



Amended code won't save children

Terence Cosgrave writes that Ireland must not allow children to become victims of its institutional system and that the only way to solve problems in the mental health service is to establish an independent Directorate

When the Ryan report was released earlier this year, there was shock and horror among the general Irish public. The abuse, sadism and deviancy evident in the report were caused, in part, by an attitude towards children that regarded them as less worthy of the respect normally accorded to any human being.

The children who were sent to the industrial schools in years past were also deemed to be less worthy than other children, because they had no money or no family members to look after them. That was their 'crime'.

And this is perhaps the worst aspect of the whole report – the idea that it was the most vulnerable that were preyed upon. The very people who should have used their Christianity to help children, instead hurt them.

But people of a certain age will know that this was a prevalent attitude in Ireland at the time. Corporal punishment was routine in every school and institution and it is pointless to pretend that it was not. And although a lot of people had suspicions about instances of sexual abuse being carried out, in Ireland's sexually repressed society, people did not want to talk about sex very much.

So all of it was brushed under the carpet, a few 'Hall Mary's' were said and everyone moved on.

The point of all this is that children suffered due to an attitude that is best summed up in the phrase, 'children are meant to be seen and not heard'.

Most people would believe that we have moved on enormously from that time and that children today are treated in a much better manner.

But there are a group of children in Ireland today who are largely unseen and whose voices are not being heard. They have the potential to be victims of the Irish institutional system in a similar way to their unfortunate historical counterparts.

These are the children and adolescents who are admitted to adult mental health institutions – a total of 260 young people in the last year alone (out of a total of 406) were admitted to facilities within the mental health services.

The Inspector of Mental Health Services, **Dr Patrick Devitt**, has described the practice as 'inexcusable, counter-therapeutic and almost purely custodial, in that clinical supervision is provided by teams unqualified in child and adolescent psychiatry'.

In a recent article in *The Irish Times*, Dr Devitt called for a Mental Health Directorate to run mental health services in Ireland. He criticised the plethora of reports calling for change and stated that change would not happen without a Directorate being established.

This Directorate should have an executive role with control of its own budget, he said – as opposed to the advisory role proposed by *A Vision for Change*.

And while all of this is true, there would still be no guarantee that we would see real, effective change if a Directorate were established. There are many ways to stymie such an organisation, and many ways to prevent it from being effective.

But if change would be difficult for a Directorate of Mental Health Services, change is almost certain not to happen in its absence. Dr Devitt wrote in his piece, "We need clarity, focus and commitment to change and we need it now."

So, given that, it is with conflicting emotions that we welcome the change to the Mental Health Commission's Code of Practice.

The amended Code of Practice relating to the admission of children will supposedly result in the phasing out of admission of children to adult inpatient facilities.

Since July 1, under the Code, no child under 16 is to be admitted to such centres. From December 1, 2010 this will

apply to those under 17 and from December 2011, to those under 18.

But in the absence of adequate mental health facilities for children, this code will not be worth anything.

Under the Mental Health Act 2001, best practice requires persons working in the mental health services to comply with codes of practice.

The Act does not impose a legal duty to comply with Mental Health Commission Codes, but a failure to implement or follow a code can be referred to during legal proceedings.

The amendment to the Code allows that if in exceptional circumstances, the admission of a child to an adult unit in an approved centre occurs in contravention to the new Code of Practice, then the approved centre is obliged to submit a detailed report to the Mental Health Commission within 72 hours explaining why the admission has taken place, and what are the plans to place the child in an age-appropriate approved centre.

Will many of these reports simply say, 'No other facility available'?

That said, this small change may help, and certainly it is a positive step. But it is not nearly enough to solve this particular problem – nor indeed the wider problems of mental health services in Ireland.

For that, an independent Executive Directorate is required.

The HSE deals with 20 crises a day. It cannot delegate the time, effort or specialised knowledge and dedication required to solve all the problems in mental health.

A separate Directorate is the only way to address this problem, and for children in Ireland with mental health difficulties, it is already way overdue.

Otherwise, our future is also our past.

'The children sent to the industrial schools were also deemed to be less worthy than other children, as they had no money or no family to look after them'