### Parents Forum Identifying and helping young people experiencing poor Mental Health



MAKING SURE THAT
YOUR YOUNG
PERSON IS HAPPY
AND WELL

THEY EAT PROPERLY, NOT SKIPPING MEALS, NOT SNACKING, HAVE A BALANCED DIET THAT INCLUDES FRUIT AND VEGETABLES AND NO ENERGY DRINKS.

THEY HAVE SOME REGULAR FORM OF EXERCISE, EVEN IF IT IS WALKING TO SCHOOL AS MUCH AS THEY
MIGHT NOT APPEAR TO
ALL OF THE RESEARCH
EVIDENCE SAYS THAT
YOUNG PEOPLE WANT
YOU TO BE CONNECTED
WITH AND INTERESTED
IN THEIR LIFE IN
SCHOOL.

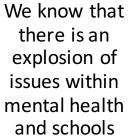
GET THEM INVOLVED IN VOLUNTEERING AT A LOCAL CHARITY OR FOOD BANK

### Mental Health

If you are at all concerned the first point of contact is your GP



Growth in anxiety and anxiety issues





Serious issues around sleep with many young people reporting struggling with good sleep







What are the issues we have identified?



- We have the Pastoral Counsellors Jo, Lorna and Samantha
- We have the A Space Counsellors who are here 4 days a week and provide young people with more specialist and intensive support
- We work closely with CAMHS and we have a CAMHS professional working with us one day a week Nimisha Tanna
- We are a part of the Pilot Project called WAMHS which aims to have a more joined up response to the issues of young people and mental health
- We are completing the National Schools
   Wellbeing Award
- Teach more topics on mental health and wellbeing including a new program during Tutor Time
- Regular assemblies

### Supporting parents and carers

- We have taken an increasingly proactive attitude to our work with parents and carers
- Parents and Carers have choices and young people in school are still legally children
- Giving support and advice about key issues around sleep
- Boundaries
- Holding information evenings
- Information on the school website
- Available advice leaflets

# Monitoring Support

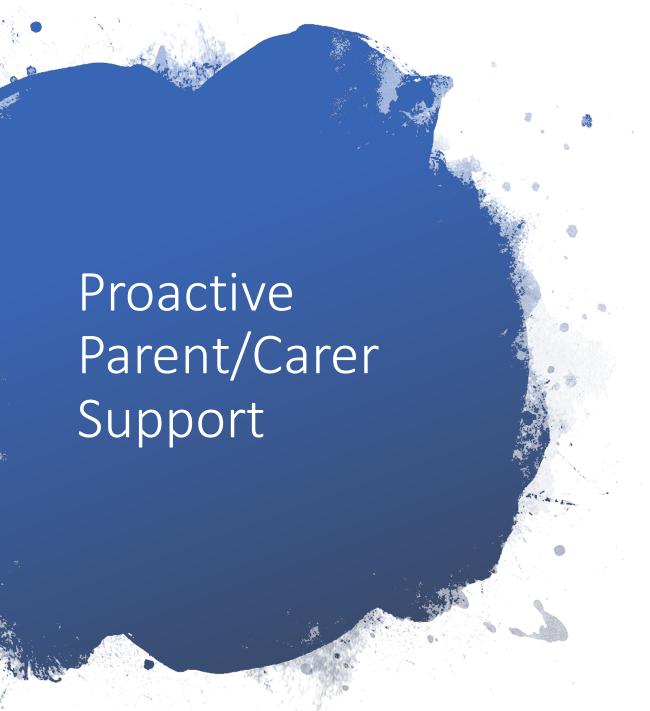
- The Key Mental Health Team are the Pastoral Councillors, Me, Michael Collins and Nimisha Tanna from CAMHS
- The Key meeting is Live CAHMS this happens every two weeks and it is the key point where the core Mental Health Team discuss any one who has been referred either through a staff email to Child Protection or has been raised as a mental health concern at the Student Support Network Meetings or has been brought to our attention through external circumstances.
- This could be a information received from Homerton Hospital about a child who has presented at A&E.
- Or from a residential Mental Health unit such as the Coburn
- It could be a parent/carer raising concerns about a young person

