better understand Black and Black mixed-heritage young people's experiences of mental health support. The survey was carried out between May and June 2024 and had 47 respondents aged between 16-25 years old. The following findings summarise insights from both focus groups and the youth-led survey.

## INFORMATION ABOUT MENTAL HEALTH

In focus groups, young people expressed that mental health was not well understood across the board, with most rarely having had the opportunity to explore the value and importance of mental health. This often stemmed from the fact that information about the impacts of racism and discrimination on Black people's mental health was missing.

For some, their understanding of mental health was restricted because of the associated "stigma" and the general "lack of education" around this topic. Many identified that they had probably had experiences of "bad mental health" but had "struggled to identify this at the time" because of the stigma and lack of education. One individual stated that "Black individuals may be more likely to believe that since they've survived so much adversity and are strong, no one has the right to tell them that there is something wrong with them". Another participant believed that mental health is largely misunderstood and not taken seriously in the Black community and that "work needs to be done to sensitise people to mental health".

Participants explained that they did not have access to "all the mental health information" they would like, while the lack of representation in the media and health care sectors generally was seen as a barrier to learning more about this topic. Participants also told us that when reading information about mental health, there is not enough information on services for young Black people. Information about stigma is also missing and should be included, "because some Black people hold on to trauma from slavery", for example, and "this needs to be understood". (There was a suggestion here that there is a link between stigma and trauma.) Indeed, some research has shown that racial stigma (negative racial bias) can influence mental health professionals in their clinical judgment – biasing diagnosis and delaying (or even precluding) access to treatment (UK Trauma Council, 2022).

## HOW TO IMPROVE YOUNG BLACK PEOPLE'S ACCESS TO MENTAL HEALTH INFORMATION

Young people we heard from expressed a strong desire to learn about mental health, its importance, and how to access relevant information. They emphasised that understanding mental health is as crucial as understanding physical health and that seeking help should not be seen as a sign of weakness. They wanted education on identifying mental health issues, coping strategies, and the importance of speaking up and asking for help. This included receiving education about this at school, during sessions with youth workers and online. Participants highlighted the need for clear signposting to mental health resources, self-care tips, and culturally sensitive information tailored to their unique experiences. Such signposting should be carried out by a variety of actors. Young people mentioned the role of schools, GPs, youth centres and online platforms as viable options for clearer signposting to mental health resources.

Working with parents and carers to improve access to mental health information and advice was also key. Young people felt that parents should "make it a priority to talk to their kids about mental health" and "form deep connections with their kids so that they can share troubling and personal events" and "so they know it's okay to bond and okay to speak up about what is going on with them – then from there, it will transform to schools and community at large".

Young people also stated they preferred accessing mental health information through diverse channels such as social media, Google, blogs, support groups, AI chatbots, and youth workers, rather than a purely medicalised model. They valued relatable content from people who "look like me" and underscored the importance of a dual approach combining online and in-person resources. They also called for culturally competent services and better communication from primary health care workers. Suggestions for improving access to support included seminars, culturally-specific and -competent information, digital media, community programmes, street rallies, and incorporating mental health education in media and pop culture.

## ACCESS TO AND EXPERIENCE OF MENTAL HEALTH SUPPORT

Throughout our conversations with young people from racialised communities, we found that access to mental health support was lacking. We wanted to understand the causes of this and how they could be overcome. Experiences of mental health support for young people from racialised communities were broad. Some had had “average” experiences while others had had “bad” ones, and others still had tried to access some support but were “still waiting” for help. Where a limited number of participants had had better experiences, these had been offset by feeling like services were not built for them or weren’t accommodating enough.

When asked about experiences with previous mental health support, one participant mentioned that he saw a therapist via the NHS, but that it was initially difficult to express his feelings because he wasn’t sure what the point of speaking up might be. However, the professional was also a Black man who made it a safe space which helped the young person “open up”. Although the mental health support was helpful, the participant highlighted that there was a long waiting period of around 3-5 months, and he wanted the sessions to “be longer”.

However, even those who had had “largely positive” experiences had still faced challenges around a “lack of providers with knowledge about the specific needs of the Black community”.

Our research found that barriers to access included:

- ⊙ Racism and discrimination
- ⊙ Stigma
- ⊙ Lack of awareness
- ⊙ Lack of affordable and culturally appropriate mental health care
- ⊙ Lack of competent services
- ⊙ Anxiety
- ⊙ Lack of available services because of reduced number of professionals and high demand
- ⊙ Lack of knowledge about how to access services
- ⊙ Fear of feeling judged by other people.

One participant highlighted cultural factors in the Black community such as “wanting to feel like you have got it all figured out, I don’t want to be seen as ‘weird’ or ‘soft’ which is why research spaces like these are necessary”. Another participant highlighted that the “strong Black person” stereotype was often prevalent and needed to be “dismantled”.

During their research, Co-Producers asked the respondents what they saw as the main issues in the provision (or lack) of mental health support for the Black community. A number of key messages arose, including:

- ⊙ A lack of representation in the mental health workforce
- ⊙ Young Black people not being educated about the mental health support that is available to them
- ⊙ A lack of cultural sensitivity in services
- ⊙ The cost of accessing and using support.

When asked to what extent they agreed that 'mental health support services provide suitable support to the Black community', 63% of survey respondents said they either strongly disagreed or disagreed, and only 10% either agreed or strongly agreed. On whether 'mental health support services understand the specifics of cultural distress in Black communities', 82% said they either strongly disagreed or disagreed and only 10% said they either agreed or strongly agreed.

During the focus groups, young people were asked to describe any cultural barriers to the provision of mental health support for the Black community. Respondents stated that mental health services are often "linked to oppressive structures and it's hard to trust people, especially when rates of malpractice are high for patients in the Black community". There are always ongoing issues of "stigma, cultural norms and stereotypes among medical professionals" and unresolved "language barriers". In this sense, it is important to note some of the ways in which young people said that they would like to access mental health information, including through social media and AI.

## **HOW MENTAL HEALTH SUPPORT CAN BE IMPROVED FOR YOUNG PEOPLE FROM RACIALISED BACKGROUNDS**

Young people who participated in our focus groups shared various ideas for improving mental health support for those from racialised communities. There was a strong belief that we need more practitioners from Black communities, who take an approach that mental health is not a barrier, but something that affects everyone. Participants emphasised that mental health support should come from therapists within the Black community who are trained in culturally competent care; for example, there should be community groups where young Black people can get together once or twice a week (with Black professionals) to talk about what they are going through.

In terms of creating culturally appropriate services, one participant highlighted that having a professional with similar experiences would make it easier to "relate with them" and "having a well-trained professional and/or therapist who knows what they're doing would be helpful". Overall, this could be framed around young people's desires to have trusted adults, practitioners, teachers, youth workers and non-medical staff working alongside them.

The following elements were also seen as key for health care services to make mental health support more culturally appropriate:

- ⦿ Being able to respect people's beliefs and values
- ⦿ Having mental health providers from similar cultural backgrounds
- ⦿ Providing support in the preferred language of the young person, which may involve providing interpreters or having bilingual professionals
- ⦿ Creating a safe and comfortable environment so that the young people feel comfortable
- ⦿ Considering spiritual beliefs and values
- ⦿ Openly reflecting and discussing issues of the young person's culture, race, gender, age, class, and the social inequities they face.

## THE IMPACT OF STIGMA

The young people we spoke to listed stigma as a major barrier to seeking and accessing help, stating that “there is stigma surrounding mental health issues and people may be reluctant to seek help because they don't want to be seen as ‘weak’ or ‘crazy’”.

We heard that for young people from Black communities, there were often unique circumstances including social, cultural and historical factors that contributed to mental health stigma. Some young people spoke about how they had been taught to “be strong” and not seek help during mental health crises. Young Black boys are often told to “be a man”, according to insights from YoungMinds (YoungMinds, 2023). The young people we spoke to highlighted that stigma often discourages those from racialised backgrounds seeking mental health support, and that this stigma is often more pronounced compared to their peers from other backgrounds.

The young people we spoke to also felt that stigma manifested itself across generations in negative ways. They highlighted that older generations were more likely to hold on to traditional beliefs about mental health which prevents them from seeking help. People from older generations may also “want to keep issues private and not want to talk about them” while the younger generation “may be more open to discussing mental health issues and more willing to seek help”, which can create generational conflicts.

One participant noted that mental health stigma in the younger generation can lead to depression and that young people may not seek mental health support because they have fears about lack of confidentiality, peer pressure, a desire to be self-reliant, and lack of knowledge of how to identify mental health issues.

## HOW TO REDUCE STIGMA FOR YOUNG PEOPLE FROM RACIALISED COMMUNITIES

It was felt that education in schools, specifically around the wide-ranging impact of racism, discrimination and misconceptions about mental health would be beneficial in reducing stigma for young people from racialised communities. Similarly, schools and educational centres should have specific programmes that educate people (including older people) about mental health. Education of the ‘older generation’ could also “allow the younger generation to learn from the older generation” about what mental health looks like and how to speak about it. The Respect Project is a programme using a similar model, with older students running educational sessions for younger students to raise awareness of racist bullying and its impacts.

Other suggestions for reducing stigma included:

- ⊙ Correcting misinformation about mental health through education in communities
- ⊙ Increasing awareness
- ⊙ Creating safe and supportive spaces for young people to discuss their mental health
- ⊙ Community engagement
- ⊙ Self-care support
- ⊙ More young people from racialised communities in the mental health field as providers and advocates.

Promoting positive mental health role models specifically from racialised communities, curating positive spaces on social media, sharing experiences with others and availability of culturally specific services would also all help to address this stigma.

When asked about what can help to reduce the effect of stigma on mental health for young people from racialised communities, participants suggested creating a special mental health application (mobile app) for adults and young people from the Black community. Other suggestions included creating a special Black community forum, implementing anti-stigma education in schools and local communities, teaching people about stigma, and changing misinformation and negative attitudes about mental health. Live examples of this also exist: for instance, Black Minds Matter and YoungMinds are in the process of creating an app solely for young Black people, and BAYO offers a network which provides individuals with access to a directory of services supporting Black communities, free bespoke learning packages, peer to peer support and networking.

Overall, insights from our primary research suggest there are significant gaps in mental health understanding, support, and access among Black young people. Participatory focus groups and a youth-led survey have identified stigma, lack of education, and inadequate access to mental health support as critical issues. Lack of cultural sensitivity and competence in mental health support also remain a challenge, compounding negative experiences and barriers to care.





# 2 OUR RESPONSE THE YOUNG CHANGEMAKERS PROGRAMME

The Young Changemakers programme supports Black and Black mixed-heritage young people to channel their lived experiences into tackling racial injustices in mental health services in England.

