



Consultation response

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## **Pre-budget scrutiny 2026-27, with a focus on mental health spending**

August 2025



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## Children in Scotland

August 2025

### Background

Giving all children in Scotland an equal chance to flourish is at the heart of everything we do.

By bringing together a network of people working with and for children, alongside children and young people themselves, we offer a broad, balanced, and independent voice. We create solutions, provide support, and develop positive chances across all areas affecting children in Scotland.

We do this by listening, gathering evidence, and applying and sharing our learning, while always working to uphold children's rights.

Our range of knowledge and expertise means we can provide trusted support on issues as diverse as the people we work with and the varied lives of children and families in Scotland.

Mental health is a key topic for Children in Scotland, for the children and young people we work with and for our members. We are actively involved in supporting the delivery of mental health policy, including through our role on the Joint Strategic Board for Child and Family Mental Health.

We also deliver a range of participation and engagement work in this area. We host the Suicide Prevention Youth Advisory Group, which exists to support the delivery of Creating Hope Together, Scotland's suicide prevention strategy and action plan.<sup>1</sup> We are a delivery partner in the evaluation of DBI for under-18s alongside ScotCen and the University of Stirling. We are also currently working in partnership with NHS Education for Scotland on the development of a series of animations for their work on 'Essential CAMHS'. Additionally, mental health consistently comes up as topic that is important to other groups that we work with.

Research has previously shown that 50% of all mental health issues have started by the age of 14.<sup>2</sup> Audit Scotland's 2018 report showed significant challenges in the delivery of mental health services, which made it hard for children and families to get the help that they require.<sup>3</sup> Our work with children and young people reflects this evidence and we consistently hear about the ongoing challenges faced by children and young people in this area, both in terms of their own mental health and in the support available for this.

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<sup>1</sup> [Suicide Prevention Youth Advisory Group, Webpage](#)

<sup>2</sup> Kessler RC, Berglund P, Demler O, et al. Lifetime prevalence and age-of-onset distributions of DSM-IV disorders in the National Comorbidity Survey Replication. Arch Gen Psychiat. 2005;62:593–602

<sup>3</sup> Audit Scotland (2021) [Blog: Child and Adolescent Mental Health Services](#)

It is important to reflect from the start of this response that under Article 24 of the UNCRC, all children have a right to the best possible standard of health. The budget process for spending around mental health is, of course, vital for realising this right as it ensures the adequacy and availability of services to support children and young people.<sup>4</sup> It can also help ensure that funding is directed towards effective interventions and to the support of improved mental health.

## **Current mental health spending**

In 2023-24, spending on mental health services in Scotland totalled £1.5 billion, equivalent to 9% of total NHS expenditure.

### **1. Is the level of spending on mental health services appropriate?**

Children in Scotland recognises that a significant amount of Scotland's public finances are already spent on mental health services and we also recognise the significant strain on the public finances more broadly.

However, it is important to recognise that the evidence continues to reflect that there are significant challenges in the delivery of mental health services for children and young people and in the outcomes relating to their mental health. Public Health Scotland data shows many of these challenges and has highlighted that in recent years there has been a decline in children getting sufficient sleep and an increase in problematic social media use.<sup>5</sup> A Scottish Parliament research briefing published in 2022 highlighted the negative trends in children and young people's mental health, including in general wellbeing, as measured through the WEMWBS scale.<sup>6</sup> The significant level of demand on CAMHS can also be seen as a reflection of these challenges.<sup>7</sup>

There is evidence that investment and resource is beginning to make a difference (for example, recent data shows a slight increase in children on CAMHS waiting list being seen in the 18-week period).<sup>8</sup> However, as we highlighted in our response to 2022 consultation on the Scottish Government's Mental Health Strategy, we believe that 18 weeks is too long a waiting time for children and young people to receive specialist support.<sup>9</sup>

We also know there has been investment in the roll out of interventions such as DBI for under 18s and school counsellors. Children in Scotland has been involved in the evaluation of DBI for under-18s and is aware that the findings of this evaluation will be available in coming months. The findings from this evaluation should help identify

