

Mental Health Awareness

Children, Adolescents & Families



Introduction

1.) Introduction - 3 Questions

2.) Housekeeping

3.) Charter Agreement

4.) What we will / won't cover

Today's Aims

Mental Health Awareness

- Definition & Stigma
- Child Development
- Common Risks & Protective Factors
- Stress, Anxiety & Depression
- Communication
- Wellbeing & Resilience
- Signposting & Support

What we won't cover

Your Legal Position

Safeguarding Laws and Policies

Legal Advice

Who are we?



- Mind is the leading mental health charity for England and Wales.
- We provide advice and support to empower anyone experiencing a mental health problem.
- We campaign to improve services, raise awareness and promote understanding.
- We believe no-one should have to face a mental health problem alone.



Understanding
mental health problems



understanding



mental health
problems

**Mental health
What do we mean?**

Group Activity: Mental Health Trends Quiz!

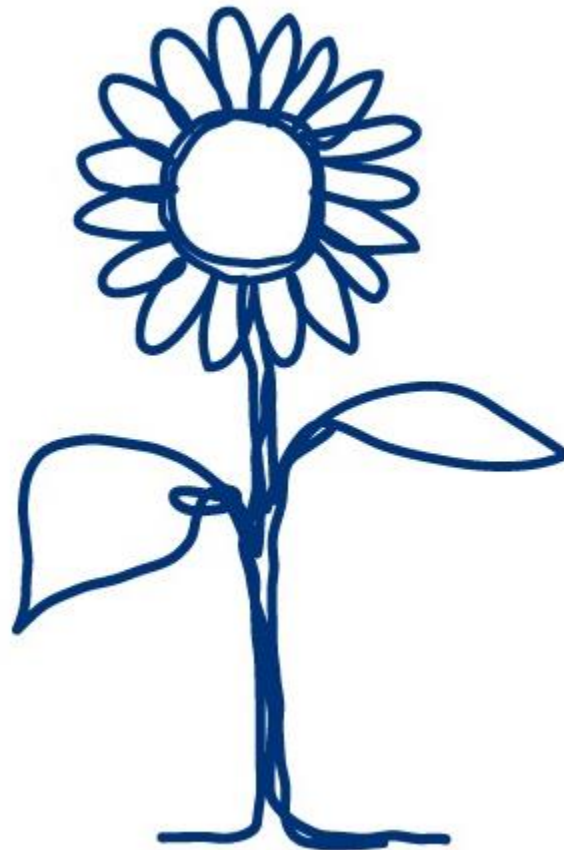
1. How many people experience mental health issues in any given year?
2. How many children (aged 5 – 16) currently have a mental health problem?
3. Are NHS CCG budgets increasing or decreasing in the area of child mental health services?
4. What is the largest category of NHS 'disease' expenditure in the UK?
a) Mental Disorders b) Problems of Circulation c) Cancers & Tumours

What's the problem?

- Three children in every classroom have a diagnosable mental health condition
- One in 12 deliberately harm themselves (25,000 hospitalised each year)
- UK ranked 19th out of 20 countries for poorest wellbeing in young people

- 580,000 receive social care or assistance with mental health problems
- 75% of mental health problems in adults have their roots in childhood
- 70% have not had appropriate intervention at an early age

Mental Health: What do we mean?



Mental Health: What do we mean?

...mental health is described as more than the absence of mental disorders or disabilities.

“Mental health is a state of well-being in which:

an individual realizes his or her own abilities,
can cope with the normal stresses of life,
can work productively and fruitfully
is able to make a contribution to his or her community.”

In this positive sense, mental health is the foundation for individual well-being and the effective functioning of a community.

Mental Health: Specifically for Children & Adolescents

Mental Health affects all aspects of a **child's development** including their cognitive abilities, their social skills as well their emotional wellbeing. Building emotional resilience is key and we believe there are core attributes seen in mentally healthy children and young people:

- The capacity to enter into and sustain mutually satisfying personal relationships
- A continuing progression of psychological development
- An ability to play and to learn appropriately for their age and intellectual level
- A developing moral sense of right and wrong
- The capacity to cope with a degree of psychological distress
- A clear sense of identity and self worth

Mental health problems

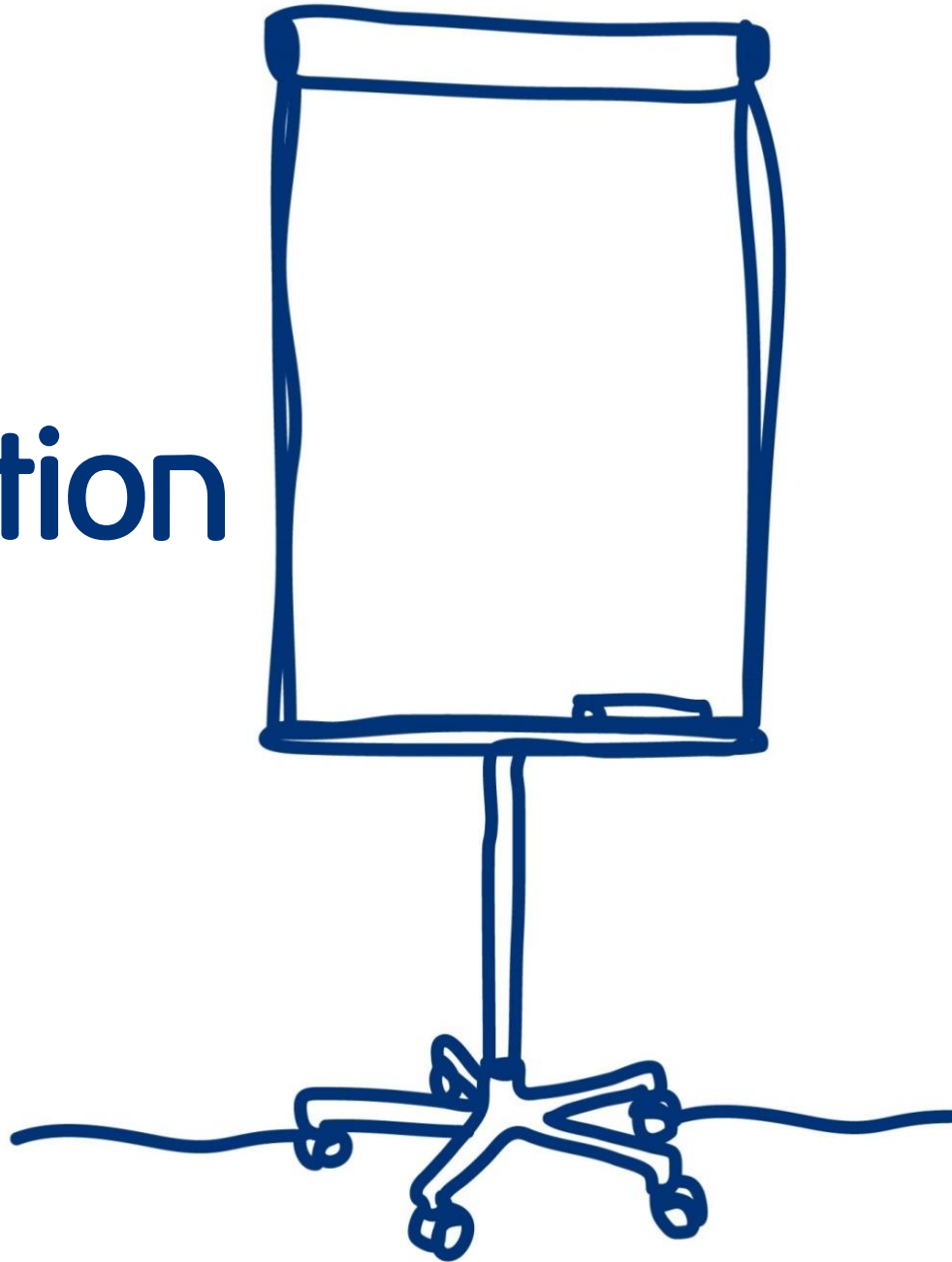
- Mental health problems can affect any of us irrespective of age, personality or background
- They include a wide range of experiences and can affect the way people think, feel or behave
- They can appear as a result of experiences in both our personal, working or school lives – or they can come about without any easily identifiable cause
- Some problems may be mild or moderate while others may take on a more severe form, affecting a person's ability to cope with day-to-day living

**Someone you know has
a mental health problem.**

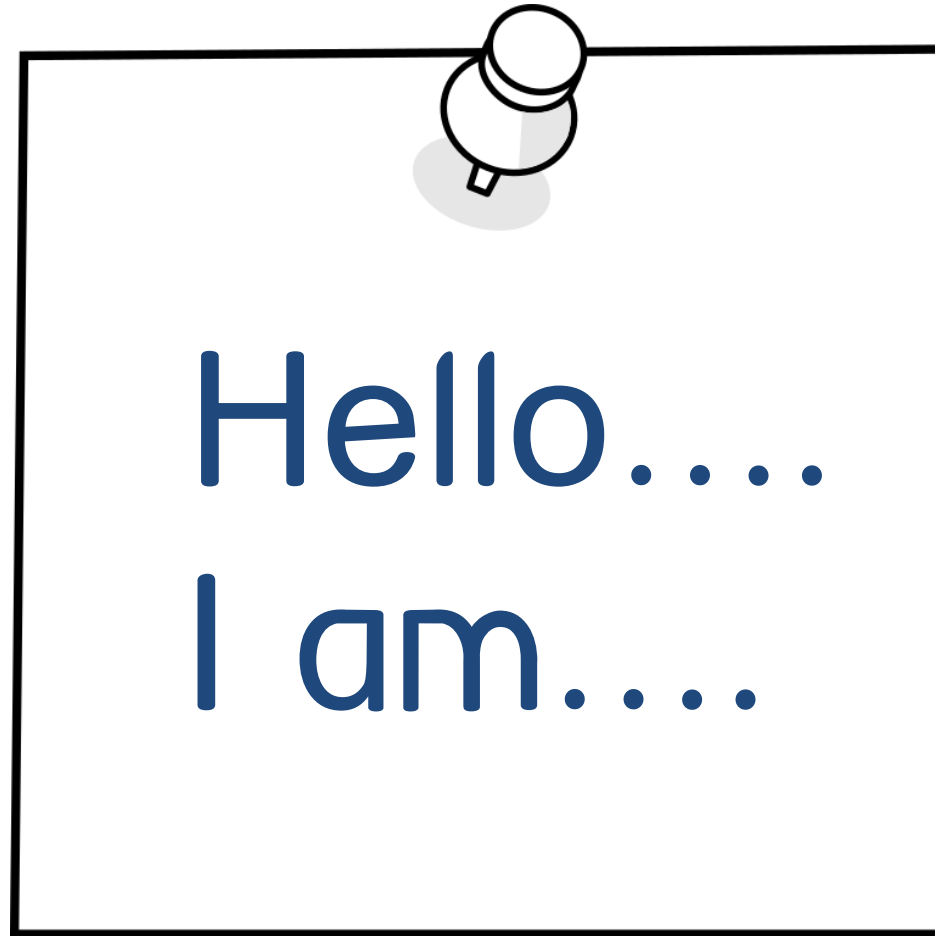
**They just don't know
how to tell you.**

**Stigma in today's
world....**

Word Association Game!



What makes you proud?



Stig•ma (n)

The perception that a certain attribute makes a person unacceptably different from others, leading to prejudice and discrimination against them.

<https://www.youtube.com/watch?v=irADsjrhIjl>

https://www.youtube.com/watch?v=SE5Ip60_HJk



Impact of Stigma

- 9-out-of-10 adults who experience mental health problems say they face stigma and discrimination
- Most say stigma is worse than the symptoms themselves
- 26% of young people have said that the stigma attached to their mental illness has made them want to give up on life
- Research shows that much of stigma that young people face, come from those they need the most in times of need including friends (70%), parents (57%) and siblings (35%)
- 1-in-5 workers have called in sick for stress BUT 90% have lied to their boss about the real reason for absence
- A major cause of stigma and prejudice is people don't talk about it

Stigma Cycle

“What can you do?”