Young Changemakers is a dynamic programme that saw UK Youth, Centre for Mental Health and The Diana Award collaborating to bring together expertise from the mental health sector, youth services and formal education. Collectively, partners worked together with young people from racialised backgrounds to reimagine the culturally responsive mental health services they require.

The project is supported by young Co-Producers aged 16-25 with an interest in and/or lived experience of mental health issues and racial injustices. This project worked collaboratively with Co-Producers to give young Black people a seat at the table and ensure that decisions were shaped by their experiences.

The programme entails supporting and upskilling the young people involved. Young people first take part in a Youth Development Programme to develop their personal and professional skills, and to increase their knowledge and awareness of mental health and racial injustice. The other major component of the programme is the social action projects developed and led by Young Changemakers. Starting in Autumn 2021, the programme involved young people living across the country.

## THEORY OF CHANGE

Young Changemakers is underpinned by a theory of change framework (see diagram below) developed by the partnership and tested with Co-Producers prior to the formal launch of the programme. The theory of change articulates the programme's overarching aims, intended impact, outcomes, and activities. The overall aims of the programme are twofold:

1. To understand how mental health support works for young people from racialised communities.
2. To provide more opportunities for young people to take part in social action and make decisions about their mental health.

The partnership worked towards these four distinct but overlapping strands of activities:

- ⊙ Understanding the problem by strengthening the research and evidence base surrounding the mental health of young people from racialised communities
- ⊙ Developing young people's skills through a bespoke Youth Development Programme
- ⊙ Social action to mobilise young people to lead action and change in mental health support
- ⊙ Embedding systems change through policy influencing and disseminating learning with the youth and mental health sectors to shift funding and commissioning priorities.

In the first year, the Youth Development Programme was implemented nationally by The Diana Award. However, in years two and three, we refined our approach to emphasise local capacity-building. This involved shifting our focus to provide comprehensive support to youth workers, enabling them to deliver the programme effectively and assist young people with their social action projects within local youth and community settings.

# THEORY OF CHANGE

## PROJECT AIMS

1. To have a clear idea of how mental health support works for young people from racialised communities.
2. Young people from racialised communities have more opportunities to take part in social action and making decisions about mental health.

### PROBLEMS



### ACTIVITIES



### OUTCOMES



### LONGER-TERM IMPACT

## 1. BUILDING UNDERSTANDING AND AWARENESS

Not enough awareness and understanding of racialised young people's mental health

Work with Peer Researchers to do research on the impact of racial inequality on mental health

Gather and record evidence/information on the impact of racial inequality on mental health

Young people are able to explain their problems and issues that affect them in an open space

**Changemakers:** use the information they learn during the project activities to help young people's voices be heard

Actions occur as a result of young people expressing their views

**Young people from racialised communities:** A project about them is being led by people like them.

**Wider society:** Findings will be shared to raise public awareness and influence people making decisions about mental health.

More dialogue on wide array of mental health issues not normally spoken about, including schizophrenia

## 2. DEVELOPING YOUNG PEOPLE THROUGH SOCIAL ACTION

Not enough opportunities for racialised young people to take part in social action and peer support

Changemakers trained in:  
Peer research methods  
Social action  
Mental health awareness  
Mentoring, leadership and peer support

More positive mental health in young people from racialised communities through mentoring and development programmes

Young people build emotional resilience and wellbeing & peer support networks

**Changemakers:** have social and emotional development and resilience, and are helped to lead change with other young people from racialised communities

**Young people from racialised communities:** will benefit from the training through Changemakers being leaders in their community are encouraged or inspired by them

**Wider Society:** will recognise young people from racialised communities as leaders



## INFLUENCING CHANGE IN HOW PEOPLE GIVE MENTAL HEALTH SUPPORT TO RACIALISED YOUNG PEOPLE

Many places give mental health support or help, like hospital, schools and charities. The help they give often isn't well suited to young people from racialised communities.

Co-design and run training, resources and quality frameworks for people working with young people (e.g. teachers, youth workers, nurses).

People working with racialised young people gain better knowledge and confidence to support young people from racialised communities. This includes knowing how to connect a young person with the mental health system. Young people will feel empowered and that they're making a difference. Actions come from their plans.

**Changemakers:** Improve the quality of, and access to, mental health care for young people from racialised communities. They will have changed bad practice. They will know what else they can do in future to make a difference.

**Young people:** Will experience the benefits of this change.

**Mental health practitioners:** Can better recognise and respond to racialised young people's mental health difficulties. They will be able to create a more culturally inclusive environment.

**Mental health services:** Clinical and non clinical mental health settings change the way they do things.

**Decision makers:** Will be able to put in place effective policies and design and fund culturally appropriate services.

Organisations like Black Minds Matter and similar ones receive more following, engagement and funding.

More published data and research into young Black people's mental health.

## INFLUENCING CHANGE IN THE MENTAL HEALTH SYSTEM, COUNCILS AND THE GOVERNMENT

The mental health system for young people does not help the mental health of racialised young people well enough. It often does not take into account their specific needs. Often they are very unwell before being seen as in need of help.

Young people run campaigns and events, in local areas and nationally. They make/give helpful resources to the people coming to these events.

Influence councils and the government to take on young people's ideas in the ways they run mental health services for racialised young people. Young people from racialised communities have more power to make decisions.

## EVALUATION METHODOLOGY

The Young Changemakers evaluation combines a process evaluation with an impact evaluation across a three-year period from 2021-24, and primary research carried out in 2023, to address the following research questions:

1. What do young people think of the Changemakers programme?
2. What is the impact of the programme on young people's mental health and wellbeing?
3. What is the long-term impact of the programme on public awareness and mental health policies and practices?
4. What are the lessons for the partnerships and future programmes?
5. What do young people think their access to mental health support looks like, and what barriers exist for young people of colour?

Data collection (both qualitative and quantitative) took place between November 2021 and March 2024, and was conducted both online and in person. The data collection took place over four cohorts of young people as well as young people taking part in primary research focus groups.

Overall, we conducted:

1. **Online surveys:** These were completed by the Changemakers at the beginning and end of the programme. 92 Changemakers responded to our surveys. The surveys were distributed via Survey Monkey through each local youth organisation (and the relevant youth workers). Those answering the surveys were always from Black and Black mixed-heritage backgrounds as they were the focus of the programme.
2. **Focus groups:** Eight focus groups were conducted with Changemakers and two were conducted with Co-Producers. All of these were co-developed and implemented with Peer Researchers. The size of each focus group ranged from two to six young people. A further three focus groups were carried out with young people for the primary research. Here, the size of the focus groups ranged from 11-12 people. We have also completed two focus groups with the partnership (i.e. staff from UK Youth and The Diana Award).
3. **Youth worker interview and focus group:** An interview was conducted with a youth worker, and a final focus group with five youth workers, who all worked directly with the Young Changemakers.
4. **Peer Researcher reflective diaries:** As independent evaluators of the programme, Centre for Mental Health used a peer research model to run the research phase, arm-in-arm with Changemakers and Co-Producers. Three reflective diaries were captured by Peer Researchers about the focus group and the two Changemakers residentials.

Overall, the researchers used a mixed method approach to carry out the research for this programme, including both qualitative and quantitative methods. The qualitative methods included one-on-one interviews, focus groups, interactive online sessions and feedback via open-ended survey questions. The qualitative findings were analysed via a continual thematic analysis. The quantitative findings were derived from data collection via Survey Monkey across all the cohorts.

## DATA COLLECTION FROM YOUNG PEOPLE (CHANGEMAKERS, PEER RESEARCHERS AND CO-PRODUCERS)

### Changemakers' combined demographics (Cohorts 1-3)

For all three cohorts the Young Changemakers were recruited via a mixed method approach. This included online promotion through the national partners and a targeted recruitment through the local youth organisations involved in the programme. In year one, the programme partners agreed to focus on and exclusively recruit young people from Black and Black mixed-heritage backgrounds to focus on the particular and acute issues facing the Black community within the mental health system. This ethos remained the same throughout the subsequent cohorts. The programme used 'baseline' and 'end of year' surveys to collect data on how the programme was working for the Changemakers.

Across the three cohorts, 92 Changemakers were recruited between autumn 2021 and summer 2024. This included young people from all over the country including Birmingham, Bristol, Manchester, Leeds, London and Luton. 15 changemakers were recruited in cohort 1, 35 were recruited in cohort 2 and 43 were recruited in cohort 3.

### Ethnicity

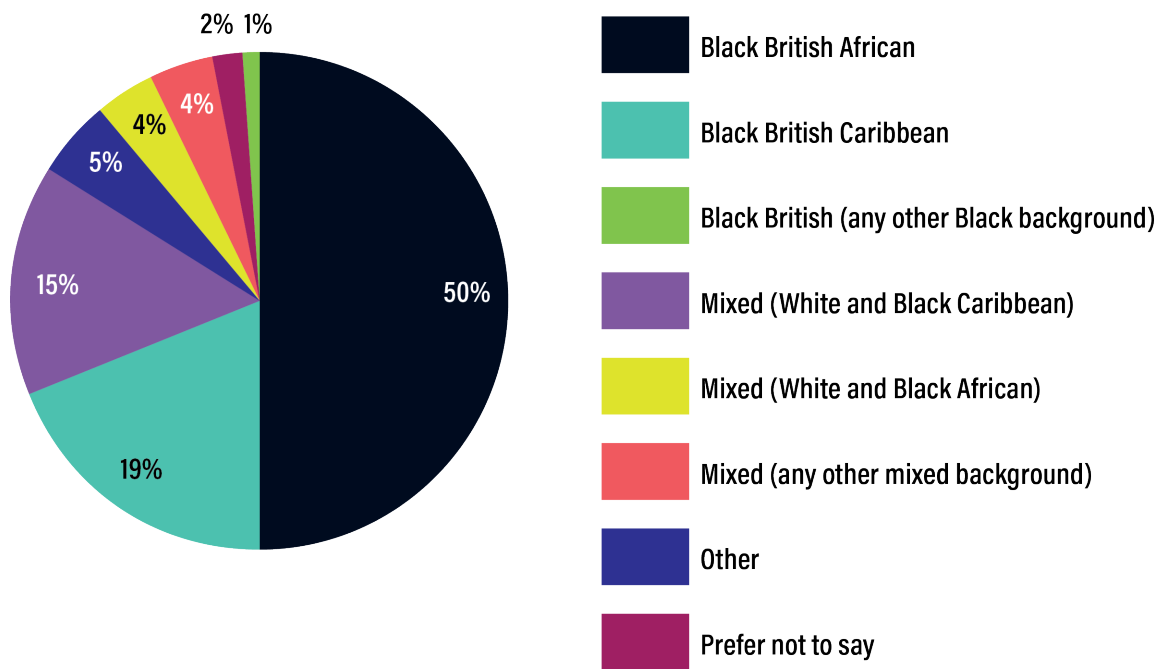


Figure 1: Ethnicity of respondents based on 82 responses. Note: these percentages have been rounded to whole numbers

### Gender

21 (26%) respondents identified as man/boy and 61 (74%) respondents identified as woman/girl. No respondents identified as non-binary. Two respondents skipped the question.

