

**Y Pwyllgor Plant, Pobl Ifanc
ac Addysg**

**Children, Young People
and Education Committee**

Russell George MS
Chair of the Health and Social Care Committee

28 February 2023

Medication for mental health concerns

Dear Russell,

As you may know, we are currently carrying out an inquiry into services for care experienced children. Our inquiry has been driven by the voices of children and young people. We are determined that their views and experiences will shape our final report and its recommendations.

During the autumn we carried out informal engagement visits throughout Wales to talk to birth parents (parents who have had/are in the process of having a child removed from their care) about their experiences and views of the care system. On 26 January we held a stakeholder event with birth parents to complement our engagement visits to give as many young parents the opportunity to feed into our work as possible. The vast majority of these young parents had experience of being in care themselves with many telling us they had experienced significant trauma in childhood.

Many of the things that the young people told us were deeply distressing and concerning. I would like to raise one of their concerns with you specifically: some birth parents described to us how they are scared to talk to their GP about the negative side-effects of medication prescribed to improve their mental health. They fear that raising concerns about side-effects could be interpreted by social workers as a reluctance to take steps to improve their mental health, which could, in turn, contribute to negative judgements made by social workers or others about their capacity to provide adequate and appropriate care to their baby or child.

Example 1: One birth parent told us that she struggles with poor mental health and anxiety. Her doctor prescribed her anti-depressants. However, she has stopped taking the anti-depressants because they made her feel worse and behave erratically. When we asked her whether she had spoken to her GP about her concerns, she told us that GPs tend to increase the prescribed dosage of

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anti-depressants if patients experience side effects like hers. She worries that the side effects may get worse with a higher dosage, and that, if so, it would make it harder for her to look after her child.

Example 2: One birth parent told us that her anxiety and depression means that she struggles to sleep. Her GP prescribed her sleeping tablets. However, she has stopped taking the tablets because they are so strong that they made her struggle to wake up in the morning. She felt that the tablets made her miss important appointments and meetings, and even struggle to wake with her child.

In both of these cases the young women stopped taking their prescribed medication due to the impact of the side-effects on their capacity to care for their children. They have not told their GPs about the side effects for fear that the GP will either increase the dosage or prescribe other, stronger medication. Neither have they told their GPs that they have stopped taking the medication. Even though they felt that the medication made them *less* able to care for their children, they were deeply concerned that social services may have access to their medical records and take a negative view if they refused a prescription for medication intended to improve their mental health.

We will be publishing summary findings of both our engagement work and our stakeholder events shortly, which will set out these concerns in more detail.

However, due to the inquiry timetable, we will not be able to give this critically important issue the time and attention it deserves.

I therefore hope that you find this information useful and that you are able to consider it as part of any work you undertake relating to medication for mental health problems. If you have any questions about our work please contact our clerks directly, who would be happy to provide additional briefing material on our findings to date.

Yours sincerely,



Jayne Bryant MS

Chair

Croesewir gohebiaeth yn Gymraeg neu Saesneg.

We welcome correspondence in Welsh or English.