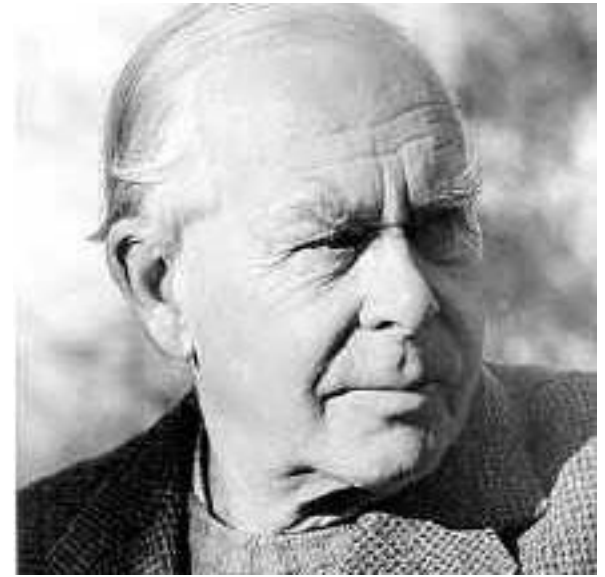
Child Development & Attachment Theory



Attachment

John Bowlby – Psychiatrist
1907 – 1990

“Attachment Theory”



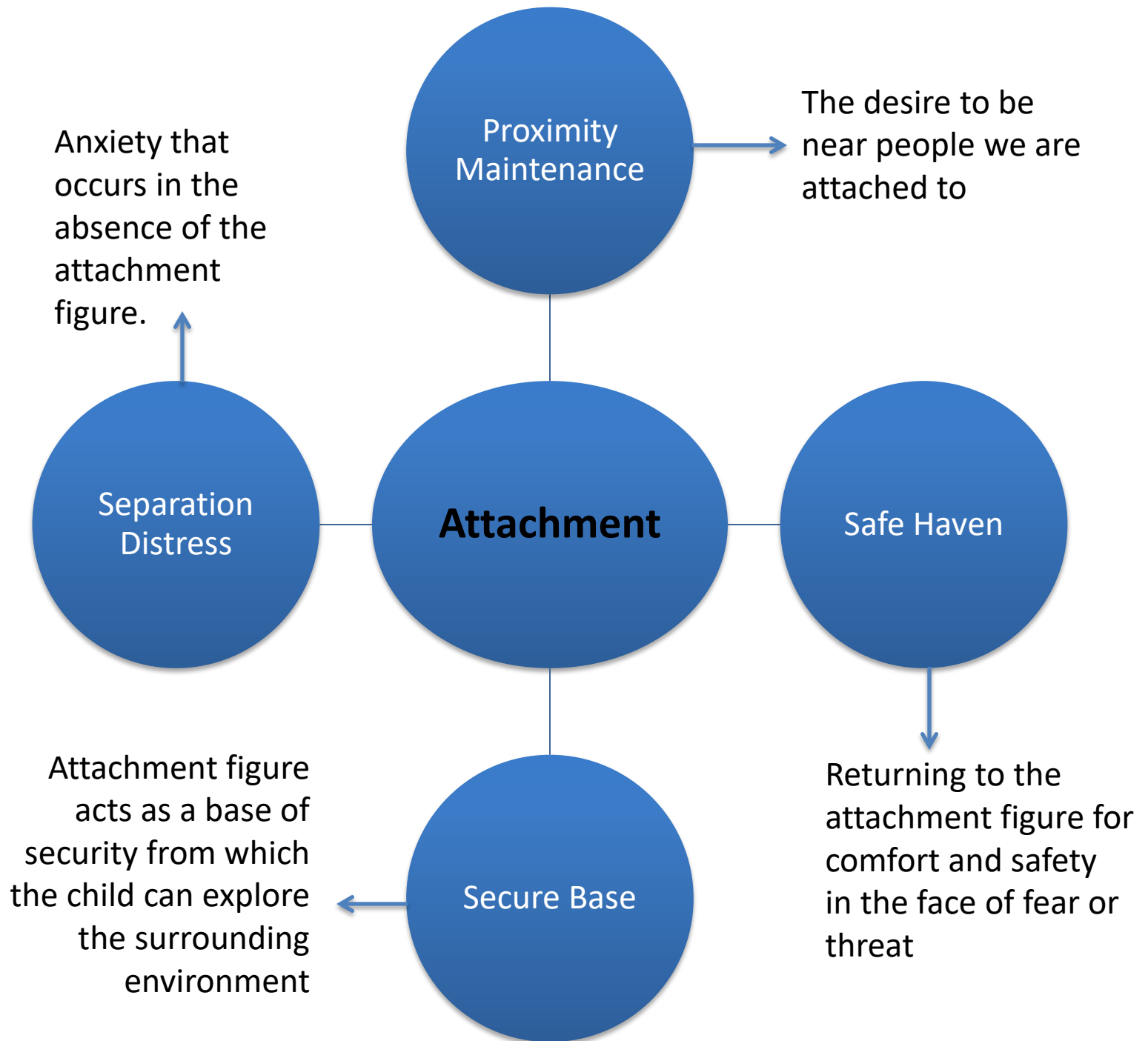
Relationship patterns in early childhood

=

Development and behaviour in later life

“The propensity to make strong emotional bonds to particular individuals is a basic component of human nature”

Characteristics



The positive arousal relaxation cycle

(Fahlberg, 1991)

Child is satisfied

Child has a need

Make decisions

'I am important'
'You can trust others'
'The world is safe'

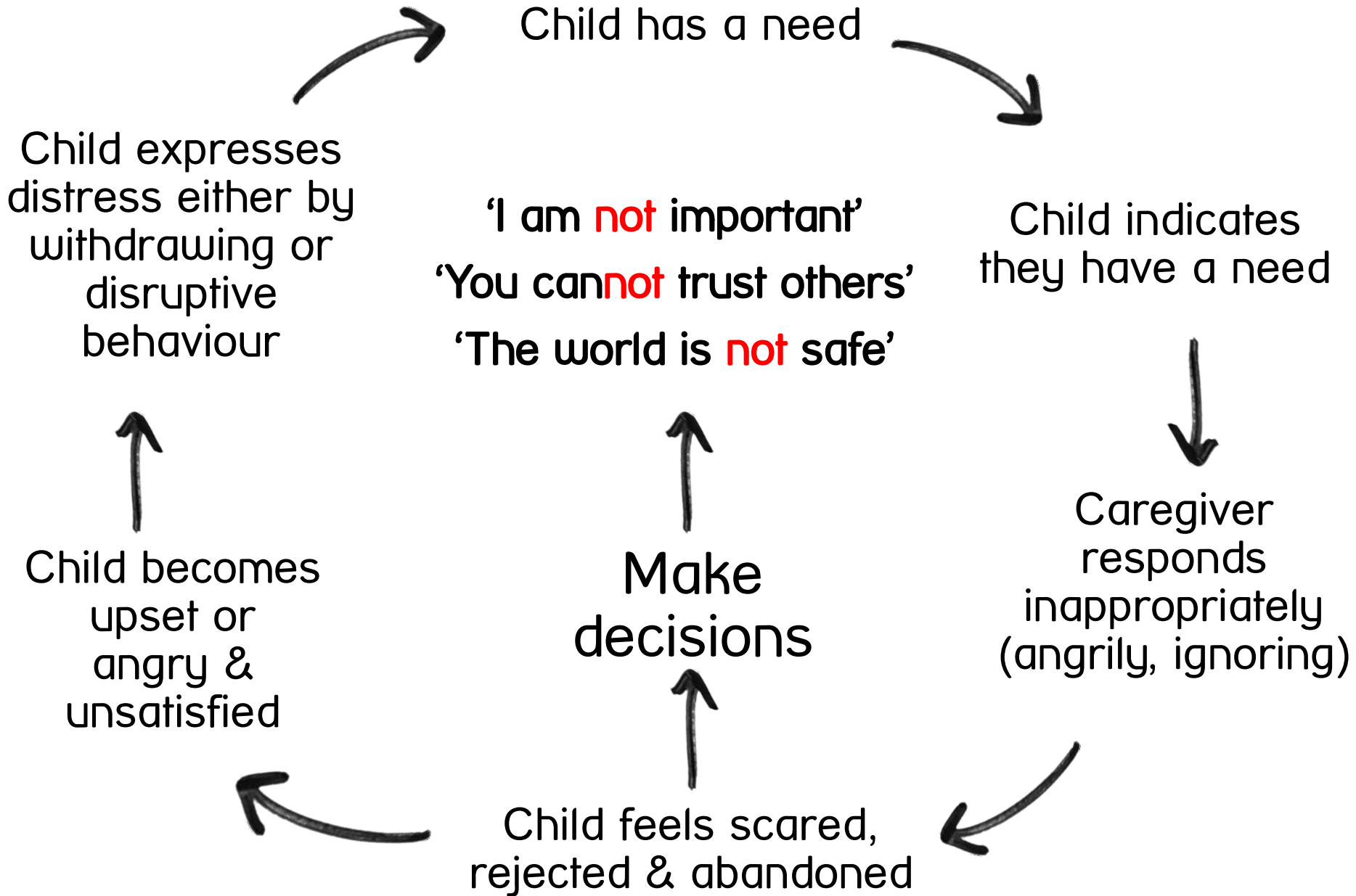
Child indicates they have a need

Caregiver responds



The negative arousal cycle

(Lancashire 2002)



Exercise – Attachment Styles....



Ambivalent

Reluctant to become close to others

Worry that their partners do not love them

Become preoccupied with thoughts when relationships end

Secure

Able to use past as firm relationships

Seek to move forward when frightened

Comfortable sharing feelings with friends and strangers with positive emotion

Seeks out social support
Prefers parents to strangers

Attachment Styles

Disorganized

Affraid of risks & avoidant
Inconsistent behaviors of love

May see a blurred line of empathy
apprehensive

Disregard rules – high risk of drug & alcohol use
May take on a parental role (6+)

Not and care give into a parent (6+)

Avoidant

May avoid problems with intimacy

Does not seek out social or comfort with parents

Show little willingness to share thoughts or feelings with strangers

Strokes

A stroke is defined as a unit of recognition. (Berne 1971)

“A stroke is a unit of attention which provides stimulation to an individual”. (Woollams and Brown: Transactional Analysis 1978)

- Stimulus Hunger – As babies, we need physical and mental stimulation
- Recognition Hunger - As grownups, we learn to substitute other forms of recognition in place of physical touching.

The Stroke Filter

- only let in strokes which they think they are allowed to let in

- based on script



Image source: flickr

Your Stoke Profile McKenna. (1974)

	How often do you give +strokes to others?	How often do you accept +strokes?	How often do you ask others for the +strokes you want	How often do you refuse to give the +strokes they expect from you?
Almost Always				
Usually				
Frequently				
Often				
Seldom				
Almost Never				
	Giving	Taking	Asking For	Refusing to Give
Almost Never				
Seldom				
Often				
Frequently				
Usually				
Almost Always				
	How often do you give -strokes to others?	How often do you take -strokes?	How often do you ask others indirectly or directly for the -strokes that you want?	How often do you refuse to give -strokes

Still face Experiment.mp4



<https://www.youtube.com/watch?v=apzXGEbZht0>

An Experiment by Joseph Campos The Visual Cliff.mp4

NHS
Ealing
Clinical Commissioning Group

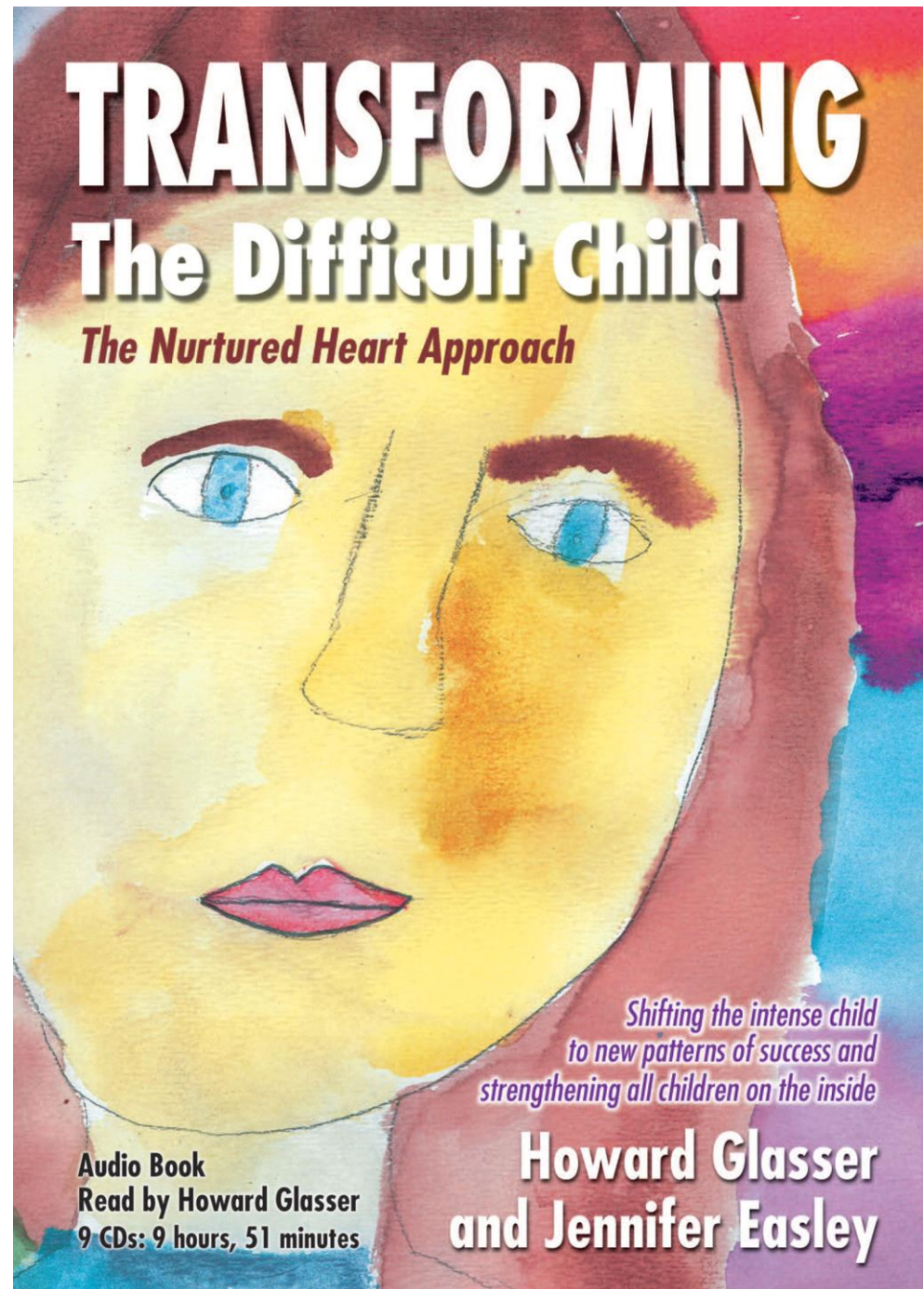


<https://www.youtube.com/watch?v=p6cqNhHrMJA>

 **mind** | Hammersmith
for better mental health and Fulham

“The nurtured heart approach”