### Age

The respondents' ages ranged from 13-26 years.

## Groups the young people belong to

Two (2%) respondents identified as part of the LGBTQ+ community; two (2%) respondents identified as neurodiverse or having a learning disability; nine (11%) respondents had lived experience of mental ill health; three (4%) respondents had lived experience of physical disability; and ten (12%) respondents preferred not to say. Two respondents skipped this question. It should be noted that the respondents were able to select more than one option for this question.

## CO-PRODUCERS

The Young Changemakers programme also involved 26 Co-Producers with an interest in and/or lived experience of mental health issues and racial injustices. Co-Producers were also aged between 16-25 and resided in various places across the country including London, Leeds, Guildford, Newcastle, Birmingham, Manchester, Buckinghamshire, Luton and Essex. 23 Co-Producers identified as Black while two said they were mixed and one preferred not to say. 18 identified as female and 8 as male. Around 25% of Co-Producers said that they were living with a physical disability.

Co-Producers have been working closely with programme partners to co-design elements of the programme, including design and delivery, and have informed a Young Changemakers toolkit.

Specifically, they participated in sessions with UK Youth to co-design the logo, tagline, and branding as well as contributing to the recruitment strategy of the programme. They created a video to promote the programme applications. In addition, Co-Producers significantly contributed to the development of the theory of change, the Youth Development Programme, and the residential. For the residentials, they not only provided helpful insights but facilitated sessions, for example, as “judges” in a dragon’s den style panel and two Co-Producers facilitated a day-long workshop at the 2024 residential to develop policy and practice recommendations drawing on insights from the programme.

## ROLE OF PEER RESEARCHERS

The Centre worked alongside Peer Researchers as part of our evaluation process to capture direct and authentic insight from Young Changemakers and Co-Producers. In total, we trained 26 Changemakers and Co-Producers as Peer Researchers. Collectively, they took part in desk research, planning facilitating focus groups and interviews, and writing participation observation and reflective diaries.

## OTHER KEY DATA

During the course of the three cohorts, the programme as a whole engaged: 26 Co-Producers, 92 Changemakers, 15 Peer Researchers, 8 youth organisations, 14 youth workers directly (and over 100 indirectly), and 15 social action projects. (Some Changemakers went on to become Co-Producers or Peer Researchers, and therefore had more than one role over the lifetime of the programme.)



# 3 THE POWER OF YOUTH-LED SOCIAL ACTION

To drive meaningful change in the mental health experiences and outcomes of young Black people, the Young Changemakers programme supported young people and youth organisations to design and implement youth-led social action initiatives across England. This chapter provides a summary of these initiatives, and the key insights gained from them.

## THE ROLE OF THE YOUTH DEVELOPMENT PROGRAMME

Young Changemakers has been successful in establishing a comprehensive Youth Development Programme and a pathway to meaningful social action for young people. The programme supported and upskilled young people with a passion for or experience of mental (ill) health and racial injustice to participate in the change process. To do this, young people took part in the Youth Development Programme (YDP) to develop their skills and confidence, and to increase their knowledge and awareness of mental health and racial injustices.

Overall, the sessions were described by young people as a safe place to discuss topics that they felt they couldn't normally discuss. Most Young Changemakers agreed that they enjoyed the YDP sessions and found them helpful. In general, they agreed that the YDP had been helpful in expanding their knowledge and understanding of mental health, especially within the Black community, as well as how to take care of and check in on themselves.



"More confidence in discussing the topic... confirming what you know in the session boosts your confidence a little bit more"

The YDP was developed and implemented online by staff from The Diana Award in year one and by youth workers in years two and three. In total, there were six sessions throughout the programme, including sessions on 'mental health and mental health services', 'effects of racism on mental health', 'resilience', 'race and resilience', and two sessions on 'social action'.

Young Changemakers were asked about their experience with the programme twice in cohort one: after the YDP and at the end of the programme (see table below). At the baseline and end-of-year surveys, the Young Changemakers were presented with statements about their existing mental health knowledge and awareness. They were asked to indicate the extent to which they agreed or disagreed using a scale of 1-5, where 1 = strongly disagree and 5 = strongly agree. The table below shows the responses for both surveys.

The questions cover various aspects, including their interaction with staff and with other Changemakers, and whether being a Changemaker contributes to their professional goals. Overall, Changemakers' scores between the two time points were very similar across all items. The two noticeable changes between the two periods were for "I have made some friends from the programme" and "I usually don't feel safe when I am involved in the programme" (in both cases, in a more positive direction).

Based on Table 1 below, there were three key changes reported by the young people. In terms of safety perception, participants indicated a higher sense of safety when involved in programme activities after they had completed the programme.

Secondly, young people felt more encouraged to express their views and opinions at the end of the programme, with the median rating increasing from 4 to 5. This suggests the programme effectively fosters an environment where Black young people feel their voices are valued.

Finally, these scores also indicate that at the end of the programme, Changemakers appear to have made more friends from the programme compared to the earlier stage of the programme and that the programme has usefully created a safe space for young people.

**Table 1: Young Changemakers' self-rated median scores on the experience of the programme after the Youth Development Programme and at the end of the programme - cohort 1**

	After YDP	End
	(1 = Strongly Disagree - 5 = Strongly Agree)	
1. I think that participating in the programme helps me with my professional goals (e.g. jobs, education)	5	5
2. I have made some friends from the programme	4	5
3. I usually don't feel safe when I am involved in programme activities*	2	1
4. There's at least one staff member that I can go to for support or help with a problem	5	4.5
5. I am not sure what to do or where to report any concerns about the programme*	2	2.5
6. Adults in the programme do not listen to what I have to say	1	1
7. I help to decide things like programme activities or rules	4	4
8. I feel I have a lot of voice/power to influence decisions about the programme	4	4
9. It was difficult for me to get involved in the programme*	2	2
10. I am encouraged to express my views and opinions	4	5
11. The programme has had a positive influence on how people in my community treat me	4	3.5
12. The programme has had a positive influence on how I treat people from my neighbourhood	4	4
13. I plan to work on community issues, especially in those relating to racial inequalities, after I stop participating in the programme	5	5
14. The programme encourages and enables me to explore and act on issues that matter to me, either myself or together with groups of my peers, offline and/or online	5	5
15. Being a Changemaker makes me feel like I belong to a wider network of like-minded young people	5	4.5
16. I do not feel accepted and understood by other young people in the programme*	2	1.5
17. This programme helps me build a wider supporting network	4	4.5
18. Being a part of this programme encourages me to participate in other youth networks and programmes in the future	5	5

*\*Reversed scores*



## PERSONAL DEVELOPMENT

Changemakers reported increased knowledge and confidence in discussing difficult topics, such as mental health and racism, since joining the programme. They enjoyed working in group settings and valued hearing diverse perspectives on handling and overcoming challenges in their lives, such as public speaking.

In their final focus groups, young people were also invited to reflect on their personal development throughout the programme. All the young people in the focus groups agreed that they have grown over the period of the programme, as highlighted in the below quotes:



"Definitely. Specifically, I've grown in confidence about what I have to say and knowledge in this area."



"Just understanding the value of my voice, the capacity of change as in seeing examples and seeing other people who are passionate as well really helps me grow in that aspect. I think in general it makes me more open to see myself as an activist, see myself as someone who can create changes"

Young people particularly enjoyed the guest speakers at the YDP sessions, the opportunity to refresh and expand their mental health knowledge, and the chance to meet and collaborate with others in group settings. They also mentioned that they didn't expect people to be so open and authentic at the sessions (both staff and other Changemakers).

Young people also mentioned the importance of self-care as part of their learning and stated that:



"It was really important for me... thinking about how do I protect myself and how do I think about myself when doing this sort of work?... I definitely think that it's helped me to develop my self-care tools and resilience when it comes to engaging [in] this kind of work as well."

## PERSONAL SKILLS

In our reflective focus groups, young people on the programme spoke about how the YDP had enabled them to develop personal skills, such as organisational and event planning skills. Practically, this translated into researching potential venues for events, developing strategies for social media, marketing events, and exposure to finances and budgeting for large scale events.



"I started by saying I find myself wanting to talk more. As someone who is quite shy, the sessions have given me the opportunity to talk more about the things that I am passionate about"

One participant told us how their involvement in the programme had enhanced their self-confidence in terms of their "thoughts and ideas", and that "seeing and knowing that their ideas are valued" and can be realised was positive. Several participants also told us how the programme had enabled them to develop increased teamwork and communication skills and had given them a greater ability to approach and talk to new people.

The YDP gave young people the opportunity to develop their relationship-building skills, meet new people and friends and develop supportive networks. They described how it has "pushed us out of our comfort zone to try new things" and has provided "a better understanding" of how individual and environmental factors, such as upbringing, background, and surroundings, can "affect oneself", especially in relation to mental health.

When asked to what extent the YDP sessions were helping them with their personal goals, one participant told us:



"I'm more ready to speak on mental health in Black people. I'm more ready to help my friends out if they are in a bad spot, and more able to recognise if someone is in a bad spot. And I feel like this is gonna become really helpful and I'm ready to put it into test now"

We also asked those who had completed the YDP if they had seen any changes in themselves since coming to the programme, with a particular focus on confidence, new skills, and knowledge and understanding of mental health. One participant told us that they had become more open about mental health if they were struggling:



"In Black cultures, you don't really speak to your parents about mental health, you don't learn it at a young age. If I didn't come here, I would have just kept it to myself... but now I feel like I am able to speak up about it, find my friends and they hopefully will understand me and that would be a really big thing, especially with more stressful years [university] coming up."

The idea of a growth in confidence on how to speak out about these issues was also touched on by another Changemaker:



"Right now, at least I'm able to have this idea of what if this is this or this, and if it ever comes to that, I am able to go and maybe bring it up to a friend to see where it goes from there"

## **RACISM**

The Young Changemakers YDP covered topics about being Black within mental health services, microaggressions, racism in modern medicine, and the root causes of these issues. The things that the young people found valuable during the programme included developing a deeper understanding of microaggressions and understanding when someone is being "micro-aggressive" toward them, improved confidence, and learning more about mental health and its links with racism.

At the beginning of the programme, most Young Changemakers were well able to define racism in their own words. They described:



"A combination of discrimination and prejudice and power from both the individual and institutions towards a community."



"Prejudicial treatment based upon racial background or ethnicity which can manifest itself through personal interactions or societal structures."