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<sup>4</sup> [UN Convention on the Rights of the Child \(1989\)](#)

<sup>5</sup> [Scottish Public Health Observatory Profiles, Mental Health and Wellbeing](#)

<sup>6</sup> [Scottish Parliament \(2022\) Research Briefing: Children and Young People's Mental Health](#)

<sup>7</sup> [Public Health Scotland \(2025\) Child and Adolescent Mental Health Services CAMHS Waiting Times Quarter Ending](#)

<sup>8</sup> [Public Health Scotland \(2025\) Child and Adolescent Mental Health Services CAMHS Waiting Times Quarter Ending](#)

<sup>9</sup> [Children in Scotland \(2022\) Mental Health and Wellbeing Strategy Consultation Response](#)

how to ensure investment in mental health services is having the most positive impact on outcomes.

However, despite this investment, Children in Scotland continues to believe that there needs to be increased investment in children and young people's mental health to improve outcomes and services delivery – in particular in relation to children and young people. This needs to include sustained investment in specialist services to increase capacity and with the intention of reducing the 18-week waiting time for CAMHS. However, as we will detail further below, it also must include increased investment in early intervention and prevention services.

#### *Early intervention and prevention*

In line with our [2021-26 Manifesto](#), we also believe there needs to be further investment in 'mental health prevention and early intervention for children and young people to stop problems deteriorating to the extent they require specialist CAMHS services. This must include:

- Targeted support for groups at risk of poorer mental health
- Wider, year-round access to mental health-improving universal opportunities such as sport, youth work, play and the arts
- Perinatal mental health/family support
- Counselling, peer support and other talking therapies.<sup>10</sup>

We encourage the committee to consider spending on these early intervention approaches.

Children in Scotland also believes there needs to be a continued commitment to investing further upstream to truly prevent mental health issues. The social determinants of mental health approach is now well understood, with a recognition that the inequalities experienced in mental health are a product of inequalities in society.<sup>11 12</sup> Evidence from the Poverty Alliance, which has been referenced, consistently recognises the impact of poverty on mental health and suicidality.<sup>13</sup>

The importance of moving investment upstream has long been understood in Scottish public policy, including through the recommendations of the Christie Commission.<sup>14</sup> Audit Scotland has reiterated the positive impact of investment in early intervention and prevention on children and young people's mental health in their recent work.<sup>15</sup> Children in Scotland agrees with this assessment and we believe that shifting investment upstream will support better value for money and also improve outcomes for children and young people.

In considering the impact of these upstream approaches, we would also encourage the Committee to explore spending beyond just the mental health budget to

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<sup>10</sup> [Children in Scotland 2021 -26 Manifesto](#)

<sup>11</sup> [World Health Organisation \(2014\) Social Determinants of Mental Health](#)

<sup>12</sup> [Kirkbride JB, Anglin DM, Colman I, Dykxhoorn J, Jones PB, Patalay P, Pitman A, Sonesson E, Steare T, Wright T, Griffiths SL \(2024\) The social determinants of mental health and disorder: evidence, prevention and recommendations.](#)

<sup>13</sup> [Poverty Alliance \(2022\). Tackling poverty for good mental health](#)

<sup>14</sup> [Commission on the Future of Public Services \(2011\)](#)

<sup>15</sup> [Audit Scotland \(2018\) Children and Young People's Mental Health](#)

understand the wider contribution that Scottish Government spending makes to mental health and wellbeing.

#### *Third sector delivery of mental health services*

Many of our members and wider network provide a range of essential mental health services which children, young people and their families rely on. Through our work as a membership organisation, we are deeply aware of the significant pressure on many of these organisations and their services due to the extremely challenging funding climate. We have been pleased to see commitment by Scottish Government to the Fairer Funding pilot. However, the SCVO Third Sector tracker continues to show the extremely challenging climate that the third sector is operating in, with the most recent wave of data showing the ongoing issues relating to rising costs and funding uncertainty which put services at risk.<sup>16</sup> Without more sustainable approaches to funding for the third sector, there is a significant risk of closure for essential services, including those which support mental health and wellbeing. The impact of this would clearly be felt in the mental health of children, young people and families who access these services. It is vital that the committee takes this wider third sector funding climate into account in this inquiry into funding for mental health services.