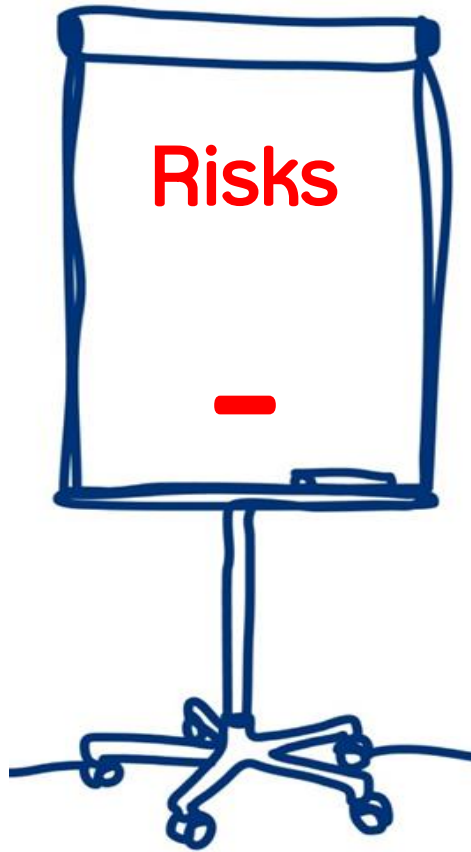
1. Neutralise negative behaviour
2. Energise positive behaviour in positive ways
3. Demonstrate fair and consistent boundaries



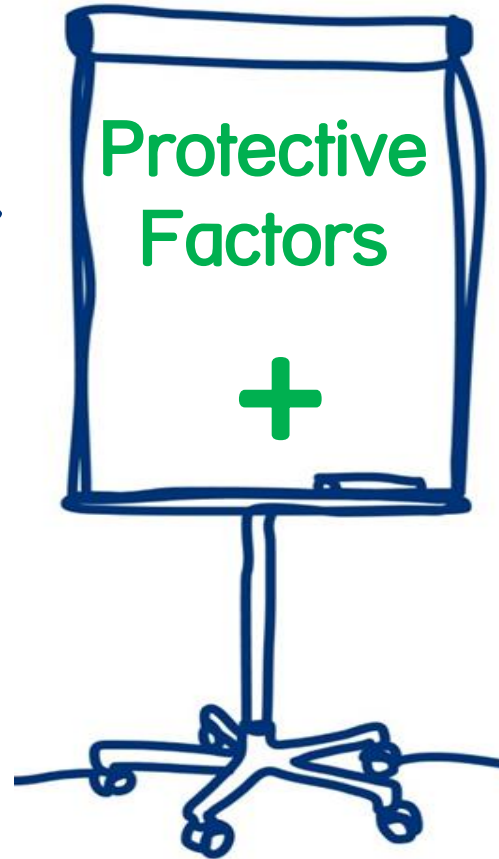
Signs & impacts in children & young people



What
are
the...



&



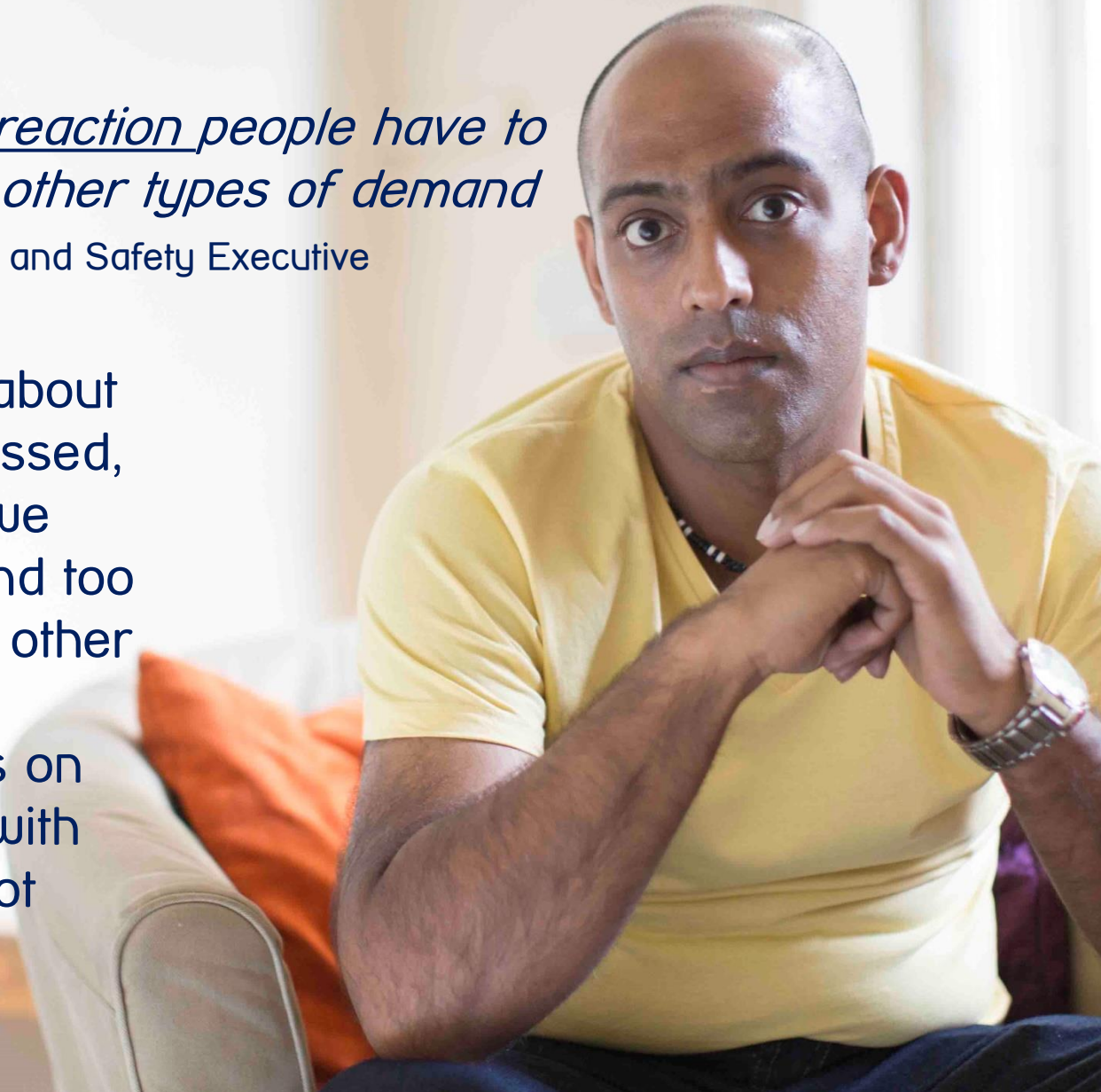
...contributing
to the poor
mental health
of youth



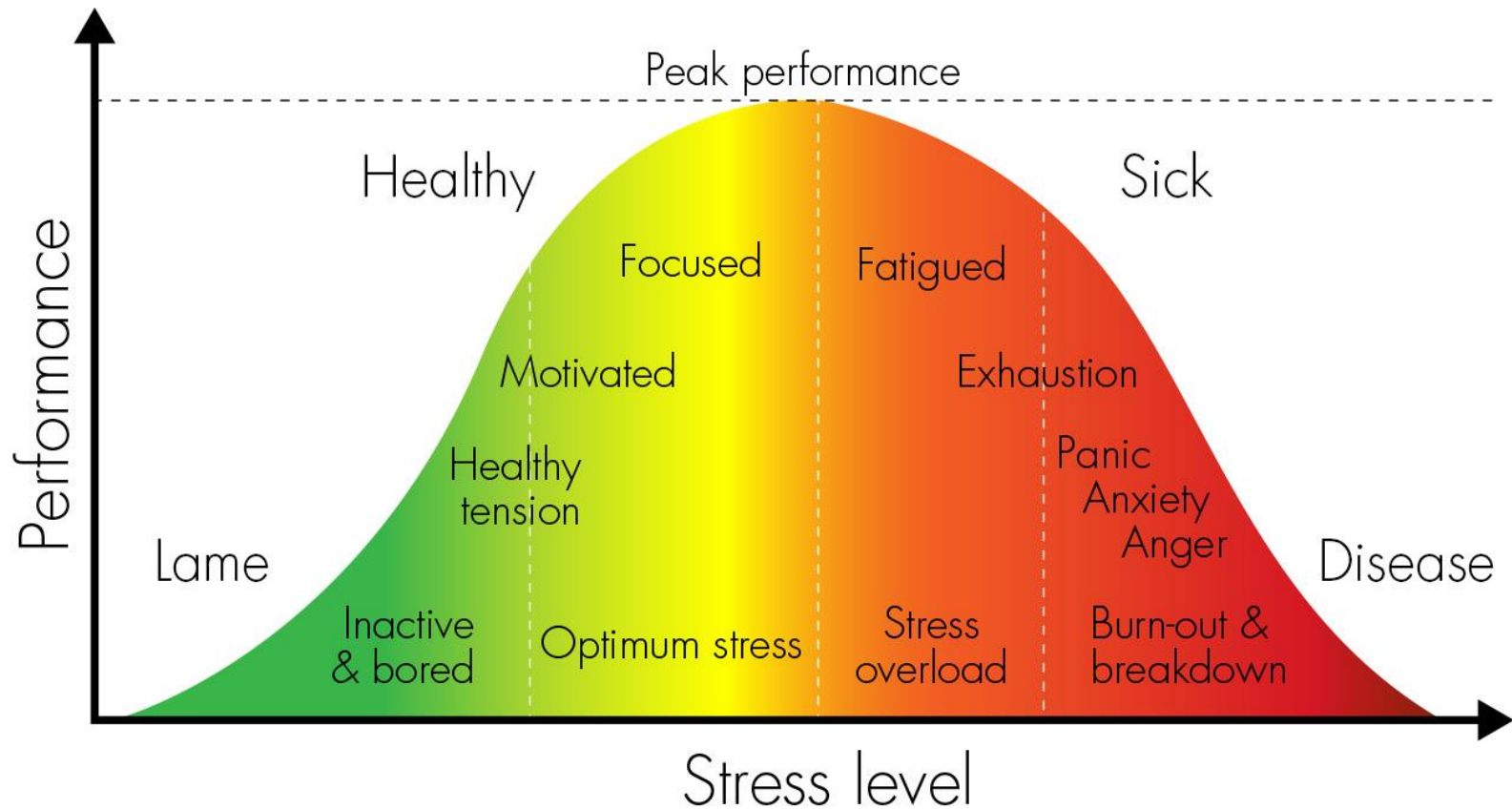
What is stress?

'Stress is the adverse reaction people have to excessive pressure or other types of demand placed on them' - Health and Safety Executive

We all sometimes talk about stress, and feeling stressed, usually when we feel we have too much to do and too much on our minds, or other people are making unreasonable demands on us, or we are dealing with situations that we do not have control over.