"Racism is both systematic and outward discrimination against someone because of their race. Although racism can come in many forms which include covert."


In terms of how the programme has had an impact on participants, young people felt that they had become more knowledgeable on topics relating to racism and mental health and how they can support young people's mental health (including their own). This included understanding microaggressions from previous experiences and how to deal with it in the future.



"We learned how much racism there is in the health system and how more people of colour are referred to mental health support through the criminal justice system."


The YDP also included open discussions on racism and its impact on Black mental health, along with strategies for coping. The programme helped participants to develop enhanced communication skills, with one individual noting how it improved their relationships and enabled them to navigate conversations about their mental health and racial injustices with greater openness and eloquence among their peers. Changemakers commented:


 "I think [I gained] more statistical knowledge about Black mental health in particular, I guess. I think we got, at least for me, more anecdotal information from people around us in our community, but yeah just looking at different stats and resources is helpful for our knowledge"

 "It [the programme] targets people like me and I want to help people that look like me and are like me basically. So, the fact that it's based on minorities' mental health and how we can better the resources really intrigues me because that is gonna help me down the line as well. I know that a lot of people like me have been affected but not been able to get the help they needed at the time"

These conversations are important as they help young people to learn about their own and other similar people's experiences. This discovery of similarities and differences in their shared or individual experiences was felt to be "helpful and comforting".

At the end of the programme, Young Changemakers were asked to what extent they thought the programme had helped them to understand the relationship between racism and mental health. Overall, their answers suggest that they had developed a deeper understanding of racism within the mental health system as a result of the Young Changemakers programme:

 "I did already have a good amount of knowledge, but this programme pushed me to look at research, other people's lived experiences and so on - which helped me understand the relationship further."

 "Hearing the experiences of others as well as the evidence base explained by the workshop facilitators put things into perspective. That racism is not just morally repugnant, it also has an effect on mental health and wellbeing both directly and indirectly."

Furthermore, in our end-of-programme focus groups, when speaking about how the programme has helped them to understand racial inequalities, one participant discussed how the media can over-exaggerate progress in this area. While they thought that "things have changed compared to 30 years ago", young Black girls, for example, continue to face "a lot of challenges".

## MENTAL HEALTH

At the baseline and end-of-year surveys, the Young Changemakers were presented with statements about their existing mental health knowledge and awareness. They were asked to indicate the extent to which they agreed or disagreed using a scale of 1-5, where 1 = strongly disagree and 5 = strongly agree (see Table 2 below). The table below shows the responses for both surveys.

At the baseline, the Young Changemakers appear to be confident in connecting to and understanding their thoughts and feelings. At the end of the programme compared to the baseline, there were improvements in the Changemakers' knowledge of the signs of poor mental health in their peers or families; their ability to identify when they are struggling with thoughts and feelings; their knowledge of how to deal with stress; and their ability to bounce back quickly after hard times. The Changemakers also appear to have an increased awareness of where to ask for mental health support if needed.



There was also an increase in the Young Changemakers' ability to identify tools and resources to take care of their mental health. The respondents were also slightly more confident in starting conversations about their mental health at the end of the programme.

**Table 2: Young Changemakers' self-rated median scores on mental health knowledge and awareness at the baseline and at the end of the programme - cohorts 1 and 3**

	Baseline	End
	Median (1 = Strongly Disagree - 5 = Strongly Agree)	
1. I know the signs of poor mental health in my peers or family	4	4.25
2. I can connect to and understand my thoughts and feelings	4	4
3. I can identify when I am struggling with my thoughts and feelings	4	4.25
4. I don't know how to deal with stress*	3	2.75
5. I tend to bounce back quickly after hard times	3.5	4
6. I do not perform well under stress or in the face of challenges*	2.5	2.75
7. I am not aware of where I can ask for mental health support if needed*	3	1.75
8. I know which tools and resources I can use to take care of my mental health	3.5	4
9. I know of suitable services/organisations I could contact to support mental health problems	3.75	4.25
10. I am likely to seek help for my mental health from my family or friends	3.75	3.5

*\*Reversed scores*

In focus groups, participants agreed that they have learnt a great deal about different aspects of mental health, especially Black mental health, and that listening to other people's experiences is "insightful", helping individuals to understand and navigate their own experiences, thoughts, and feelings. One participant shared that the programme has helped them understand that their experiences are not unique, which can be comforting and helps to validate their feelings.

Hearing about other people's experiences of mental health issues helped Changemakers gain a deeper understanding of the varying impacts it has on people, and they reported that they have developed skills to deal with their own mental health and experiences of racial injustice. This ability has extended to being able to do this independently but also knowing "when, where and how to seek support".



"The main selling point for me is I can learn how to protect myself if I get into a really dark place... I will know now how to get out of it"

We also asked Changemakers about their awareness and knowledge of mental health (e.g. depression, anxiety, and how mental health can be linked to daily life) as a result of the YDP. One Changemaker told us:



"If you asked me a couple months ago about mental health, it would be a whole different story. But now, I actually know more of this serious topic and there are people out there who are struggling just from not feeling good, and it's scary 'cause I feel like there are a lot of people out there who don't know how big mental health is, and yeah I feel like I've learnt a lot with my knowledge, maturity and confidence."

Finally, the vast majority of young people felt that their project had positively impacted their mental health as it was enabling conversations that help to destigmatise mental ill health and raise awareness. It was suggested that the programme enables young Black people to "be more vocal" about their own experiences and challenges with poor mental health and to "start conversations".

## **YOUTH-LED SOCIAL ACTION**

Research shows that certain groups of young people, particularly those from racialised communities, immigrant backgrounds, and lower socioeconomic backgrounds, face significant barriers to social action, including limited resources, opportunities, and confidence (Department for Culture, Media and Sport, 2021). This programme aimed to address these challenges and broaden access to opportunities for all.

Young people were supported by the programme and youth organisations to design and deliver their own social action initiatives. These aimed to raise awareness about the mental health of young Black people and advocate for policies and practices that better protect and prioritise their mental health.

Through the course of the programme, young people developed 15 social action projects, detailed in Table 3.



### **WHAT IS YOUTH SOCIAL ACTION?**

"Youth social action can be defined as youth-led activities that produce a benefit for communities as a result of the action, and for young people, as a result of taking part in the social action. Youth social action can be flexible in delivery and must involve at least one of three core mechanisms that improve the skills, wellbeing or increasing knowledge of others and sense of belonging of a young person."

- #iwill (#iwill, 2023)

**Table 3: Young Changemakers' social action projects**

Cohort	Social action projects (* indicates project was selected to become an accelerator project – this is described further after this table)
1	<p><b>Not So Micro*</b> This social action project campaigned to reform policy around school teacher qualifications, to make training on racism and microaggressions a mandatory element of teacher training.</p> <p><b>Team Engage</b> This social action project aimed to create cultural awareness training for GPs and mental health practitioners.</p> <p><b>Team Change</b> This social action project aimed to influence attitudes towards young Black people’s mental health and improve communication on mental health within the Black community, whilst giving young people a voice.</p> <p><b>Team Verity</b> This social action project aimed to bring truth to sexual abuse survivors through podcast interviews.</p>
2	<p><b>Integrate UK – Bristol*</b>  <b>Group 1</b> – The Young Changemakers hosted an event for local schools to raise awareness about the mental health of racialised communities, bringing in specialist speakers and providing a platform for young people to openly discuss mental health.  <b>Group 2</b> – The Young Changemakers created a three-part podcast series, hosting conversations with experts in supporting racialised communities struggling with mental health.</p> <ul style="list-style-type: none"> <li>▪ Between The Intersections - <a href="#">Episode 1 - Nasra Ayub</a></li> <li>▪ Between The Intersections - <a href="#">Episode 2 - Aisha Thomas</a></li> <li>▪ Between The Intersections - <a href="#">Episode 3 - Trasi</a></li> </ul> <p><b>Getaway Girls – Leeds</b> The Young Changemakers took photos in their local salon and directed a short film, both of which were used in a social media campaign to highlight challenging situations young Black women may experience.</p> <p><b>CEF Lyncx – London</b> The aim of this social action project was to highlight the inequalities in access to safe spaces and facilities for young people from racialised communities and its impact on mental health and wellbeing.</p> <p><b>Ameina Centre – Luton</b> The Young Changemakers created a social media campaign on TikTok to raise awareness and explain various issues and stigma surrounding mental health in the Black community.</p>

### **Ameina Centre – Luton**

The Young Changemakers hosted a series of workshops to raise awareness around mental health for local young people and parents. The aim was to open conversations about mental health in the Black community, reduce stigma, and provide a safe space for information, discussion, and understanding.

### **BigKid Foundation – London**

The Young Changemakers produced a social media campaign aimed at creating positivity. This included a series of reels on happiness, and promoting positive mental health with a diverse range of interviewees sharing who and what they are grateful for. It was important for them to put positive content out there, especially to amplify voices of people of colour.

### **Getaway Girls – Leeds\***

The Young Changemakers worked on 'My Hair Story', a social media campaign launched at the Getaway Girls Black History Month event which promotes self-care, self-worth, confidence, and good self-esteem. It provided them with the opportunity to work on issues that Black girls and women face and explore how this can negatively impact their mental health. The girls and young women produced a short educational video which is to be used as a resource for teachers and other professionals to address racial injustice in schools. The video looks at the disparities between the treatment of Black and dual heritage girls in comparison to their white friends or other racialised pupils. There are four key messages:

- Pronounce my name right
- Don't touch my hair
- Treat me fairly
- Adulthood and the importance of supporting Black and dual heritage young women needs in an age-appropriate way.

### **Integrate UK – Bristol**

The Young Changemakers created and hosted a pilot fundraiser talent show and art exhibition with acts and uplifting performances by people from racialised communities. There were mini workshops around the venue with art where people could talk, get food, raffle prizes, and so on. Practitioners and people from the charity sector attended, as well as local Bristol-based organisations and individuals. The event built a sense of community through an uplifting event that celebrated and showcased the diversity of Black and Black mixed-heritage artistry, and promoted allyship and cross-cultural cohesion.

### **M13 Youth Project – Manchester**

The Young Changemakers planned and delivered a community event highlighting their learning about mental health and racism, young people's experiences of school, and how to support positive mental health. A manifesto of change was created by the young people which showed what they would like to be implemented in schools.

### **St Luke's Cares – Leeds**

The Shine, a Changemakers group, aimed to tackle the issue of prejudicial behaviour they had experienced at school. The girls decided to run an event and create a podcast. The event 'Shine – Get Together' helped to raise awareness of the effects of racism on mental health and to promote self-care and wellbeing. As part of the project, the Young Changemakers were able to visit a place that would broaden their knowledge in this area. The group chose to visit the International Slavery Museum in Liverpool. This helped the group to reflect on the roots of racism in society and how society has changed.