### **2. What information can help support assessment and evaluation of the allocation of the mental health budget?**

N/A

### **Preventative spend on mental health**

The Committee is interested in preventative spend. Public Health Scotland has set out a classification of preventative activities, describing activities as primary, secondary and tertiary prevention.

### **3. Do you consider there to be evidence of preventative spending activities in relation to mental health (and if so, can you provide examples)?**

Yes, Children in Scotland believes that there is a wide range of examples of preventative spending in relation to mental health. We believe it is vitally important to take a broad view of what encompasses prevention in relation to children and young people's mental health. This includes universal approaches which support positive mental health and wellbeing among all children and young people and also includes more targeted interventions to support groups at greater risk of poor mental health.

We are also aware that it can often be harder to evidence the impact of these more preventative approaches. However, there is a wide range of evidence about the impact of preventative interventions in mental health. This has included recent work by the Mental Health Foundation which has highlighted the cost at UK level of

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<sup>16</sup> [SCVO \(2025\) Third Sector Tracker](#)

mental health conditions and highlighted a range of preventative measures which could be seen as more cost-effective.<sup>17</sup>

In our work as a membership organisation, we are aware of a range of preventative interventions which contribute to improved mental health and wellbeing.

Children in Scotland members the Rock Trust's Upstream project is one such example of early intervention approach which has a positive impact on mental health. Upstream aims to tackle youth homelessness and protect children and young people from the trauma this can contribute to by providing a broad range of person-centred support, including emotional support. The recent evaluation by Heriot-Watt University has shown the positive impact of the project so far. Importantly, it also highlighted that those at risk of youth homelessness have lower levels of resilience and wellbeing. Approaches like Upstream aim to provide support to prevent these issues from developing further and provide evidence for the impact of such approaches.<sup>18</sup>

Through our participation work, we are keenly aware of the importance of youth work in this area, with children and young people telling us how the support they receive from youth workers often provides essential, early support with their mental health. We know that evidence from YouthLink Scotland has also highlighted the role of youth workers in supporting the mental health of children and young people.<sup>19</sup>

In our 2022 response to the consultation on the Scottish Government's mental health strategy we also highlighted a family support service delivered by Homestart Stirling, which was working with families at higher risk of poor mental health and delivering relationship-based, whole family support that focused on building confidence in parents and carers while providing opportunities for their children. People accessing these services highlighted improved confidence and wellbeing.<sup>20</sup>

This is one example of whole family support services that contribute to the preventative mental health agenda. We are clear that these are an essential part of supporting mental health of children, young people and their families. We would strongly encourage the committee to consider the role of whole family support within this enquiry, including the contribution of the Whole Family Wellbeing Fund. It is worth noting that Children in Scotland recently contributed to the First Minister's summit on family support. Following this summit, we shared a series of priorities to support improvement in its delivery. These were:

- Investment in person centred community support
- Outcome-based funding (through grant making and procurement/commissioning)
- Supporting collaboration

[More detail on these priorities can be found in a blog published on our website here.](#)

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<sup>17</sup> [Mental Health Found \(2022\) Investing in Prevention](#)

<sup>18</sup> [Rock Trust, Upstream Scotland, Evaluation](#)

<sup>19</sup> [YouthLink Scotland, The role of Youth Work in Mental Health](#)

<sup>20</sup> [Children in Scotland \(2022\) Mental Health and Wellbeing Strategy Consultation Response](#)

### *Joined up policy making*

We also believe that there needs to be consideration of how there can be more effective joined up working between departments in Scottish Government. This was highlighted by Scottish Government as a priority within the 2022 Mental Health Strategy. In our response to the consultation on the Strategy, we highlighted concerns from our members around the lack of connection across government, which can pose challenges to coherent delivery of policy relating to mental health and wellbeing.