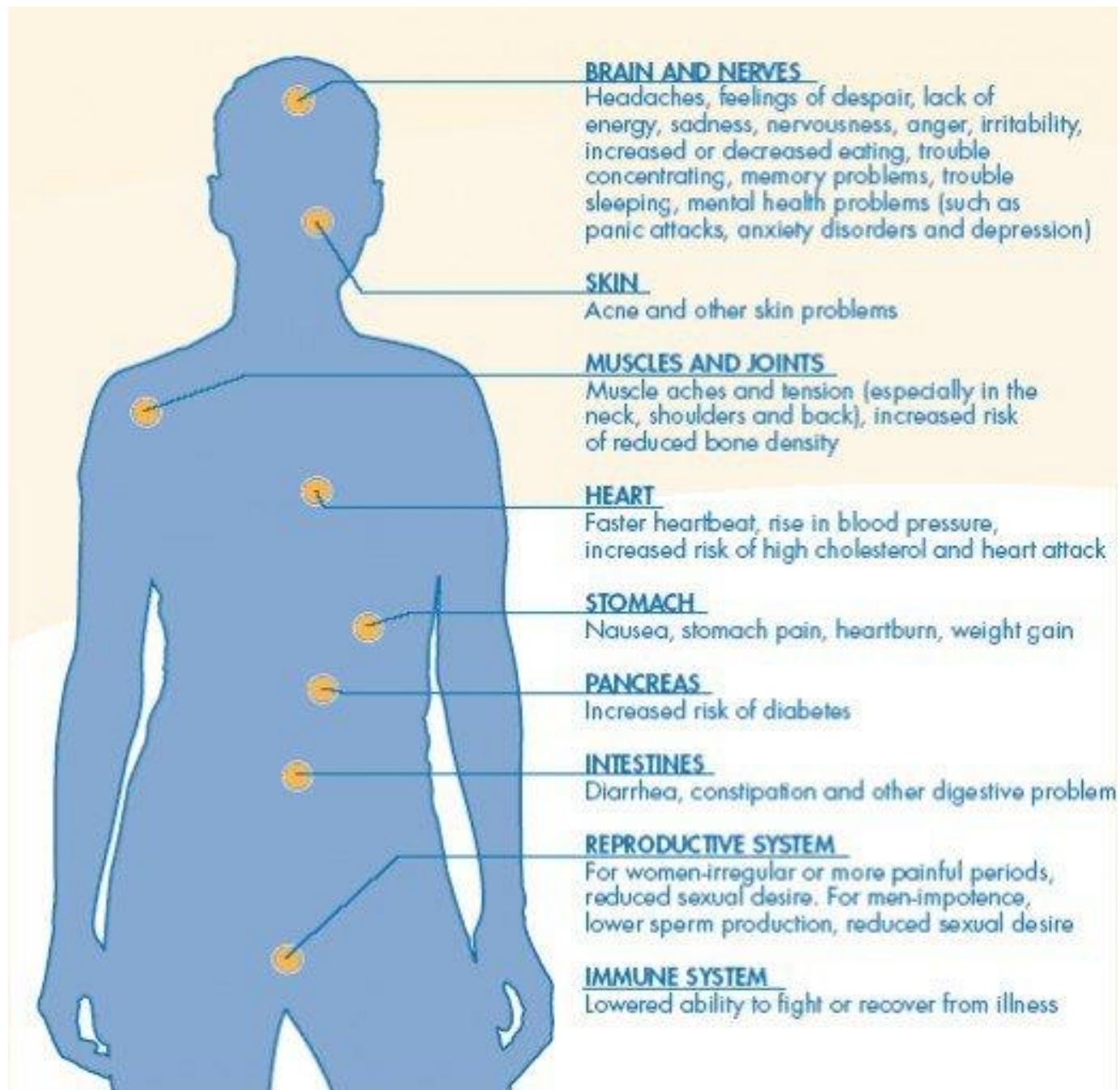


Pressure vs Stress

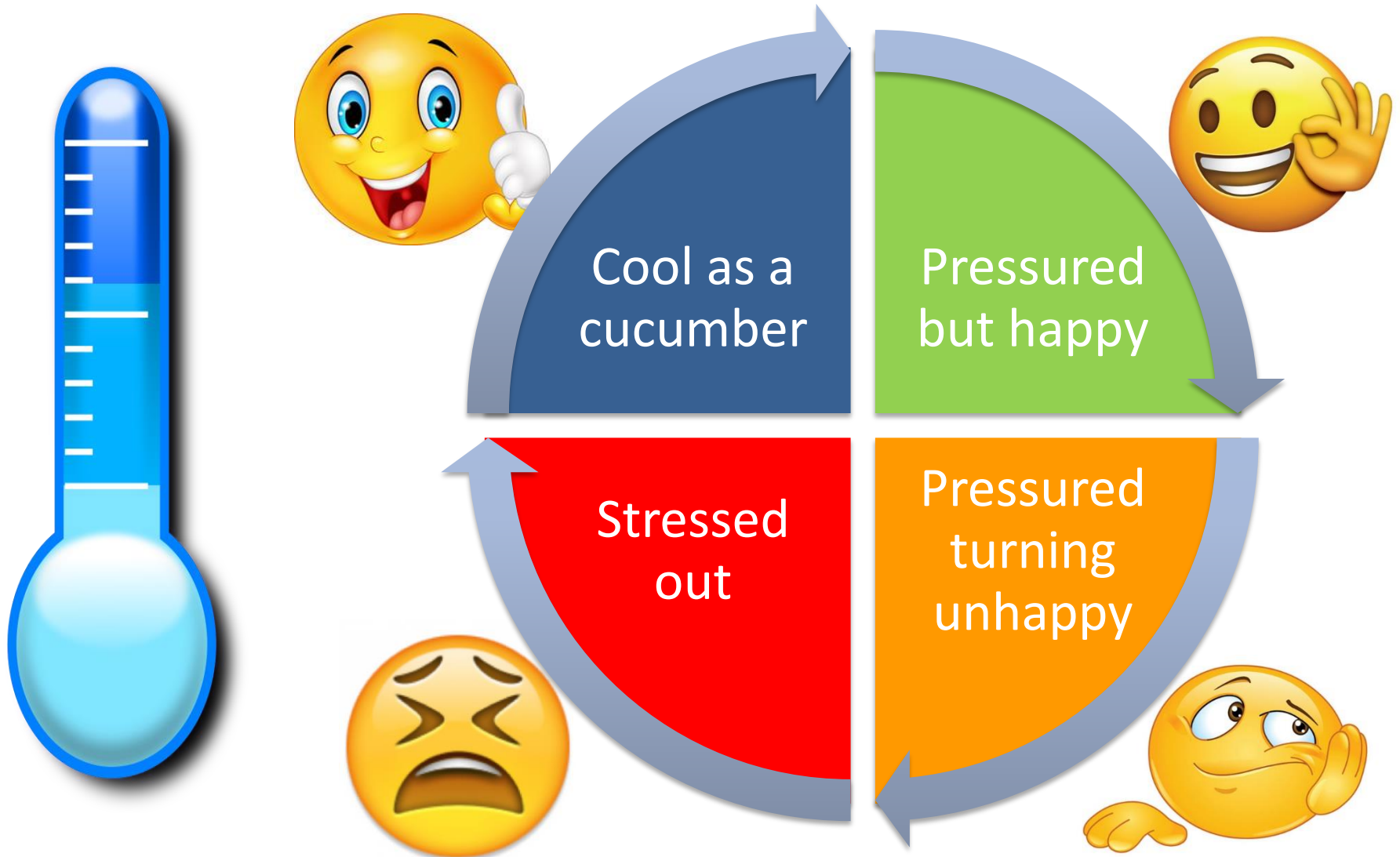


Physical signs of stress

- 'fight, flight, freeze' stress response
- physiological response to a perceived threat
- stress hormone cortisol



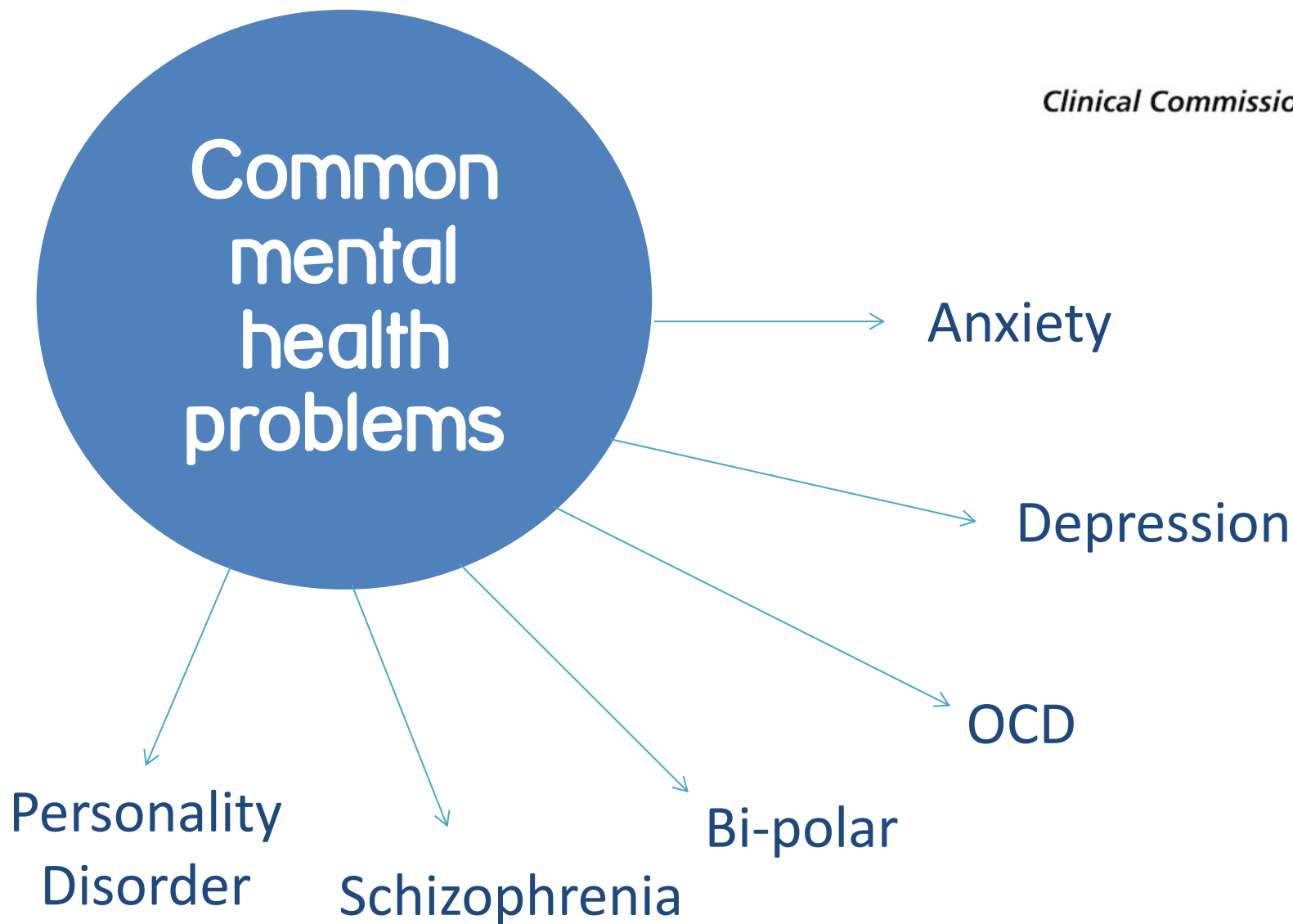
Where on the stress curve are the young people you work with?

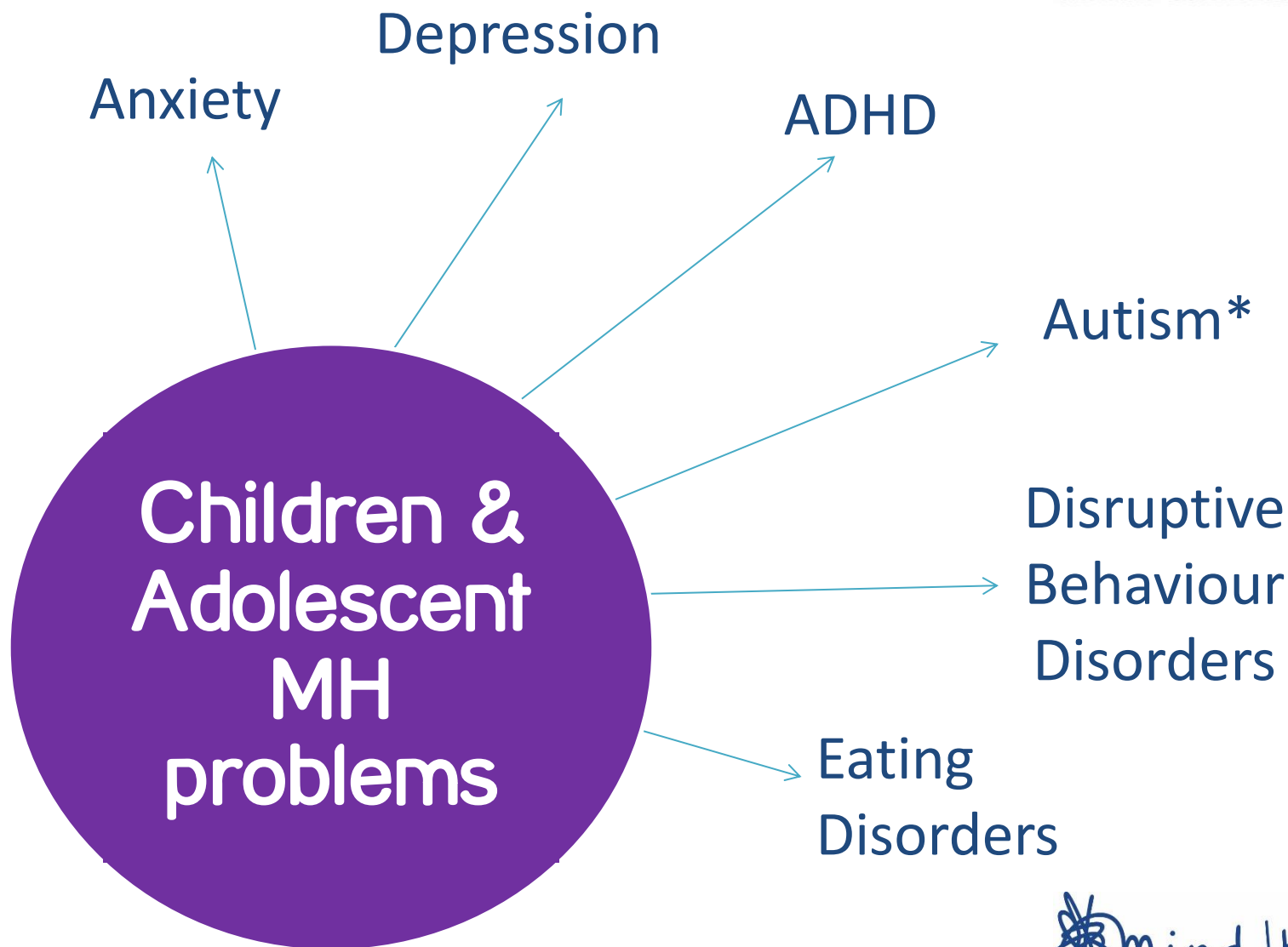


Managing Stress Video



<https://www.youtube.com/watch?v=hnpQrMqDoqE>





Reflective Question?

When was the first time in your life you remember feeling anxious....

- What happened?
- Where did you feel it in your body?
 - What else did you feel?
 - What did you want to do?

What is anxiety?

Anxiety is something we all experience from time to time.

However, if anxiety becomes overwhelming and constant and affects the quality of our everyday lives that is when it becomes a problem.



Physical effects of anxiety

Anxiety can have an effect on both your body and your mind:

- increased muscular tension
- rapid breathing
- rising blood pressure
- changes in the blood supply to your digestive system
- you may feel an urgent need to visit the toilet, and get 'butterflies' in your stomach

How might someone
act if they were experiencing
anxiety?