Young Changemakers in our participative focus groups told us that the aim of the social action projects, for them, was to speak about issues and seek ways to gain support and effect change. Participants felt, for example, that Black girls were more likely to face challenges at school (e.g. teachers assuming that they are loud). Having the opportunity to speak about these experiences offered a sense of community and better representation of Black people's voices in schools, along with a chance to drive change in this area.

## **ABOUT THE ACCELERATOR PATHWAY**

The accelerator pathway provided additional grant, support, training and development opportunities for one social action group from each cohort for a further six months. The aim was to support the group to continue making an impact in their community, building on the success and learnings from their initial social action project; for them to have a wider collective impact on the mental health of young Black people; and to support their personal development and provide opportunities for them to continue their youth leadership journey. We have seen these aims met and ongoing positive impact from each of the three projects:

- ⦿ **Not So Micro** – The group conducted a survey of over 200 school staff to help inform their ongoing work and activities to embed anti-racism and microaggression training within the teaching curriculum. They responded to the Government's Schools White Paper (2022) and presented at various events including a national mentoring summit, the National Association of Head Teachers (NAHT) Leaders for Race Equality Network, and the Children and Young People's Mental Health Coalition.
- ⦿ **Integrate UK** – The group built connections and started conversations between health care professionals and local charities. They shared their insights and learnings with mental health practitioners at the Children & Young People's Mental Health: Improving Access to Effective Support conference, and showcased how to use social action to tackle inequality and influence change.
- ⦿ **Getaway Girls** – The group continued their work with the Leeds Child Friendly City Voice and Influence team and the Women and Girls Alliance Leeds, working in partnership to influence decision makers and amplify young Black and dual heritage women's voices. They promoted resources they created as tools to engage and discuss mental health within the Black community and educate teachers and other professionals.

## **AMPLIFYING VOICES: YOUNG PEOPLE'S EXPERIENCES OF SOCIAL ACTION**

Throughout the programme, we gathered young people's insights on their experiences of leading social action projects aimed at addressing racial inequalities in mental health care. Below, we summarise the key benefits and challenges they encountered, along with perspectives from the youth workers who supported them.

## **BENEFITS AND IMPACTS OF WORKING ON SOCIAL ACTION PROJECTS**


At the beginning of their journey, 43% of Changemakers expressed a desire to develop specific skills for advancing social action work. At the end of the programme, Changemakers were asked to rate their understanding of social action, how to develop social action projects, and working as a team to deliver social action. As we can observe from Table 4, Young Changemakers consistently scored 4 out of 5 on the Likert scale, strongly agreeing with the fact that the social action projects had helped them develop.



**Table 4: Young Changemakers' self-rated median scores on their experience at the end of the programme**

Statement	Median (1 = Strongly Disagree - 5 = Strongly Agree)
1. I think that participating in the programme helps me with my professional goals (e.g. jobs, education)	4
2. I have made some friends from the programme	4
3. I usually didn't feel safe when I was involved in programme activities*	2
4. There's at least one staff member that I could go to for support or help with a problem	5
5. I am not sure what to do or where to report any concerns about the programme*	2
6. Adults in the programme didn't listen to what I have to say*	1
7. I helped to decide things like programme activities or rules	4
8. I felt I had a lot of voice/power to influence decisions about the programme	4
9. It was difficult for me to get involved in the programme*	2
10. I was encouraged to express my views and opinions	4.5
11. The programme has had a positive influence on how people in my community treat me	4
12. The programme has had a positive influence on how I treat people from my neighbourhood	4
13. I plan to work on community issues, especially in those relating to racial inequalities, after I stop participating in the programme	4
14. The programme encouraged and enabled me to act on issues that matter to me, either myself or together with groups of my peers, offline and/or online	4
15. Being a Changemaker made me feel like I belong to a wider network of like-minded young people	4
16. I did not feel accepted and understood by other young people in the programme*	1.5
17. This programme helped me build a wider supporting network	4
18. Being a part of this programme encouraged me to participate in other youth networks and programmes in the future	4
19. My youth worker gives me constructive feedback on my project	4
20. My youth worker helps me to develop my social action project	4
21. My youth worker and I are forming a good relationship	4
22. My youth worker and I are able to share important information with each other	4
23. Through the YCM programme, I understand more about social action projects and how to develop them	4
24. Through the YCM programme, I understand more about working in teams to deliver social action	4
25. I am confident bringing about change via social action	4
26. I have had all the support that I needed to carry out my social action project	4

*\*Reversed scores*



In focus groups, young people said they felt that working on their social action projects gave them more control and independence to be able to make change(s), with one focus group participant highlighting the importance of young Black people feeling empowered. This style of work, young people felt, allowed for greater creativity and an affirmation that their ideas can be realised. This offers a chance for young people to create and do something that is meaningful to them. Young people also indicated that they truly believed that their project would promote change and make a difference.

Young people expressed the benefits of being able to co-create alongside other young people – something they said is “rare”, and that they would value having more opportunities to do. The social action projects have given them the opportunity to produce meaningful large-scale events and moments which make them feel “valued and heard” and that they are making a real “impact”.


Other Changemakers spoke about how the social action projects had enabled them to identify similarities and differences in experiences of young people from racialised communities and that staff had been “enthusiastic” and “pushed” the young people in a “positive way”. They felt “supported” and “encouraged” to expand their thoughts and ideas. Furthermore, they felt listened to and involved, that ideas were always listened to and discussed as a group (no-one felt dismissed or left out), and that there was good communication where participants had regular meetings to discuss progress and ideas. Finally, having the option to message staff and one another in between meetings for extra support was highly valued.

## EXAMPLES OF WORK FROM THE SOCIAL ACTION PROJECTS

**For St Luke’s Cares in Leeds**, they attended an event on improving health inequalities with the local council and voluntary groups to share their experiences and discuss the impact of racial injustices in schools. The youth worker stated that becoming more confident in “speaking and sharing their stories with policy makers in a large group” was the most significant change for the young people since starting the programme. The group later hosted their own event to promote self-care and positive mental health, and recorded a podcast as a resource to raise awareness and spotlight the issue.

**For the Ameina Centre in Luton**, the young people interviewed individuals from the Black community on the perceptions of mental health. The purpose for them has been to spread awareness, educate, and provide resources for mental health support, as they felt that mental health is often “not seen as a thing” in the Black community. They have also created mental health workshops and seminars for both young people and adults which have included discussions on Black mental health, the causes of mental ill health, social stigma, and brainstorming ways to tackle these issues as a community. This was mentioned by one participant as one of the most valuable takeaways from Changemakers overall. Other participants created a questionnaire to collate data on Black mental health (e.g. experiences, perceptions and availability of support services), an ongoing project which aims to gain a clearer picture of how the Black community can be better supported.

**For M13 in Manchester**, Changemakers organised sessions with past students from a local school to discuss student mental wellbeing and how school policies, welfare services and systems can be improved to make them more accessible for current students. The young people all felt that the project had been successful, and one found that young people are more open to listening to and talking about mental health “as long as the right people are present or run” the sessions and discussions. In other words, the role of the facilitator here is key.



A staff member for a social action project also shared that the young people in the project often experience some sort of injustice at school, and having a space for them to come together and talk about their experiences can be empowering and positively influence their mindset, as it makes them feel heard and valued as members of the school community.

## **LEARNING AND CHALLENGES FROM THE SOCIAL ACTION PROJECTS**

Throughout the course of the social action projects there remained several 'pain points' that needed addressing. These included discussions around the practical difficulties and barriers in helping young people to build their social action projects.

Several young people specified difficulties in the early stages of setting up, formalising and materialising their project plans. Both the young people and organisations themselves explained that over the course of the programme they had varying amounts of progress with their projects.

Additionally, one participant told us that:



"I didn't feel the actual target was achievable, I didn't feel that as a group we communicated in the best way, and also we didn't have a mentor and our communication with the youth worker wasn't the best as well so if I'm honest, it was not as enjoyable, and I couldn't really name any highlights as we still haven't delivered anything".

However, they did mention that it wasn't "a total waste of time" as they could still learn something from the process, especially during the planning phase meetings.

## **CHANGEMAKERS RESIDENTIAL**

During the course of the programme, we held two Changemakers residentials. These were aimed at bringing together Changemakers to develop their social action projects and building recommendations for reimagining mental health support. Some Co-Producers also attended the weekend to share their experiences and take part in a decision-making panel to distribute micro-grants to Changemakers to support their social action projects.

As part of the evaluation, Changemakers were asked about their experience of the residential using an in-person feedback form. Two Peer Researchers also wrote reflective diaries detailing their experience and their observation of others during the event.

Overall, the feedback from the Changemakers was good. Changemakers thought the pre-event information about the day was communicated clearly to them and that the event was well organised with a clear structure. Changemakers were happy with the length of the event, whilst some suggested a longer time for the residential.



"There wasn't a moment that we were left just kind of waiting around... It was a really good time for team building and getting to know everyone."

Changemakers particularly enjoyed the team activities and getting to know other Changemakers, especially their social action team. We also received many positive comments about the speakers and workshops at the residential and most young people stated that the event exceeded their expectations.



"[The speaker's life story] was comparable to mine in quite a few ways, so seeing her in a position to make speeches and inspire change was amazing, and I personally think she was a really good choice to open up the weekend."

The residential has been a key achievement of the programme so far. It was productive and inspiring for young people and staff, who shared feedback including the below:



"Having a room full of young Black and Black mixed-race people working on these amazing projects, presenting so clearly, hearing their ideas in two days... it highlights what young people can do."

The residential was important in fostering a sense of belonging and community between young people, which was less prominent in the digital meetings:



"I didn't expect to be as sad as I was about saying goodbye to everyone, and I definitely didn't expect to leave with three different group chats, and a bunch of people's social media handles so we can stay in touch. I can honestly say that, as well as doing the main goal of starting up the social action projects, I also made a few solid friendships."

## **THE ROLE OF YOUTH WORKERS AND YOUTH ORGANISATIONS IN SUPPORTING YOUNG PEOPLE**

Local youth organisations were instrumental in delivering the Young Changemakers programme. They provided direct support to young people through the Youth Development Programme, helped them develop social action projects, and offered essential pastoral and emotional support. This section delves into the perspectives of youth workers on the programme's delivery and their role in making youth-led social action in this area a success.

Eight youth organisations were recruited through UK Youth as partners in the programme. They participated in a one-day intensive training session as part of a 'train the trainer' model that covered the programme details, including the delivery of the Youth Development Programme and social action projects.