*“The lack of joined-up thinking between government departments for health, education and early learning and care (ELC) is a constant barrier to progress in prevention of mental health problems/promotion of wellbeing”.*

(Children in Scotland Member)<sup>21</sup>

We know there are efforts to tackle this through the Suicide Prevention Strategy and Action Plan and that some progress is being made in this area. However, we believe that to make this a reality, further progress is needed across the wider mental health landscape, particularly in relation to children and young people.

It is worth highlighting that in its work on preventative spending, the Mental Health Foundation has highlighted the importance of these joined up approaches to government to support greater understanding of preventative spending and its impact in mental health.<sup>22</sup>

## **Priorities for mental health spending**

The Scottish Government has set out its priorities for mental health services in its Mental Health and Wellbeing Strategy. This strategy identifies the following priorities for investment:

- Child and Adolescent Mental Health Services (CAMHS) and psychological therapies
- Addressing waiting times backlogs
- An extension of support for distress
- Ongoing implementation of the Scottish Government's Suicide Prevention Strategy
- Delivering improved community-based mental health and wellbeing support for children, young people and adults

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<sup>21</sup> [Children in Scotland \(2022\) Mental Health and Wellbeing Strategy Consultation Response](#)

<sup>22</sup> [Mental Health Found \(2022\) Investing in Prevention](#)



#### **4. Do you consider these to be the right priorities for mental health investment?**

We believe these are important priorities for mental health services. However, as we highlighted in our response to the 2022 Mental Health Strategy consultation, there needs to be greater priority needed to be given to specialist services for groups of young people at higher risk.<sup>23</sup> This includes services for children and young people who are neurodivergent, identify as LGBTQI+, or from refugee and asylum-seeking backgrounds. There also needs to be a greater focus on ensuring availability of services in rural areas of the country.

It is also worth reiterating here that we know there continue to be challenges in delivery of the priorities outlined at the scale and capacity required. We have highlighted concerns with the delivery of CAMHS throughout this response. We have also highlighted the third sector funding climate which we know affects the delivery of community-based, preventative services.

Children in Scotland was particularly pleased to see the inclusion of community-based services within the priorities for the Scottish Government's mental health strategy, we know these community services are a vital part of the mental health landscape and often provide key preventative services. The Children and Young People's Community Mental Health and Wellbeing Fund has been a key element of funding these services over recent years, and, in practice, this fund has often been used to support third sector community-based services.

However, through our work with the Supporting the Third Sector project we are aware that there have been changes to the delivery of the fund, with Scottish Government providing discretion to local authorities to use this for funding core mental health services, with funding redirected from the community services it had previously supported. This suggests a deprioritisation of these vital community services, all of which will affect the support available to children, young people and families. It is important to highlight here that we recognise the significant pressure on frontline services and we believe this highlights the inadequacy of the current funding available to cover the range of priorities for mental health spending.

It is also important to highlight here that prioritising these services does not simply mean funding them to deliver their services as normal. We are aware from across our participation and engagement work, as well as wider evidence from children and young people, that they have poor experiences accessing more specialist mental health services. There needs to be a significant cultural shift within these services to meet the needs of children and young people. This includes the need to continue to develop more relationship-based, person centred approaches to delivery. We regularly hear about the importance of professionals taking the time to get to know children and young people as they provide care and support. To ensure these services meet the needs of children and young people and contribute to improved outcomes, they must shift towards these approaches.

#### **5. To what extent are these priorities reflected in mental health service delivery?**

We have answered this in response to the previous question.

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<sup>23</sup> [Children in Scotland \(2022\) Mental Health and Wellbeing Strategy Consultation Response](#)



## **Decisions on mental health spending**

### **6. How could transparency in relation to decisions around mental health spending in Scotland be improved?**

We believe that a commitment to more outcomes-focused budgeting would support this as, at present, it can be hard to assess how spending across Scottish Government contributes to (and is intended to contribute to) improved mental health for children and young people. We would strongly advocate for Scottish Government outlining the overall spend on mental health and the intended outcomes of this investment.

**For more information please contact Chris Ross, Policy and Participation Manager, Children in Scotland, [cross@childreninscotland.org.uk](mailto:cross@childreninscotland.org.uk)**