Psychological effects of anxiety

These differ person to person but can often include:

- feeling fearful, alert, on edge, irritable, and tense
- thoughts of bad things happening to family, health, accidents
- needing the reassurance of others
- feeling tearful
- negative thinking
- feeling pessimistic
- developing negative coping strategies
- or holding on to negative relationships

What helps with Anxiety

- Educate the child or young person on the signs
- Open conversations (we cover later)
- Reassure them
- Encourage them to stay connected with friends and not to withdraw
- Practice quieting the mind through mindfulness
- See if the school has a counsellor
- Suggest a GP visit
- Check local support services

Understanding
anxiety and panic attacks

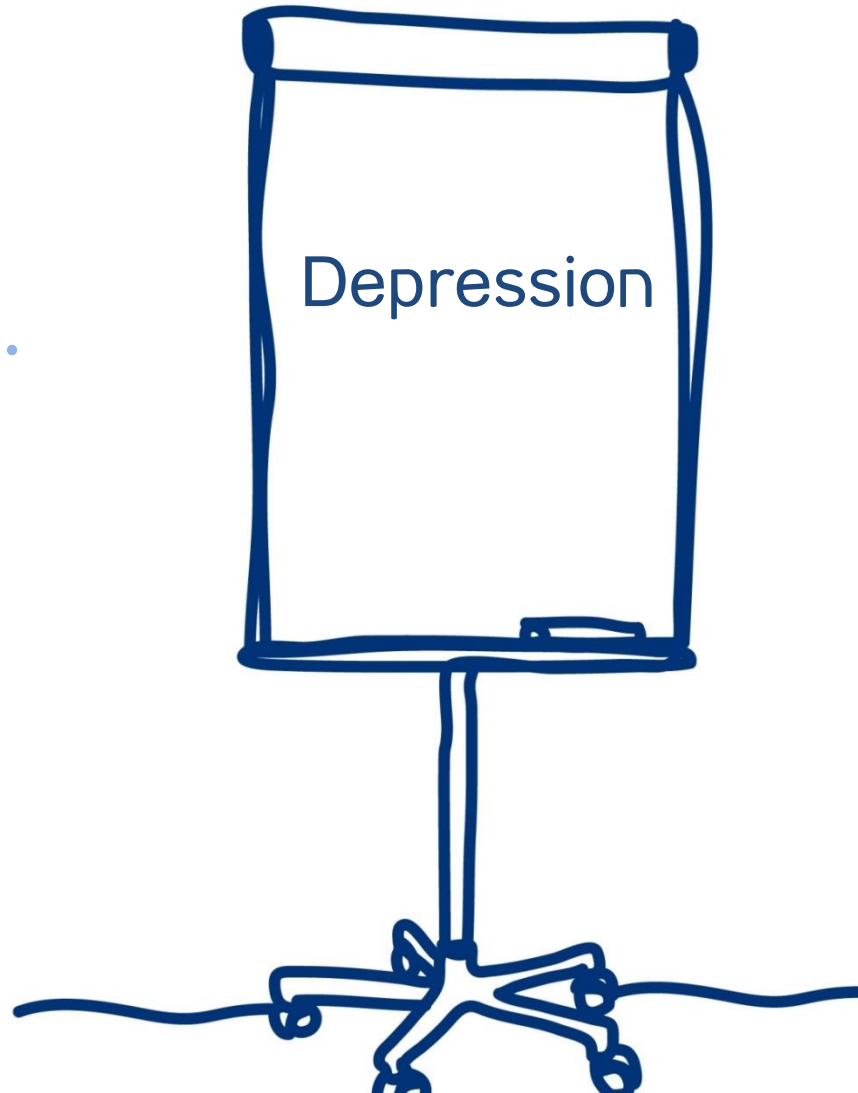


understanding



Group activity

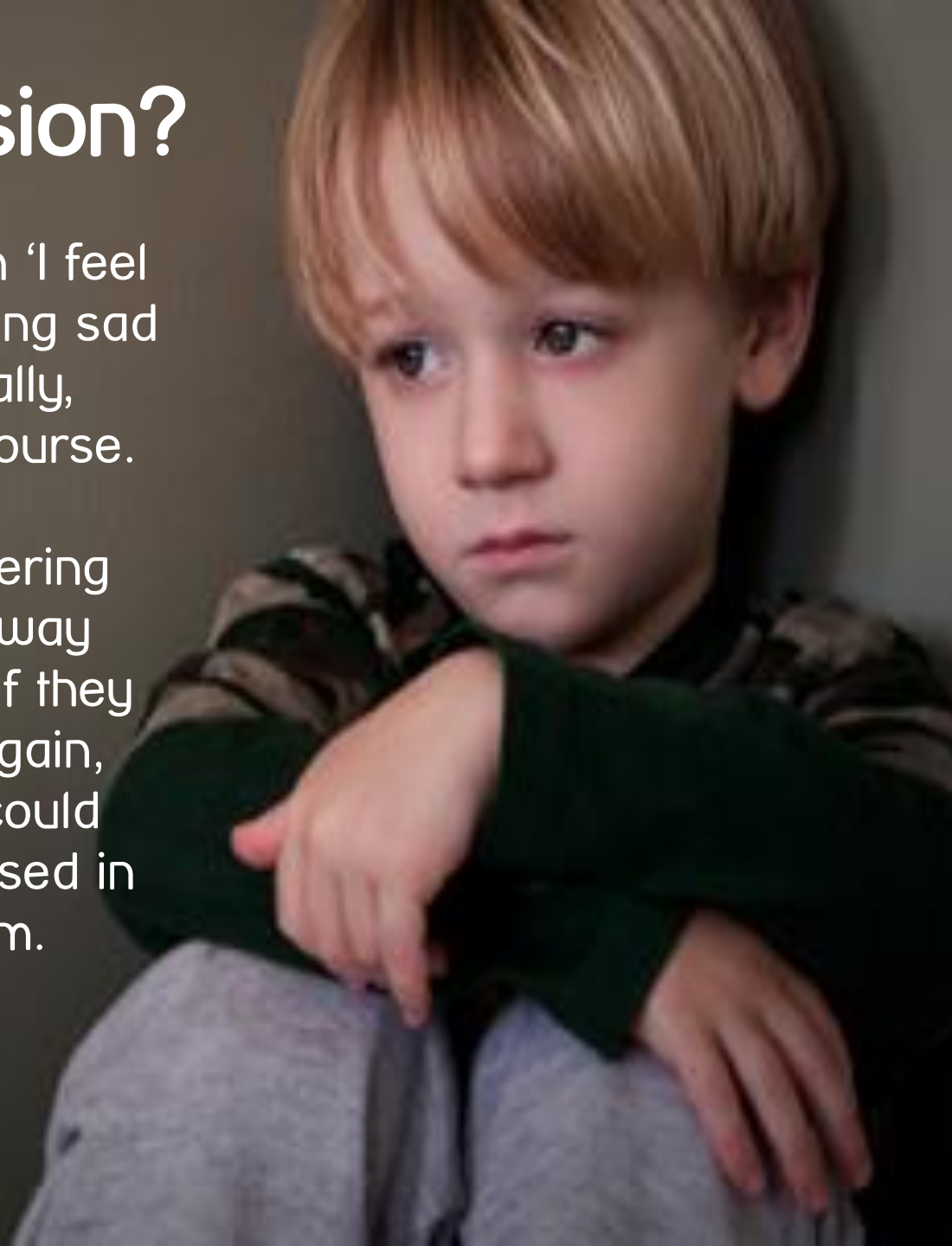
What are the
signs &
symptoms of...



What is depression?

We often use the expression 'I feel depressed' when we're feeling sad or miserable about life. Usually, these feelings pass in due course.

But, if the feelings are interfering with your life and don't go away after a couple of weeks, or if they come back, over and over again, for a few days at a time, it could be a sign that you're depressed in the medical sense of the term.



Physical effects of depression

- having difficulty sleeping
- sleeping much more than usual
- feeling tired
- loss of appetite, and weight loss
- overeating
- aches and pains with no obvious cause
- moving very slowly
- excessive use of tobacco, alcohol or other drugs

How might someone
act if they were experiencing
depression?

Psychological effects of depression

Thoughts..

- difficulty remembering things
- hard to concentrate on work, tv, reading etc.
- difficulty making decisions
- negative thoughts
- feeling the future is bleak
- not seeing the point in things
- suicidal feelings

Feelings..

- restless and agitated
- feel numb, empty and full of despair
- feel isolated and unable to relate to other people
- unusually irritable or impatient
- Little pleasure in life
- feel helpless

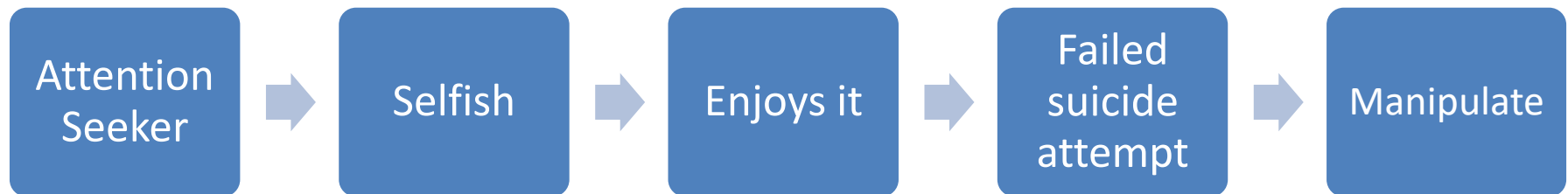
The impact of depression on behaviour

- avoiding school, college, work and / or friends
- not doing activities usually enjoyed
- avoiding social events they usually enjoy
- cutting themselves off from others and can't ask for help
- finding it difficult to speak
- get tearful easily
- self-harming

Self Harm - UK

- The UK has the highest rate of self harm in Europe
- 68 % increase of young people being omitted to hospital for self harm in 10 years
- Childline report a 41% increase in self harm, highest increase age was 12 years old
- People for self harm for 15 years or more are over 50 times more likely to die from suicide

Misconceptions = Stigma



Black Dog video

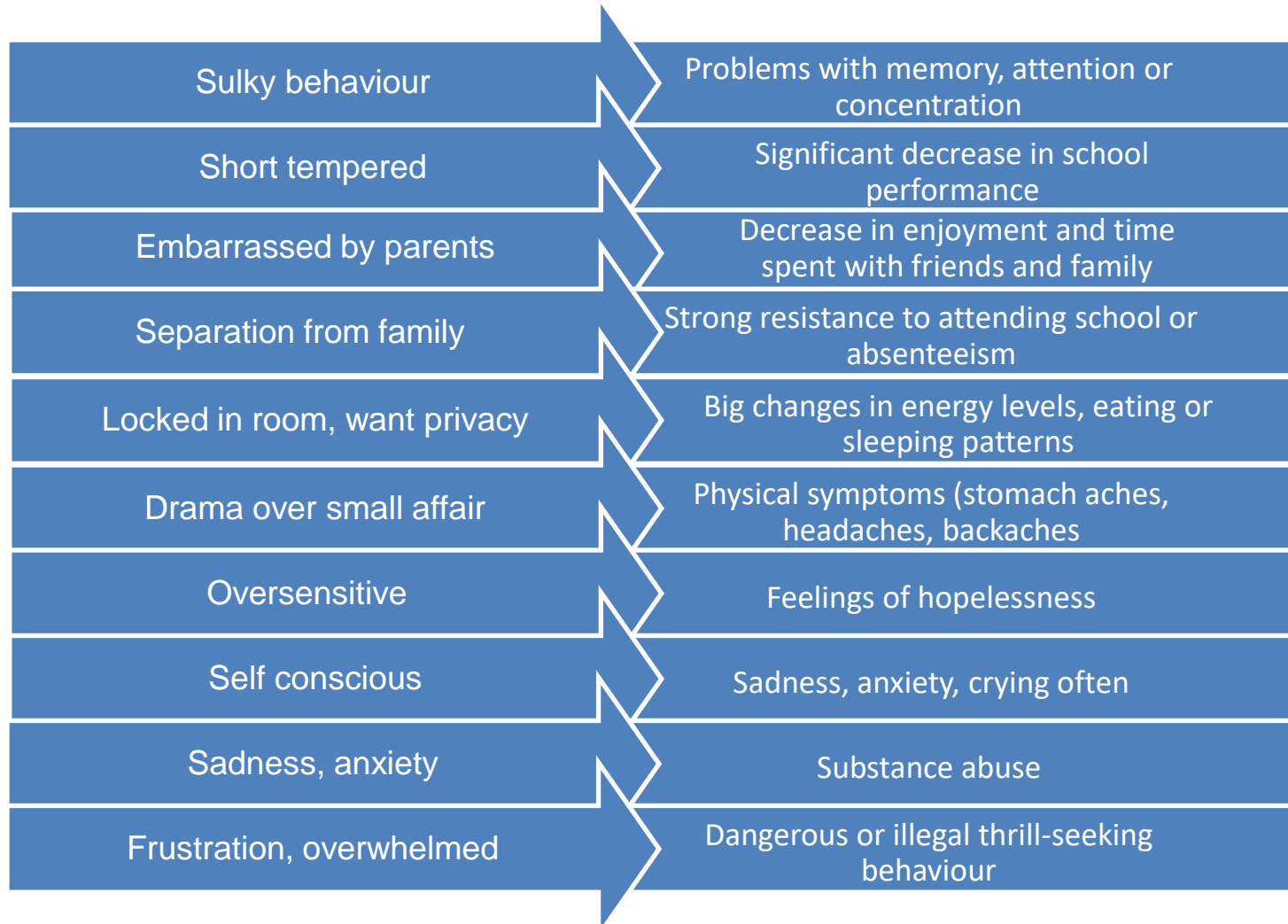


<https://www.youtube.com/watch?v=XiCrniLQGYc>

Adolescence → Mental Health

Adolescence

Mental Health



Communication



Case Study

Robert is 8 years old, his school attendance has changed dramatically for the worse over the past two years. His form teacher has repeatedly reached out to him to find out what is troubling him but he is uncommunicative, abrupt and rude.