Throughout the cohorts we spoke with a total of eight youth workers to explore their reflections on the programme; this was done through a combination of focus groups and one-on-one interviews. The youth workers understood that their role was to facilitate the development of the young people and their involvement with the programme at the local level, and to provide young people with the support they needed to successfully deliver their project(s). The youth workers described their roles as being "a resource [for the young people] to call upon and provide whatever support that they need". We also wanted to find out from youth workers how they felt the Changemakers programme went overall, what successes or challenges they came across and how impactful they thought the programme had been for the young people.

## CASE STUDY: GETAWAY GIRLS

Getaway Girls, a Leeds-based youth organisation, took part in the accelerator pathway after the success of their work around identity, relationships and mental health, expressed through young people's hair.

The group held an awareness event at a local salon, where young people could have their hair braided in different styles while the group talked about mental health, and produced My Hair Story, a social media campaign celebrating black hair.

"We had group conversations where we discussed how we felt about our hair and how important it was to us. Together we looked at some of the difficulties we have had finding the correct products and how this can sometimes be expensive. In sessions we talked about how people have been discriminated against due to their natural hair in the workplace and educational settings."

Getaway Girls applied to the accelerator pathway in a bid to increase understanding of race, reduce stigma and amplify the needs of Black and dual heritage young women in relation to mental health, emotional wellbeing and support services.

"The aim for the accelerator was for the Getaway Girls Changemakers group to come back together, to work with partners to bring the campaigns to life and disseminate the My Hair Story campaign, to disseminate resources and tools to a wider audience, and to showcase the learning from the accelerator programme and further opportunities for voice, influence and change in Leeds."

"It's important for funders, policy makers, organisations to truly listen to the young women from Black and mixed-heritage backgrounds and their lived experience. Hear what they have to say and where possible start with that."

Key learnings for the Getaway Girls Young Changemakers included:

- ⦿ The need for a Black and dual heritage group longer term
- ⦿ The importance of the opportunity for open discussions re issues around race that may be taboo
- ⦿ The power of peer support
- ⦿ The need for young people's involvement in producing resources and workshops
- ⦿ A sense of belonging to the Black community.



## THE BENEFITS FROM YOUTH WORKERS' PERSPECTIVES

Youth workers said that overall, the programme had “been good” and they liked the approach taken. One youth worker spoke specifically about the collaboration of three organisations in mental health, “each of which provides [a] specific area of expertise” as being a benefit. They also enjoyed seeing the young people who were recruited “actually being allowed to think what it is that they want to address and to take the initiative to work on things that they want to address”. They highlighted that “this is the first time where I could say that it is genuinely youth-led”.

In focus group sessions, youth workers described the “train the trainer” day as both informative and inspiring, helping them build skills to better support young people in the programme. They noted that the training enhanced their capabilities, deepened their understanding of racism and its impact on mental health, and emphasised the importance of youth social action. It also equipped them with tools to effectively apply the training they received through the delivery of the Youth Development Programme. However, they felt that the theoretical aspects of the training were less applicable to the practical challenges they faced, and additional guidance on event planning would have been beneficial.

The online training was also useful because there were different individuals (such as local policy makers) present, which helped with the social action plans and boosted the morale of the youth workers. There were also check-ins with UK Youth which were helpful and the meeting with Co-Producers helped the youth workers think about their social action projects.

For young people, youth workers reported that benefits could also be seen from “the offset in the session settings”, with young people having a safe space “to be heard and be passionate about the topic that they are interested [in]”. The youth workers felt that this online setting allowed young people to be more confident in themselves in “talking about this topic” in front of the group and that on a personal level, they found that young people’s confidence grew, especially when speaking to adults about their personal experiences of racism. This all helped to build an environment where they could “develop their voice, be more confident about it and [...] be heard”.



“Young people have benefited greatly from this opportunity to do something in the matter - also about giving the tools and platforms (for staff) to do so”

They also reported that young people were “able to learn new skills through the social action project and were good at opening up discussions and talking about their own personal experiences in a safe environment”. Furthermore, a youth worker mentioned that the skills young people have developed are “very important skills which some young people don’t have access to”.

At the first residential, a youth worker also emphasised the connection and communication made during these two days between young people:



“I think having a residential is very good. Getting young people out of their everyday environment into a totally different environment was absolutely brilliant... It wasn’t so much that young people needed a lot of support, perhaps if it was a different group, maybe, but these young people, their leadership quality came through, their skills in terms of new technology came through, so very much the leadership skills came through, very, very strongly. I don’t think, if they didn’t have that environment, they would have flourished in that particular way.”

## **AREAS FOR IMPROVEMENT**

When asked about any areas for improvement, youth workers offered a range of useful suggestions. This included “staggering” the Youth Development Programme (YDP) training to give young people more opportunities to raise and address upcoming needs. It should also be noted that a number of the sessions took place immediately after school, which meant that making extra budget available for food and extra time for rest was important.

Regular engagement of young people throughout the cohorts remained a pain point. The youth workers reflected that, “in terms of engagement, it was up and down because the young people had holidays and other commitments”. This could make it hard to carry out social action projects at times. This had the unintended effect of occasionally creating stress for the young people “to get the action project done within the short timeframe” (i.e. six months).

In addition, youth workers fed back that at times, the content in the YDP was viewed as “heavy” and youth workers needed to be adaptable and use their own lived experience(s) to navigate this. The tools that were given helped with this, but some topics were still felt to be heavy. For more difficult sessions, some of the youth workers helped the young people re-mould the programme sessions.

In addition, youth workers noted a shortage of providers who understand the specific needs of the Black community. To address this, they suggested several potential solutions. Firstly, they emphasised the importance of partnering with organisations that are culturally sensitive. They also recommended carrying out the Young Changemakers programme in collaboration with Black-led organisations and working with partners who share the right intentions. Lastly, they highlighted the value of youth workers sharing information about training opportunities and exchanging ideas or insights to support one another.

Finally, youth workers noted that it is important for programmes such as Young Changemakers to continue to actively acknowledge that Black people are “not all the same” and are from different cultures, communities, and backgrounds, and that as a result, youth workers do “not know everything”. Supplying additional training and support on this matter would be “helpful” to the youth workers.

## **KEY LEARNINGS FROM THE PROGRAMME THAT YOUTH WORKERS HOPE TO TAKE FORWARDS IN THEIR WORK**

Youth workers reflected on what learnings they could continue to build on and embed within their organisations following participation in the programme. One of the key takeaways was the importance of having open and safe conversations about racism with young people. Youth workers felt that this dialogue around racism “should be continued” and that “talking about mental health in the young Black community is very important”. They told us that as a direct result of the programme, some young people have moved on to another project because “they really enjoyed the Young Changemakers programme”, which affirmed the value of the programme.



# 4 YOUNG CHANGEMAKERS AS PARTNERS

## THE EXPERIENCES OF CO-PRODUCERS & PEER RESEARCHERS

### CO-PRODUCERS

Young people were recruited to the role of Co-Producer to work alongside the partnership in the design and delivery of the programme. The Co-Producers recruited were a combination of former Changemakers, previous Co-Producers, and young people who had never engaged with the programme, to ensure a broad range of perspectives were contributing to the programme.

Co-Producers were supported by UK Youth in year one of the programme and by The Diana Award in years two and three. Young people were compensated appropriately for their time. Every Co-Producer was paid hourly for their time with us (£11.05 London-based/£10.85 outside of London hourly rate based on 2023 wages). Additionally, for any in-person events, their travel was booked and paid for in advance, and subsistence was provided. This was a key factor to managing the Co-Producers and recognises the value of their time.

Co-Producers took part in several activities, including being members of the steering group and attending meetings, delivering sessions as part of the Youth Development Programme, representing the programme at external events, and supporting the partnership around the selection of accelerator projects. They also acted as a critical friend to the partnership – for example, Co-Producers raised concerns around the language used as part of the programme. Co-Producers suggested that it was not a true reflection of the project to use the term ‘racialised’ when the programme only supports Black and Black mixed-heritage young people. This led to partner-wide changes in our communications, marketing, and internal use of language. However, in relation to information referring to wider groupings of ethnic and racial communities, we have continued to use the term ‘racialised’.

Co-Producers were also able to train or advise youth workers about ways of working and supporting young people from Black and Black mixed-heritage backgrounds, and worked with The Diana Award to create a ‘A guide to co-production’ for professionals considering working with young people in a more dynamic way. Co-Producers used their insight and experiences to complete this resource, touching on topics such as recruitment, style of language, methods of engagement, incentives, and compensation options.

As part of the evaluation, Co-Producers were asked about their role and experiences with the Changemakers programme in a focus group facilitated by a peer researcher, and via feedback forms throughout the cohorts.

Overall, Co-Producers felt that they had seen themselves grow through the programme, with one young person telling us that when they started that had felt nervous and “a bit shy and I wanted to obviously contribute, but I was a bit scared of sharing my own personal experiences”. But because of engaging with this programme and being a Co-Producer for so long, “it’s now second nature”. The feeling is that this programme has helped them grow into themselves. This is also a result of the support received from organisations like The Diana Award, the staff there, and the “encouragement” that they give – “that’s definitely helped me develop personally and professionally”.



Overall, Co-Producers reported positive experiences on the programme during their focus group. Furthermore, when participants were asked to rate their experience out of 10, scores varied from 9.4 to 9.95, giving an average of 9.67/10. Further feedback revealed more about their motivation, what they enjoyed about the programme, and positive changes from the previous cohort.

## **WHAT MADE CO-PRODUCERS WANT TO GET INVOLVED?**

Many Co-Producers joined because they wanted to know more about mental health within racialised communities, and those desires were met through developing their knowledge through training and new ideas about what people want to do “job-wise”. One Co-Producer told us that they wanted a different experience and access to some of the opportunities that being a Co-Producer presented. They were able to experience “different things, meet new people, and basically like network as well, and just build a relationship with The Diana Award and different companies”.

This opportunity was viewed as the “first opportunity I’ve seen where people were like, actively looking for young Black voices to sort of influence something to do with mental health”. For those wanting to take part, this felt like a “unique opportunity” and a space where “I could actually make some form of impact on mental health projects, because it was like the opportunity that I’ve never had before, because at the time, I had just turned 17”. It felt powerful that organisations wanted to listen to “a 17-year-old” because “normally people would be like, ‘Oh, you’re 17? What do you actually know about the world?’”.

## **CO-PRODUCER ENGAGEMENT**

Overall, The Diana Award found that engagement from the Co-Producers was high, and only four young people ended their Co-Producer journey early across all cohorts. Several factors helped maintain high engagement, including regular communication that was concise and less piecemeal. A key piece of feedback from previous Co-Producers and Changemakers within the programme was that emails are often difficult to keep a track of and reply to. Consequently, The Diana Award ensured that they sent the Co-Producers one monthly email, including all the important information they needed around programme updates, internal and external opportunities available and a wellbeing section. Additionally, to make the sign-up process for opportunities more straightforward, all monthly opportunities were communicated via one Typeform (an online form system) within the email, which gave Co-Producers the choice to opt-in or out dependant on preference and availability.