Last week he was in trouble with the police for shop lifting. He is angry, frightened and miserable.

What might be going on?

Robert attends a counselling session organised by the school and he tells the counsellor that for the past 2 years his mother and father have been arguing. It started when his father found out that his mother was having an affair and he became very angry.

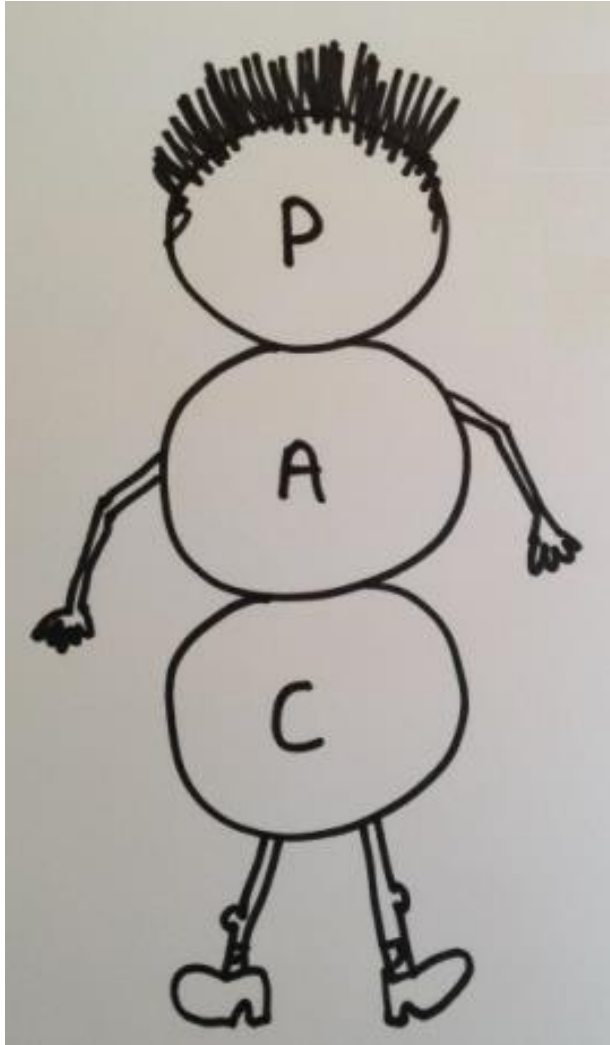
One day Robert came home early and found his mother in bed with another man. She pleaded with him not to tell his father but although he didn't, his father moved out 6 weeks ago.

Discuss Robert's case in light of his child development.

How would you interact with Robert within your professional role?



The Ego State Model



Parent ego-state

behaviours, thoughts and feelings copied from parents and parent figures

Adults ego-state

behaviours, thoughts and feelings which are direct responses to the here-and-now

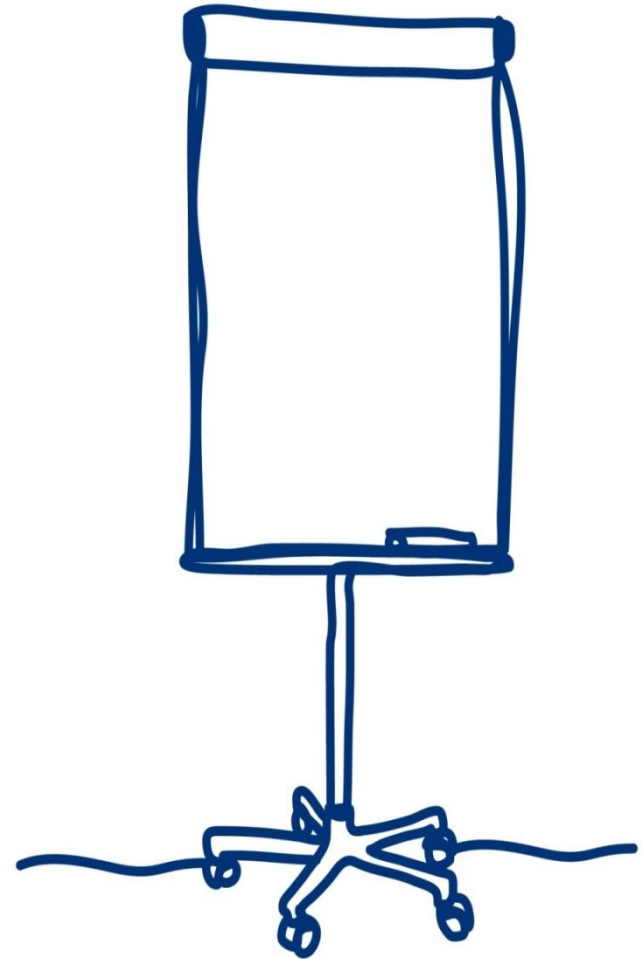
Child ego-state

behaviours, thoughts and feelings replayed from childhood

Exercise in small groups

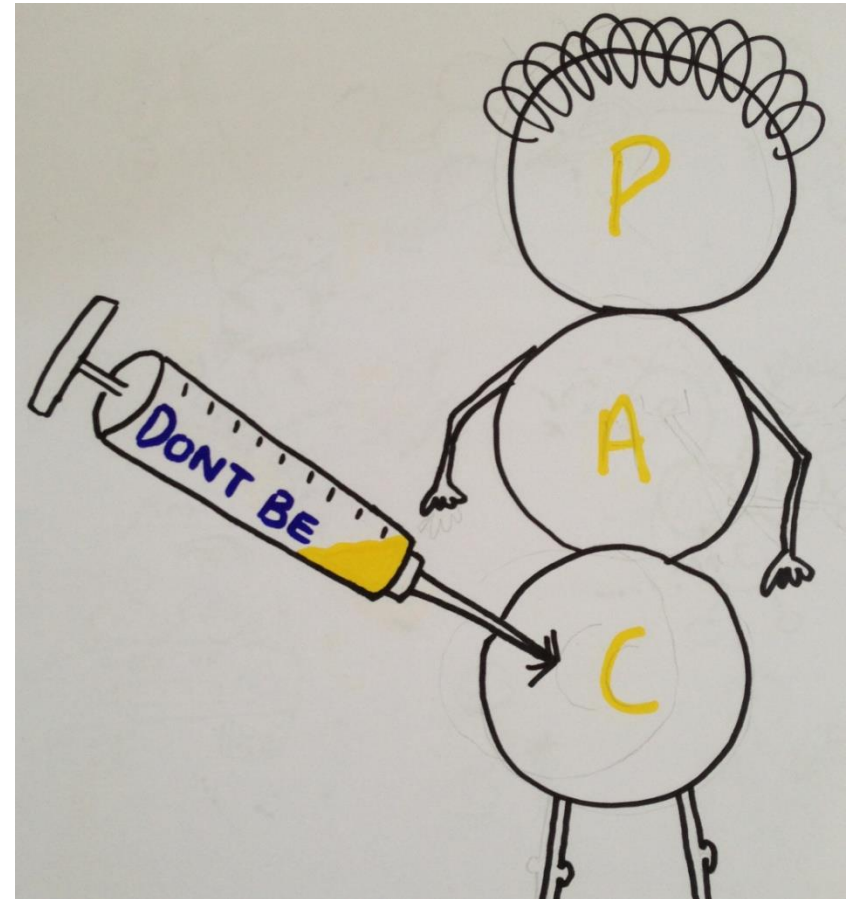
Q1. Try to think of an example of a communication from young person's Parent ego state and another example from a person's Child ego state

Q.2 What "Don'ts" were you given by your parents / caregivers as a child?



Injunctions

- Don't Exist
- Don't Be You
- Don't Be a Child
- Don't Grow Up
- Don't Make It
- Don't Do Anything
- Don't Be Important
- Don't Belong
- Don't Be Close
- Don't Be Well
- Don't Think
- Don't Feel



Drivers

5 common “drivers” that drive us when under pressure....

- Hurry Up
- Be Perfect
- Please People
- Try Hard
- Be Strong



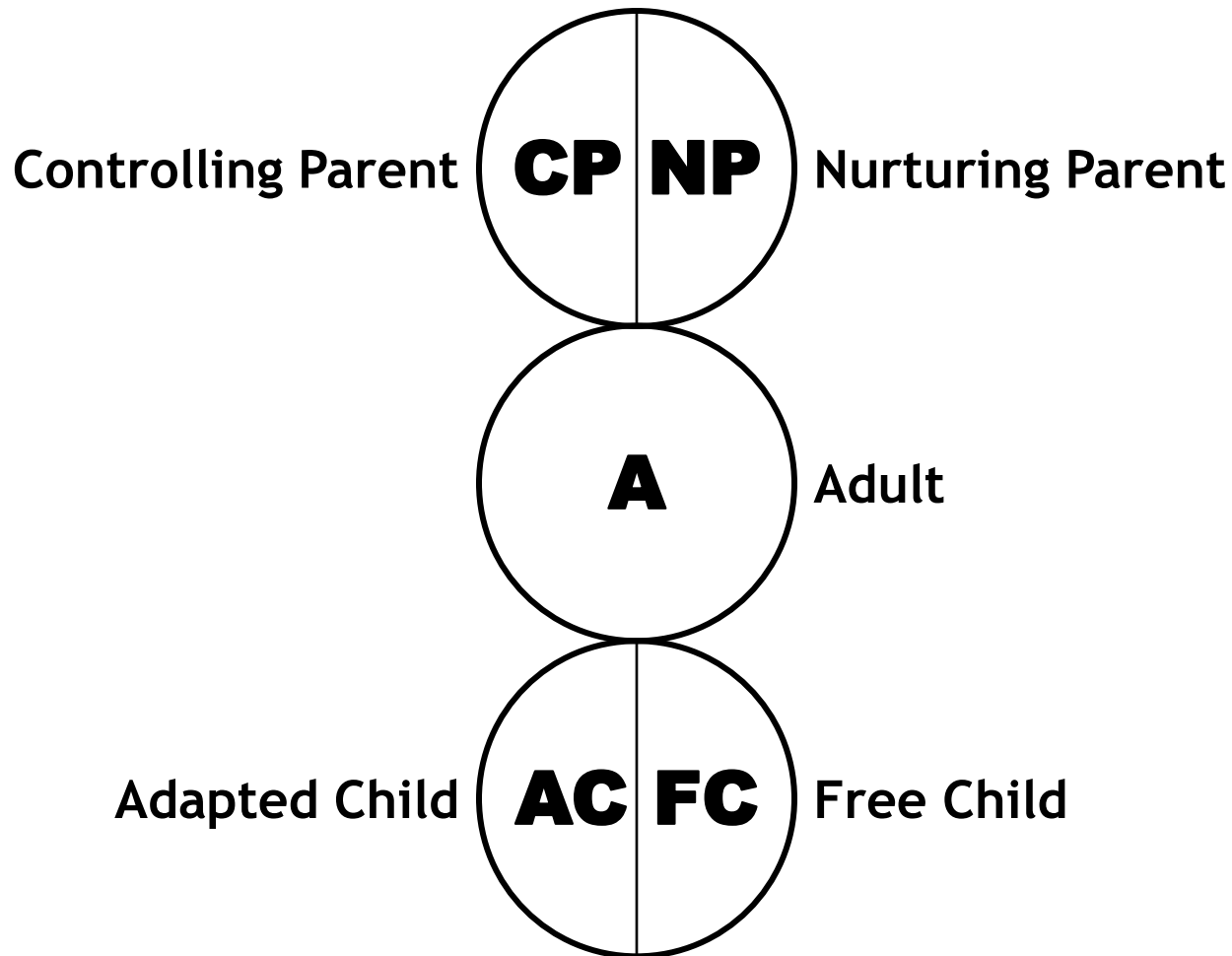
But are also be root of dysfunctional behaviour when stressed...

Empathy vs Sympathy video



<https://www.youtube.com/watch?v=1Evwgu369Jw>

The Behavioural Model



Controlling (Critical) Parent

Disciplinary or critical behaviour with statements e.g.

“How many more times do I have to tell you”

“Look at me when I’m talking to you”

“Pull yourself together, no one else moans like this”

Some critical statements may be more positive if genuinely aimed at protecting wellbeing, but can still invite a negative response from the other, e.g.

“Stop smoking, it’s bad for you!”

Don’t walk out in the road in front of the cars!



Nurturing Parent

Display teaching, caring, supportive, loving and praising behaviour e.g.

“Do you want help with that? Let me know if so”

“Don’t worry, we will sort it out together”

“Let’s take a break and go for a walk and a chat”

“Here, I’ll help you with that.” (from one-up position)

“No one is good enough to date my daughter” (Smother-mother)

“You need my help to succeed”



Adapted Child

I have learned that in order to get by I had better be polite and adhere to the rules, OR, I might decide to rebel against these rules and expectations e.g.

Compliant:

“I must say please and thank you so that people don't think I'm rude”

“If I don't stick to the rules I'll get into trouble”

Rebellious:

“Why me, it's always me, never anyone else”

“If I make a real fuss I know I'll get me way”

“My teacher's a bully and I'm not doing any work”



Free Child

I am Instinctive, spontaneous, carefree and without boundaries, with no attention to parental rules or limits.



Positive:

“It’s actually OK to feel angry and express my emotions appropriately”

“Let’s celebrate and party!”

“Let’s have fun, play, laugh”

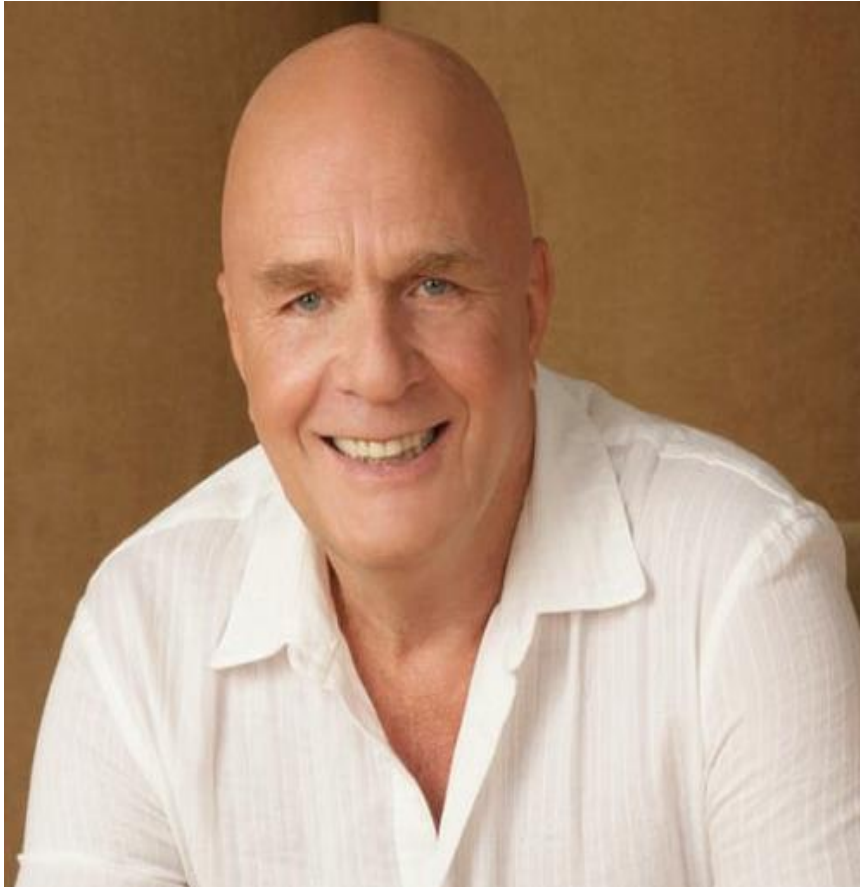
Negative:

“I love the thrill of driving at 110 miles per hour”

“I’m going to graffiti my name”

“Fighting is fun”

Adult



Adults treat people with respect, they are approachable, reasonable, adaptable, rational and non-judgemental

Decisions relevant to the current situation, made from “here-and-now” grown up resources.

Statements might include:

“I’ve noticed you’ve spent a lot of time on your own, is everything ok?”

“I think this could help us move this forwards, what do you think”

“Could we go over that again to avoid any misunderstanding?”

Healthy Counter-Injunctions

Don't Exist

Don't Be You

Don't Be a Child

Don't Grow Up

Don't Make It

Don't Do Anything

Don't Be Important

Don't Belong

Don't Be Close

Don't Be Well

Don't Think

Don't Feel

“Your life is precious”

“You are good enough as you are”

“You can depend on others”

“You can learn from people”

“Look at how much you've achieved”

“It's safe for you to try this”

“You are important”

“People here love your input”

“It's OK to be loved”

“There is time for you here”

“You are clever and we value you”

“It's OK to express your needs”

Installing “Allowers”

Drivers

Hurry Up

Be Perfect

Please People

Try Hard

Be Strong

Allowers

Take your time

**You are good enough as you
are**

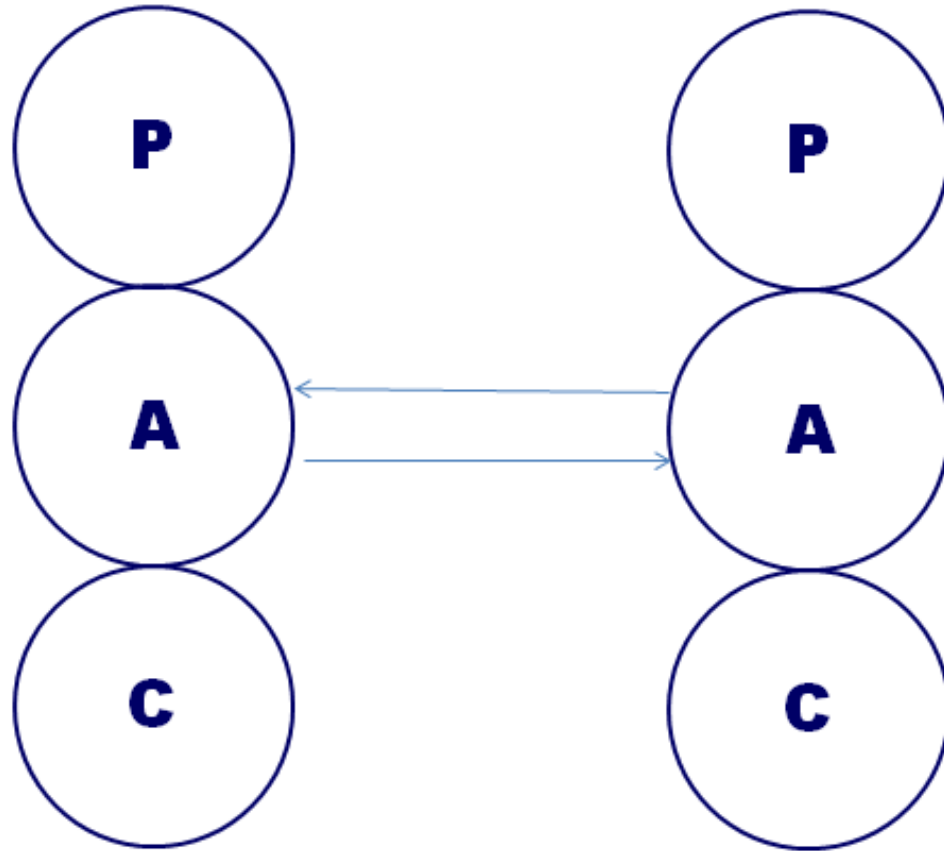
Please yourself

Do it

**Be open and express your
wants**

Three rules of communications

COMPLIMENTARY TRANSACTION



Young person

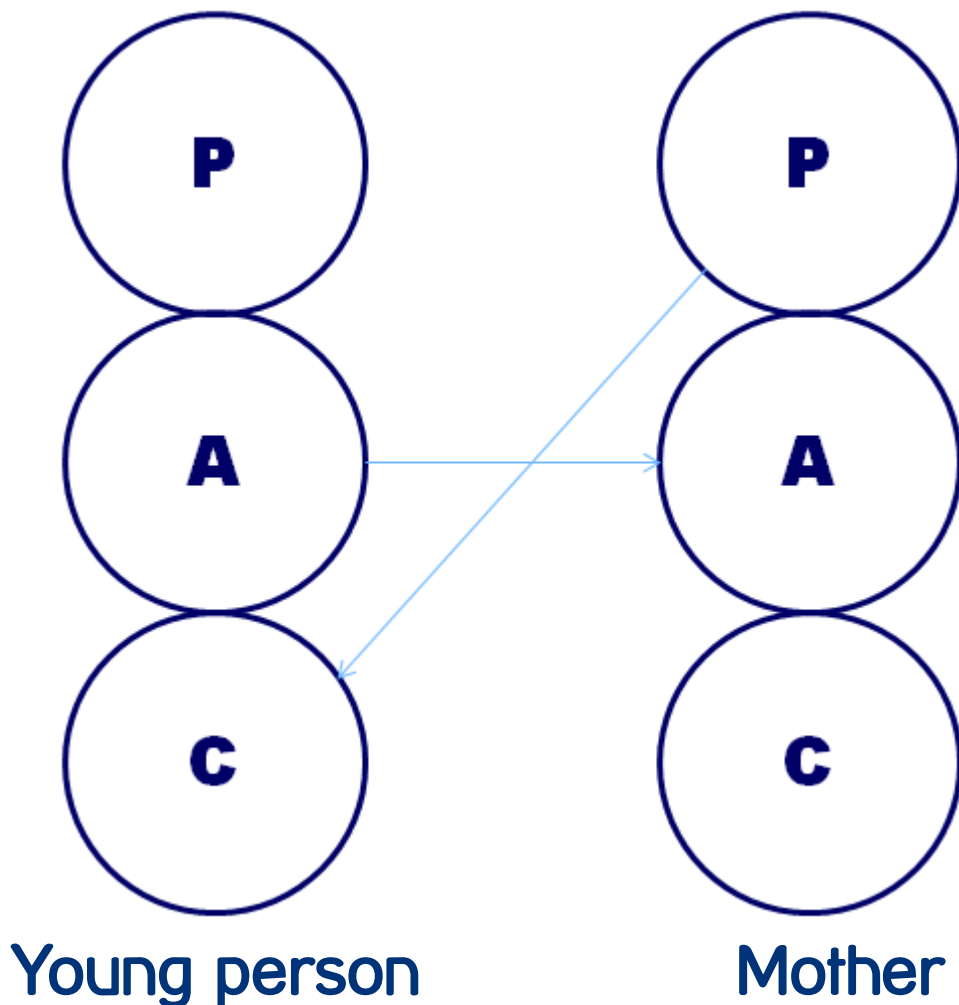
Mother

“I’m finding this homework difficult”
- Young person

“OK, shall we look at it together?”
- Mother

Three rules of communications Clinical Commissioning Group

CROSSED TRANSACTION

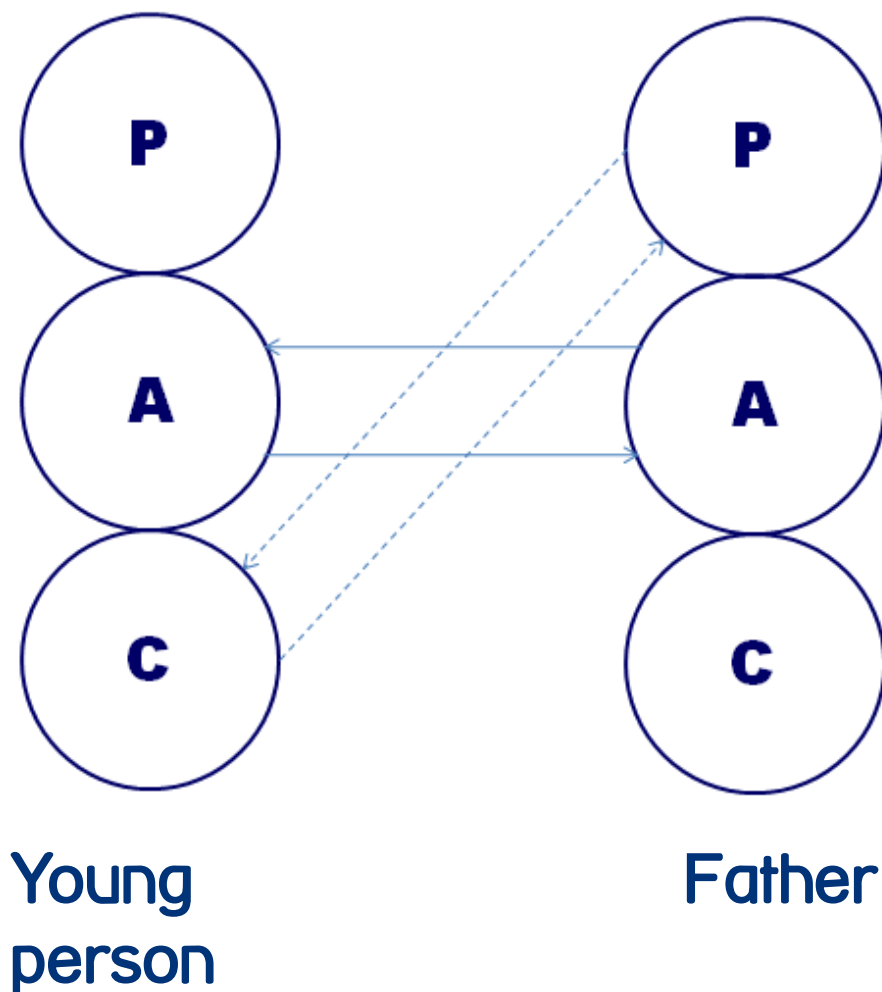


“I’m finding this homework difficult”
- Young person (a-a)

“You should pay more attention in class then”
- Mother (p – c)

Three rules of communications

ULTERIOR TRANSACTION



SOCIAL:

“Daniel is so lucky, his mum has bought him the new iPhone”
- Young person

“Yes, he is always top of the class too isn't he?”
- Father

ULTERIOR:

“I want a new iPhone”
- Young person

“You'll have to work harder than that if you want me to part with my cash!”
- Father



Wellbeing & Resilience

Child Wellbeing

Things that can help:

- being in good physical health, eating a balanced diet and getting regular exercise
- having time and the freedom to play, indoors and outdoors
- being part of a family that gets along well most of the time
- going to a school that looks after the wellbeing of all its pupils
- taking part in local activities for young people.