Secondly, maintaining strong rapport between staff and Co-Producers was crucial for the team. The Diana Award aimed to ensure that programme staff were mindful of power dynamics and the influence of hierarchies on young people, making it a priority for Co-Producers to feel valued and respected. Communication with Co-Producers was maintained via monthly one-to-ones, where The Diana Award staff would check in around their wellbeing, how they felt the programme was going and any general updates such as life at university. They were also offered upskilling opportunities related to mental health, for example on racial trauma and mental health first aid training.

## THE IMPACT OF THE PROGRAMME ON CO-PRODUCERS

Co-Producers have said that since joining the programme, they have gained more confidence and expanded their networks. From the focus group, it seems that Co-Producers have enjoyed being part of the programme and demonstrated appreciation for the staff. One Co-Producer shared how she had found the programme particularly beneficial for her development, especially with regards to “how the world of work truly is”. Co-Producers mentioned having a clearer understanding of the world of work and feeling more confident about transitioning from education into employment.



“I saw how much work is put in behind the scenes to make a difference. I saw the professionalism and it gives you understanding [of] how the world of work operates. It’s like a movie, it’s like tv. You guys work together, care about each other and even have lunch together just like the movies. I didn’t know that’s what being a professional is about but now I know and I’m ready.”

Co-Producers also reported feeling more confident in their skillset or knowledge around themes covered during the programme, including strategy and scaling, project management, creative campaigning, and networking. They felt safe in sharing challenges they were facing and feeding back to staff.

It was not only the prospect of work that Co-Producers felt more confident about but also their social, professional and personal development:



“It’s helped me in exposure to new opportunities and environments. I’ve been able to see networks to see what’s going on even in [the] charity sector. It’s also supported me in my career and socially. Learning new avenues, I can go down with my career, mindset, and being proactive. It’s shown me the different roles out there that are being funded and I would have never known outside this programme. I didn’t know much about the charity sector till joining.”

More specifically, feedback included how the programme had taught them how to “structure my day and how to structure my organisation to kind of work for the better”. For others it has made them “more disciplined” and more focused on “my vision”.

Perhaps the most powerful impact of the programme on Co-Producers is the way it has taught them to “not underestimate [their] own experiences” and that as a result of doing this programme, “I’ve seen that there’s a space for me to like, reflect on those and sort of come up with solutions to problems that I’ve faced or that people I know have faced or things that I know are issues for people from similar backgrounds to me”.

Some Co-Producers took an additional role supporting The Diana Award with the development of their Respect programme which seeks to equip pupils and staff with knowledge and skills to identify and respond to racist and sexist bullying in schools.



“Like developing this anti-racist bullying training, I could have sat and been like, well, all these bad things happened to me. What am I going to do? Nothing’s gonna change. But instead, taking it from that positive outlook and like, okay, yeah, these things weren’t great but I can now try and inform educators on all the signs to look out for in schools and educate other young people in schools about what not to do or what to do. So definitely not underestimating the impact in my experience and my voice”

## CASE STUDIES: HOW HAS BEING A CO-PRODUCER MADE AN IMPACT ON YOUR PERSONAL AND PROFESSIONAL LIFE?

### IOLA NKAU

"I think through the opportunities I've had, and the patience that people have had with me, I've definitely been able to sort of grow into myself. My public speaking since coming on to this programme has improved so much. Like even things like this before, I would have been too awkward to be honest. I would have just been like, 'yeah, things are good,' like, 'I enjoyed it,' I wouldn't kind of expand on my point. Not to overthink some stuff like that, that's been really good. And then personally, believing in myself more and acknowledging my own achievements because there's things I've done through this programme, like I said before, some of the things I've done, I'm most proud of in the last couple of years, have been through this programme. Because you can see the impact that they're having and the fact that I've even just shared my experiences, or been able to offer my insight on something, rather than just, like, keeping it in. So, I'm definitely quite proud of that and it's given me a lot more confidence in myself and my ability to do various things."

### AALIYAH MPESI

"Professionally, it's just made me more disciplined. It's just made me focus more on my vision... It's given me the vision, the motivation for the work ethic that I need to actually be able to do what it is that I need to do. So it's just kind of like, giving me a reality check to see that. Yeah, even with my personal life, as well, even my personal life, it's the same thing. Like, it's more of a reality check. Because with the trying to manage being a Co-Producer, and everything else that I have going on, it kind of made me focus down. So, I had to kind of take a mental health break for the past three months. So being a Co-Producer was one of the factors and reasons where I was like, okay, cool I need to kind of narrow down on my vision for my life, not just my organisation as well. So, it's just kind of like the same lesson that I learnt for my business, for being a Co-Producer and also for my personal life."



## PERSONAL DEVELOPMENT OPPORTUNITIES FOR CO-PRODUCERS

The Co-Producers were given the opportunity to develop in four key areas during their time with The Diana Award: strategy and scaling, project management, creative campaigning, and networking. They were asked questions relating to the development of their soft and hard skills during their entry and exit interviews, and asked to score their level of knowledge and confidence out of 10 (where 1 is the lowest level of knowledge and confidence and 10 is the highest).

Networking was one of the areas of development chosen by Co-Producers. The Co-Producers' level of knowledge and confidence in networking improved at the end of the programme compared to the start of the programme (mean score at start: 3.7; end: 6.8). Co-Producers expressed feeling more comfortable and more confident about networking due to the experience gained from the programme. This included speaking at events and having opportunities to meet professionals, with one Co-Producer commenting, "It's a very big shift from before so I'm happy".



"I really loved networking. Yeah, I loved meeting new people. I'm an introvert so that gave me an opportunity to kind of go outside of my comfort zone. Because it was something that I had to do, not something that was a choice, if that makes sense. That's how my brain works... So I think it just kind of pushed me out of my comfort zone. So what I really enjoyed was just meeting different people"

Strategy and scaling were other areas of development chosen by Co-Producers. The Co-Producers' level of knowledge and confidence in strategy and scaling also increased at the end of the programme compared to the start of the programme (mean score at start: 2; end: 7.3). A Co-Producer expressed that she had gained knowledge in this area and needed opportunities to put the knowledge gained into practice. Some of them commented that listening to podcasts on improving strategies, reading books related to the topic, and talking to other Co-Producers about shared goals and visions were all beneficial.

Creative campaigning was another area of development chosen by Co-Producers. There was a slight increase in the level of knowledge and confidence in this area for Co-Producers at the end of the programme compared to the start of the programme (mean score at start: 5; end: 7). A Co-Producer commented that she did not understand creative campaigning at the start of the programme, but with the resources provided, she had gained more knowledge and understanding of the area. Another Co-Producer expressed that she had gained confidence and knowledge of creative campaigning and aimed to find more ways to implement the skills she had gained.

Another area of development chosen by Co-Producers was project management. There was an increase in the level of knowledge and confidence in this area based on the scores (mean score at start: 3.5; end: 6.8). At the end of the programme, a Co-Producer expressed that she felt more confident in her knowledge of the theory of project management and what it took to become a project manager. Another Co-Producer highlighted a slight improvement in confidence and the need to gain more experience in the area.

Other areas of development included managing stakeholders and evaluating one's impact. One Co-Producer expressed that he gained experience in this area by carrying out evaluations and shadowing a member of staff who worked in the same area at Centre for Mental Health. Another Co-Producer said that their level of knowledge and confidence increased in this area by taking part in workshops.

**Table 5: Mean scores for level of knowledge and confidence in areas of development at the start and end of the programme**

Area of development	Level of knowledge and confidence in this area (mean scores)	
	Start	End
Networking	3.7	6.8
Strategy and scaling	2.0	7.3
Creative campaigning	5.0	7.0
Project management	3.5	6.8

Overall, most of the Co-Producers improved their knowledge and understanding of the different areas they chose. Most of them gained experience and improved their skills from the opportunities and resources they were given and hoped to further explore these areas. However, there were some Co-Producers who were not able to fully engage in improving their skills due to work commitments.

## PEER RESEARCHERS

Centre for Mental Health has worked alongside Peer Researchers as part of our evaluation process to capture direct and authentic insight from Changemakers and Co-Producers. In total, we trained 15 Peer Researchers and worked with them during the course of the evaluation. Collectively, they took part in desk research, planning and facilitating focus groups and interviews, and writing participation observation and reflective diaries. This collaboration with Peer Researchers has formed an important part of the work undertaken to date.

In our evaluation, young people highlighted what they had learnt through peer research opportunities, such as an ability to “lead the focus group” and “write a reflective diary”. On leadership skills development, one Changemaker noted that it “helped me to grow more [in]to the type of person that can be a leader, prompt people when they need to do things”.

The Peer Researchers also undertook a comprehensive research study that sought to understand what young Black people in the UK believe is currently working within mental health support and services, what needs to be changed, and how. We cover this in an earlier section of the report, highlighting the findings from their research and the value it delivered. This built on year one when Centre for Mental Health worked alongside four Changemaker Peer Researchers to write *A voice for change*, a briefing exploring some of the issues affecting the mental health of young people from racialised communities and their access to support.

There was also a specific and concerted effort to engage Peer Researchers throughout the design and delivery of focus groups. Their involvement in the evaluation process was key, as they co-designed and co-facilitated focus groups which fed directly into the evaluation and allowed us to capture richer and more authentic insights. Co-designing research and evaluation approaches and tools with Peer Researchers was key to ensure the programme was both culturally relevant and trauma-informed.

The research was also enhanced by reflective diaries. These were diaries captured by the Peer Researchers about the focus groups and Changemakers residential, detailing their experience and their observation of others during the events. These were used throughout the research phase to develop the programme arm-in-arm with Changemakers and Co-Producers.



## CASE STUDY: ELLIOT BUSARI

Elliot joined the programme as a Young Changemaker in the first cohort and attended the residential in January 2022 where he joined Team Engage, a team of young people setting out to produce cultural awareness resources for GPs. Elliot was one of the Peer Researchers working on the briefing *A voice for change* and has represented Young Changemakers at several events. He became a Co-Producer in May 2022 and continues to help shape the programme. His experience highlights how Peer Researchers have coproduced this work and been integral to many of the successes in the programme.

"It has definitely built my confidence and allowed me to develop skills I didn't even know I had. It has reminded me and highlighted to me the importance and value of co-production and youth voice. A lot of organisations try to do it but don't always succeed. The programme has allowed me to build my networks with others who are also passionate [about race and mental health]. It's been good to have a space to share lived experiences. I've also been able to be a part of some amazing opportunities."