Other factors are also important, including:

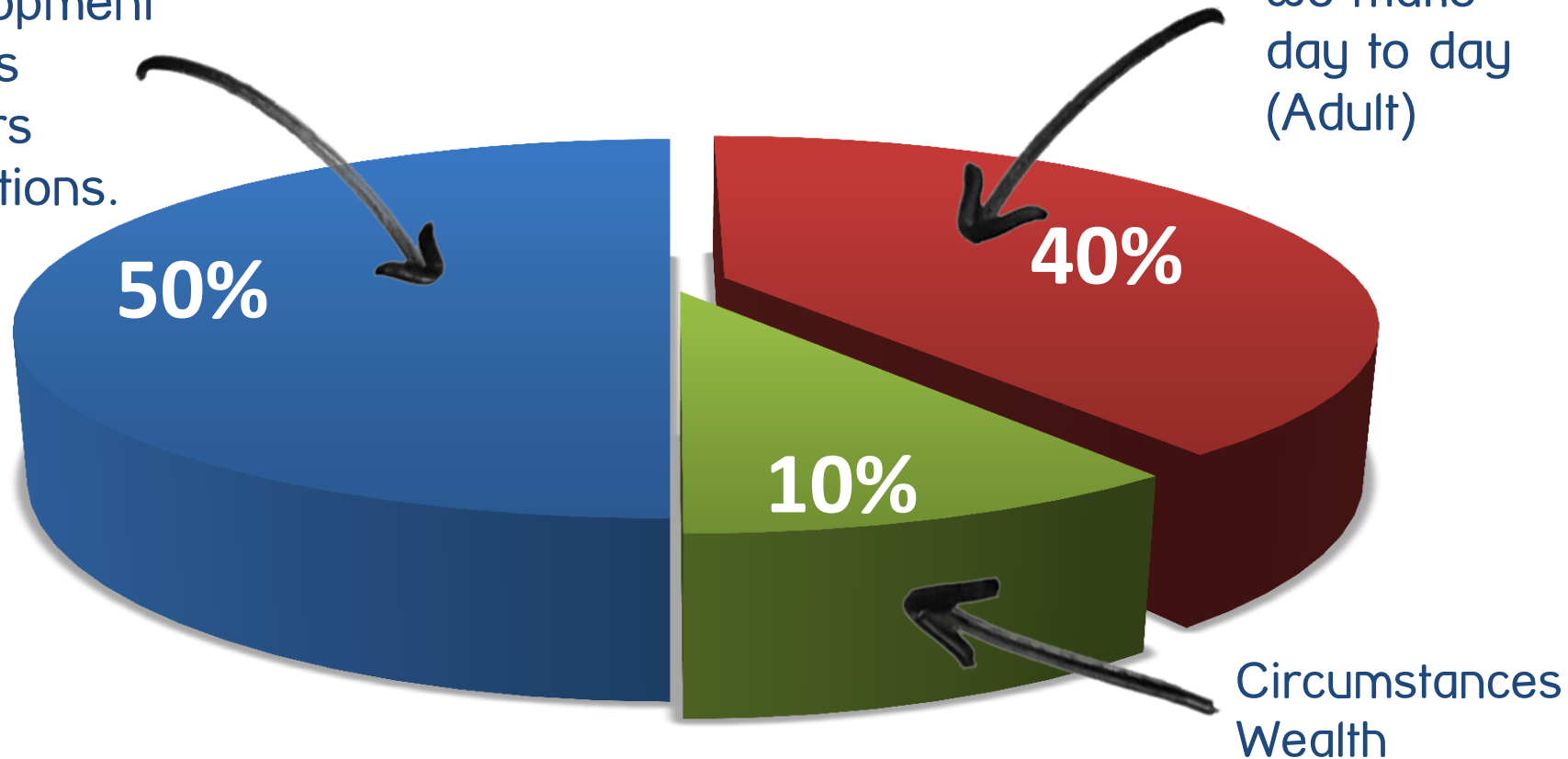
- feeling loved, trusted, understood, valued and safe
- being interested in life and having opportunities to enjoy themselves
- being hopeful and optimistic
- being able to learn and having opportunities to succeed
- accepting who they are and recognising what they are good at
- having a sense of belonging in their family, school and community
- feeling they have some control over their own life
- having the strength to cope when something is wrong (resilience) and the ability to solve problems.

Happiness formula

$$H = S + C + V$$

Child
development
Beliefs
Drivers
Injunctions.

Choices
we make
day to day
(Adult)



■ Script ■ Voluntarily actions ■ Conditions of Living

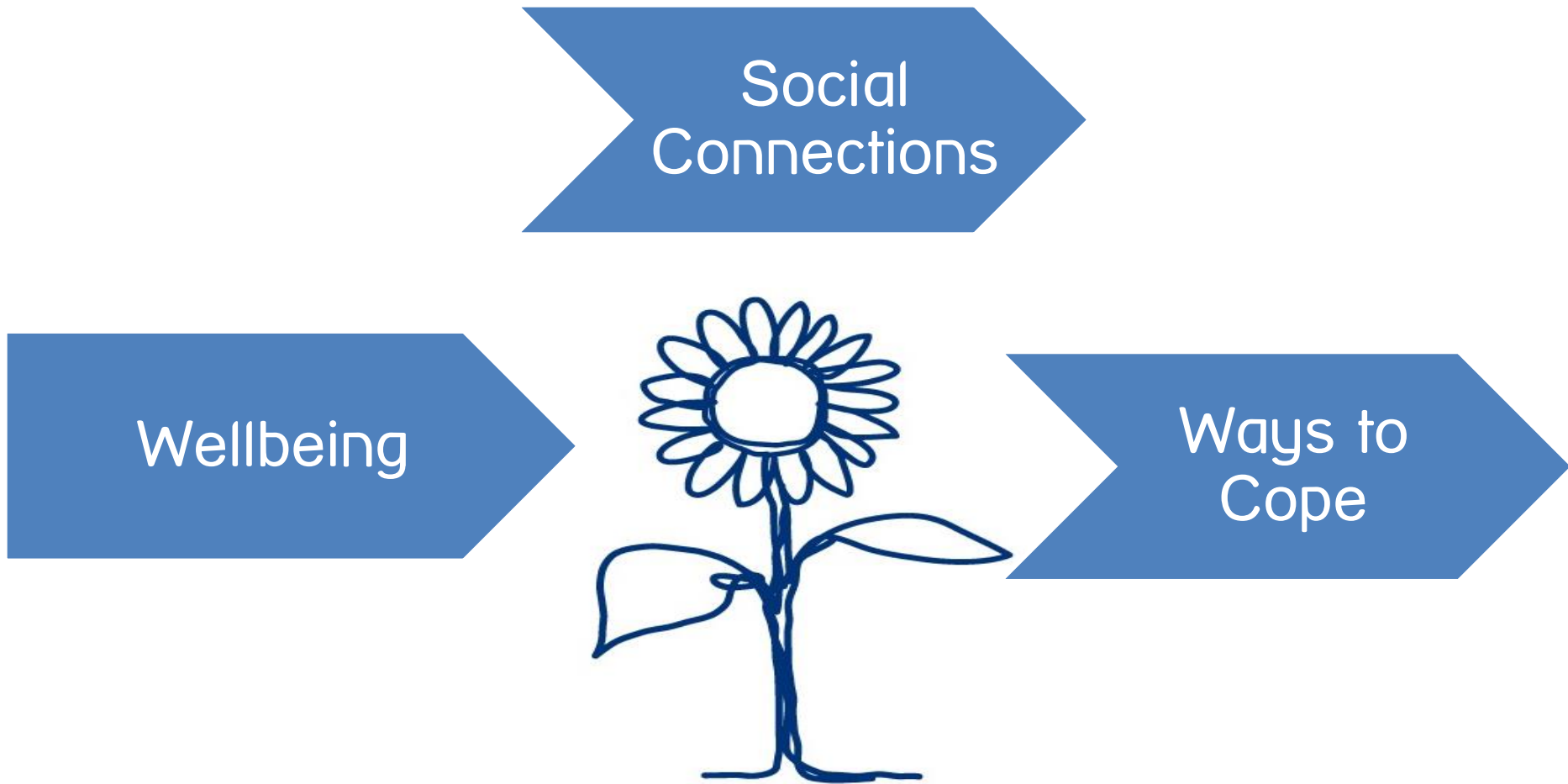


Resilience: What do we mean?

“Resilience is not simply a person’s ability to ‘bounce back’, but their capacity to adapt in the face of challenging circumstances, whilst maintaining a stable mental wellbeing.”

We believe resilience is something that can change over time and that we, as individuals, have the power to change it. We believe that resilience can be taught, and learned, and that the elements that build resilience can be introduced into everyday life.

Three Parts of Resilience



Three Parts of Resilience



**Exercise
Temperature
Check**

Three Parts of Resilience

Wellbeing

Social
Connections

Ways to
Cope



Exercise: Match the Cards

Five Ways To Wellbeing



Five ways to wellbeing

Connect....

With the people around you. With family, friends, colleagues and neighbours. At home, work, school or in your local community. Think of these as the cornerstones of your life and invest time in developing them. Building these connections with support and enrich you every day.

Five ways
to wellbeing

Connect

Exercise: People Bingo



Five ways to wellbeing

Be Active....

Go for a walk or run. Step outside. Cycle. Play a game. Garden. Dance. Exercising makes you feel good. Most importantly, discover a physical activity that you enjoy; one that suits your level of mobility and fitness.



Five ways
to wellbeing

Be Active

Exercise 1: Statistics
Exercise 2: Stretch

Five ways to wellbeing

Take notice....

Be curious. Catch sight of the beautiful. Remark on the unusual. Notice the changing seasons. Savor the moment, whether you are on a train, eating lunch or talking to friends. Be aware of the world around you and what you are feeling. Reflecting on your experiences will help you appreciate what matters to you.

Five ways
to wellbeing

Take notice.....

Exercise 1: Mindfulness

Exercise 2: Seed Exercise



Five ways to wellbeing

Keep Learning....

Try something new. Rediscover an old interest. Sign up for that course. Take on a different responsibility at work. Fix a bike. Learn to play an instrument or how to cook your favourite food. Set a challenge you will enjoy achieving. Learning new things will make you more confident, as well as being fun to do.



Five ways
to wellbeing

Keep Learning

Exercise: In two groups
outline what will be
learned through the
programme that will lead to
increased confidence

Five ways to wellbeing

Give....

Do something nice for a friend, or a stranger. Thank someone. Smile. Volunteer your time. Join a community group. Look out, as well as in. Seeing yourself, and your happiness, linked to the wider community can be incredibly rewarding and will create connections with the people around you.

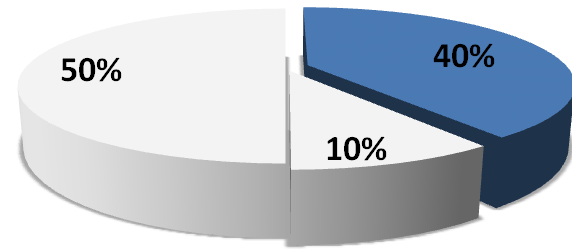
Five ways to wellbeing

Give

Exercise: Give a positive unit of recognition to someone you've not worked with today



GREAT-DREAM



Outside: Daily Activities

 Giving

 Relating

 Exercise

 Appreciating

 Trying out

Inside: Attitude To Life

 Direction

 Resilience

 Emotion

 Acceptance

 Meaning

Signs & Symptoms: What to look out for..

- **changes** in people's behaviour, mood or how they interact
- **changes** in their work output, motivation levels and focus
- struggling to make decisions, get organised and problem solve
- appearing tired, anxious or withdrawn or losing interest in activities and tasks they previously enjoyed
- **changes** in eating habits, and increased smoking / drinking

Never make assumptions – everyone is different!

External Signposting



Mind's wellbeing resources

mind.org.uk

A-Z Mental health

A | B | C | D | E | F | G | H | I | J | K | L | M | N | O | P | Q | R | S | T | U | V | W | X | Y | Z

Abuse

Addiction and dependency

Advocacy

Aftercare under section 117 of the Mental Health Act

Anger

Antidepressants

Antidepressants A-Z

Antipsychotics

Antipsychotics A-Z

Anxiety and panic attacks

Arts therapies

Loneliness

Medication

Medication - drugs A-Z

Medication - stopping or coming off

Mental Capacity Act 2005

Mental Health Act 1983

Mental health and the courts

Mental health and the police

Mental health problems (introduction)

Mindfulness

Money - keeping it under control

Prevention of young suicide

www.papyrus-uk.org

- Call – 0800 058 41 41
- Email – pat@papyrus-uk.org
- SMS – 07786 209 697
- Specialist telephone service staffed by trained professionals who give non-judgemental support, practical advice and information to; children, teenagers and young people up to the age of 35
- Opening hours – 10am – 10pm (weekdays) 2pm – 10pm (weekends)



Gender confusion

www.mermaidsuk.org.uk

- Call – 0844 334 0550
- Email – info@mermaidsuk.org.uk



- Mermaids is passionate about supporting children, young people, and their families to achieve a happier life in the face of great adversity. They work to raise awareness about gender issues amongst professionals and the general public.

Eating disorders

www.b-eat.co.uk

- Call – 0345 634 1414
- Youthline – 0345 634 7650
- Email – help@b-eat.co.uk



- The beat helpline is for anyone over 18, parents, teachers or concerned adults.
- The beat youth line is for anyone under 25

Rape and Abuse

www.rapecrisis.org.uk



- Call – 0808 802 9999
- Email – rcewinfo@rapecrisis.org.uk
- Rape Crisis England & Wales is a feminist organisation that exists to promote the needs and rights of women and girls who have experienced sexual violence, to improve services to them and to work towards the elimination of sexual violence.

Where to seek help..

What support exists within the organisation?

What support exists outside of the organisation?



Local GP	
IAPT services / BACP / UKCP / Counselling Directory	
Local Debt Advice Services	
Mind	0300 123 3393
Samaritans	116 123
Relate	0300 100 1234
Young Minds	08088025544
Equality & Human Rights Commission	0800 444 205
Citizens Advice Bureau	0344 772 020
NHS Stressline	0300 123 200

Evaluations & Thank You

Mark Hashimi
Head of Workplace Wellbeing & Counselling
Psychotherapeutic Counsellor
Mark.hashimi@hfmind.org.uk