The partnership has worked to continue to support Elliot's development alongside his studies and internships. As one of his passions is poetry and spoken word, the partnership has provided him with opportunities to practice writing and performing and develop further. He first spoke at the social action showcase in May 2022, then was featured in The Diana Award's 2022 award ceremony. More recently, he performed a spoken word piece at The Diana Award respect showcase, an event for educators and students to connect over the importance of tackling race-based bullying in schools, and was a part of the Centre for Mental Health's RHS Chelsea Show Garden where he wrote and performed a new piece.

Since starting the programme as a university student, Elliot has graduated from university and completed an internship with the Anna Freud Centre. In 2023, he also undertook an internship in policy and research at Centre for Mental Health. As part of his internship, Elliot supported the collation and analysis of primary research data on young Black people's mental health which has been used to inform this report.



Peer Researchers also spoke highly of the training that they received from the programme, saying that it gave them the space and ability to interact with other young people who were passionate about mental health and racial justice, creating a sense of community. The young people mentioned the benefits of the training programme that was offered, saying that it was encouraging to see "we were given the resources to do [further work in the future]"

Previous cohorts of Peer Researchers also trained and supported successive Peer Researchers, and young people found this valuable as they got to hear first-hand the experiences of those around them.

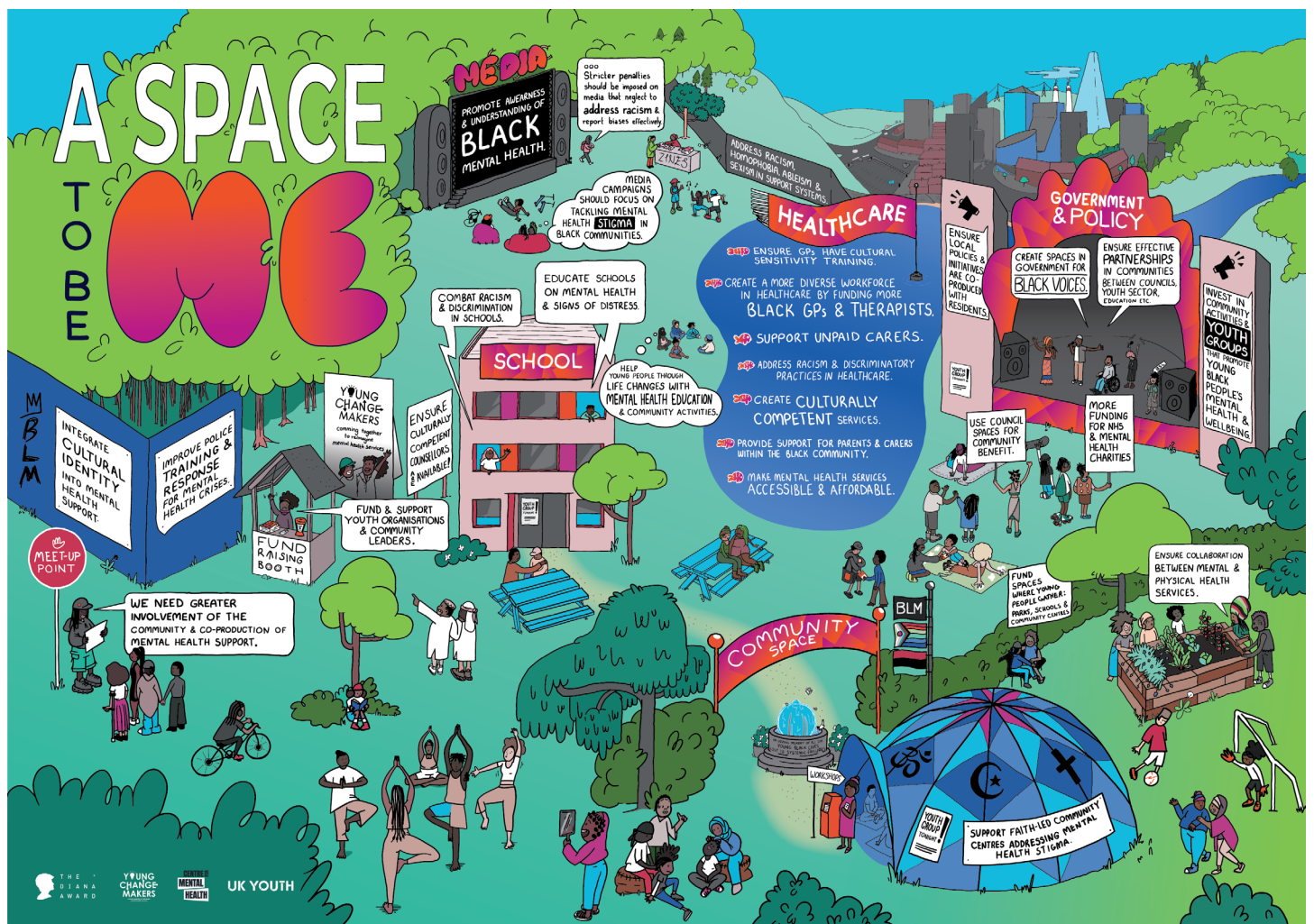
In the final year of the programme, we worked with Peer Researchers to develop a resource to form part of the Young Changemakers toolkit. This brief guide (Obateru *et al.*, 2024) is aimed at organisations and projects seeking to involve young people from Black and racialised backgrounds in mental health research, drawing on learning from the programme.

# 5 REIMAGINING MENTAL HEALTH SUPPORT THE CHANGES YOUNG CHANGEMAKERS WANT TO SEE

A Space to Be Me: A Reimagining of support for young Black people, by young Black people is the result of workshops with young people during the residential, along with a Co-Producer-led survey of over 50 young people conducted in the summer of 2024. These sessions allowed young people to reflect on what effective mental health support for young Black people should look like across various settings, as well as the approaches they would prefer.

As part of the Young Changemakers programme, which aimed to reimagine mental health support for young Black people, this visual highlights the key elements young Black people seek in the mental health system. These include community-based preventative initiatives that consider their cultural backgrounds and identity, as well as culturally sensitive care within specialist mental health services.

## A SPACE TO BE ME: A REIMAGINING OF SUPPORT FOR YOUNG BLACK PEOPLE, BY YOUNG BLACK PEOPLE



# SUMMARY AND RECOMMENDATIONS

In light of the growing mental health challenges facing children and young people in England, particularly those from Black and racialised backgrounds, the Young Changemakers programme has emerged as a crucial initiative aimed at addressing systemic inequities. By empowering young Black people to take the lead in advocating for mental health support and promoting social action, this programme highlights the importance of inclusive approaches that incorporate the voices of those most affected by mental health problems. The insights gained from the programme reinforce the urgent need for culturally sensitive services that resonate with the lived experiences of young people, thereby fostering a more supportive environment for their mental health needs.

The findings from the Young Changemakers programme provide a roadmap for policy makers to create meaningful change in mental health support for young Black people. Recommendations outlined in this report call for a comprehensive cross-government strategy that addresses the specific challenges faced by racialised communities, as well as necessary reforms to the Mental Health Act. By investing in Young Futures Hubs and expanding the youth work provision, the Government can ensure that all young people have access to high-quality mental health services, regardless of their background. Moreover, integrating anti-racism training within the children and young people's mental health workforce and developing campaigns to reduce stigma within Black communities are essential steps toward creating an equitable mental health landscape.

The insights and recommendations put forth in this report emphasise the critical role that young people must play in shaping mental health policy and practice. As the mental health crisis continues to escalate, it is imperative decision makers and commissioners prioritise race equity and foster collaborative efforts that engage Black young people in the coproduction of solutions. By working together to dismantle barriers and promote access to culturally competent care, we can create a more inclusive mental health system that supports the mental health and wellbeing of all young people in England.

## RECOMMENDATIONS

This report's findings point to a series of policy recommendations that must be implemented to improve mental health outcomes for Black young people and their communities:

1. The Government must commit to tackling all forms of racism, discrimination, and exclusion through a comprehensive cross-government strategy. This should include action to address the specific injustices faced by racialised communities within key settings such as the health, education, youth, employment, and criminal justice systems.
2. The Government should reform the Mental Health Act 1983 to address the disparities faced by people from Black and racialised backgrounds. This could be achieved by:
  - Embedding a series of principles on the face of the bill on equity and rights
  - Introducing the use of Advance Choice Documents



- 
- Reviewing the use of Community Treatment Orders
  - Introducing a competency test for children and young people
  - Improving access to culturally competent advocacy and interpretation services.
3. The Government should invest in Young Futures Hubs in every local area to ensure young people have access to high-quality early mental health support. It is crucial that the voices of Black young people are prominently included in the design and implementation of these hubs. These services should prioritise support, safety, and a sense of community, and they should be located in spaces where young people already gather – both offline and online – while building on existing youth work and social prescribing initiatives.
  4. The Department for Digital, Culture, Media and Sport should reaffirm its commitment to investing in youth work, building on schemes such as Youth Investment Fund, the Adventures Away from Home Fund, #iwill Fund and maintaining a youth focus as part of the Dormant Assets Scheme. This investment must also include a serious commitment to workforce development within the youth sector.
  5. The Department for Education should integrate training on racial microaggressions and anti-racism into mandatory teacher training, including both initial education and ongoing professional development.
  6. The Department of Health and Social Care should collaborate with the Department for Education, the Department for Digital, Culture, Media and Sport, and Black-led organisations to create a new campaign focused on addressing mental health stigma within Black communities. This initiative should provide funding for organisations led by and serving Black communities to develop and implement local, targeted programmes that reduce discrimination and improve attitudes toward mental health.
  7. The Department of Health and Social Care should prioritise race equity as a fundamental principle in the upcoming ten-year health plan. It is essential to involve Black people, particularly children and young people, in the coproduction of policy solutions for mental health as part of this plan. This collaborative approach should include specific measures aimed at improving Black young people's access to, experiences within, and outcomes from the mental health system.
  8. The Department of Health and Social Care and NHS England should expand training for Mental Health Support Teams (MHSTs) to increase understanding of the mental health experience of children and young people from Black and racialised backgrounds and to improve their outcomes in education.
  9. The Department of Health and Social Care and NHS England should collaborate with racialised communities to create racially equitable mental health advice, information, and support as part of the full implementation and resourcing of the Patient and Carer Race Equality Framework (PCREF). As part of this, NHS England and professional bodies must ensure that the mental health workforce, including MHSTs, reflects the communities it serves while actively promoting values of anti-racism, diversity and inclusion. This should include efforts to encourage young Black people to join the mental health workforce. Additionally, cultural competency and anti-racism training should be mandatory for all practitioners.
  10. NHS England should provide dedicated funding to integrated care boards to enhance the integration of youth services into their comprehensive mental health support for children and young people.



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