### Support focused

- The focus in Live CAMHS is making sure that the young person who has been referred has appropriate support
- We will discuss the needs of the young and make an initial assessment regarding the support that will be offered to them:
  - 1. Light touch checking in with one of the school counsellors as they need to
  - 2. A more intensive period of support with weekly sessions initially lasting for 6 weeks
  - 3. The student is allocated to one of our A space counsellors for an initial period of about 6 weeks.
  - 4. External referral to Young Hackney
  - 5. An external referral to CAMHS
  - 6. Finding out if the young person is already known to CAHMS and perhaps already attending

### Confidentiality

- We do not always get told if a young person is currently or has been in the past supported by CAHMS
- We do not always get told if a young person has presented at A&E as a result of a mental health crises
- We do not always get told if a young person has presented at A&E with a drugs or alcohol related issue.
- So please do not assume we know!
- Please trust us!
- We can support your children in school more effectively if we know that they need support.
- The information will only go to key staff in the core Mental Health Team and initially the Head of Year.
- Any information shared with staff would be agreed with parents carers and most importantly the young person



- Family/home support is recognised as a protective factor in keeping young people safe and well.
- Having routines and boundaries
- Talk to your children and young adults and have time together
- Be aware of changes in their behaviour or appearance

### Having rules about when they can be out

It doesn't matter if they are 15 or 16 or 18 years old they are still children and you are still the parent or carer responsible for them?



Staying over at other peoples houses for parties or sleepovers should not have an automatic assumption of approval. This should be a process of negotiation only on a Friday or Saturday and clear times for when are they coming home the next day.



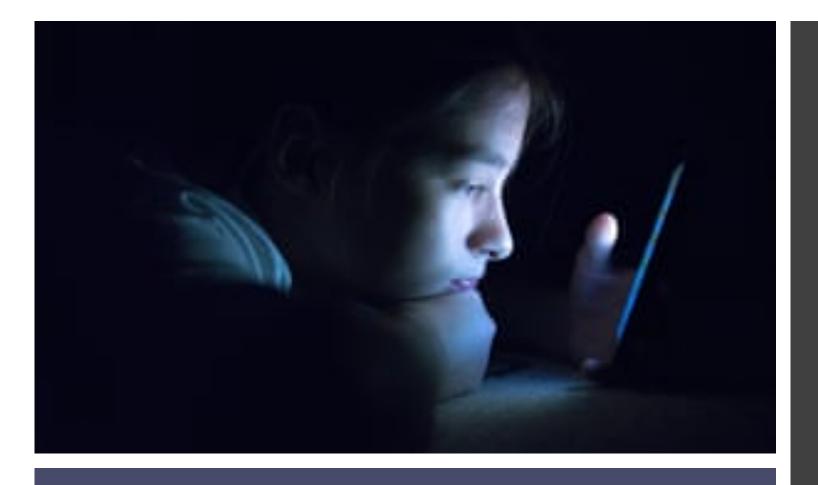
Are there going to be drugs or alcohol available at the party?



Is there going to be a responsible adult available at the party?

## Substance misuse

- It is clear that young people who are regularly involved with drugs and alcohol misuse are increasing their risk of experiencing poor mental health
- It is also clear that they will do less well in their exams and limit their future options
- Self diagnoses and self medication has seen young people buying prescription drugs on the internet and taking them often combined with class A drugs and Alcohol
- Drugs bought on the internet are 90% likely to be fakes and often a different drug entirely sometimes Fentanyl which is responsible for a growing number of deaths in the UK and is already responsible for more deaths in the US than guns.
- Substance Misuse often plays a part in all of the other issues



Sleep

The Guardian 30/09/2018

Children's lack of sleep is 'hidden health crisis', experts say

• The Guardian analysed data from NHS Digital, the national information and technology partner to the health and social care system in England, revealing that admissions with a primary diagnosis of sleep disorder among those aged 16 and under has risen from 6,520 in 2012-13 to 9,429 last year.



- Teenagers are often moody and uncommunicative, but that doesn't necessarily mean they are depressed.
- These behaviours can just be part of typical adolescence, related to hormonal changes, brain development and trying to find their place in the world as they grow from children into young people.
- Some teenagers, however, get stuck in the turmoil or overwhelmed by it.
- They can find the changes they are going through just too much to cope with.
- They may withdraw completely, or seek relief by harming themselves or taking risks and refusing to toe the line.
- An added problem is that teenagers often refuse to talk at home about difficult issues and this can be really worrying for parents.
- Depression can be linked to other problems such as anxiety, eating disorders or learning disabilities.



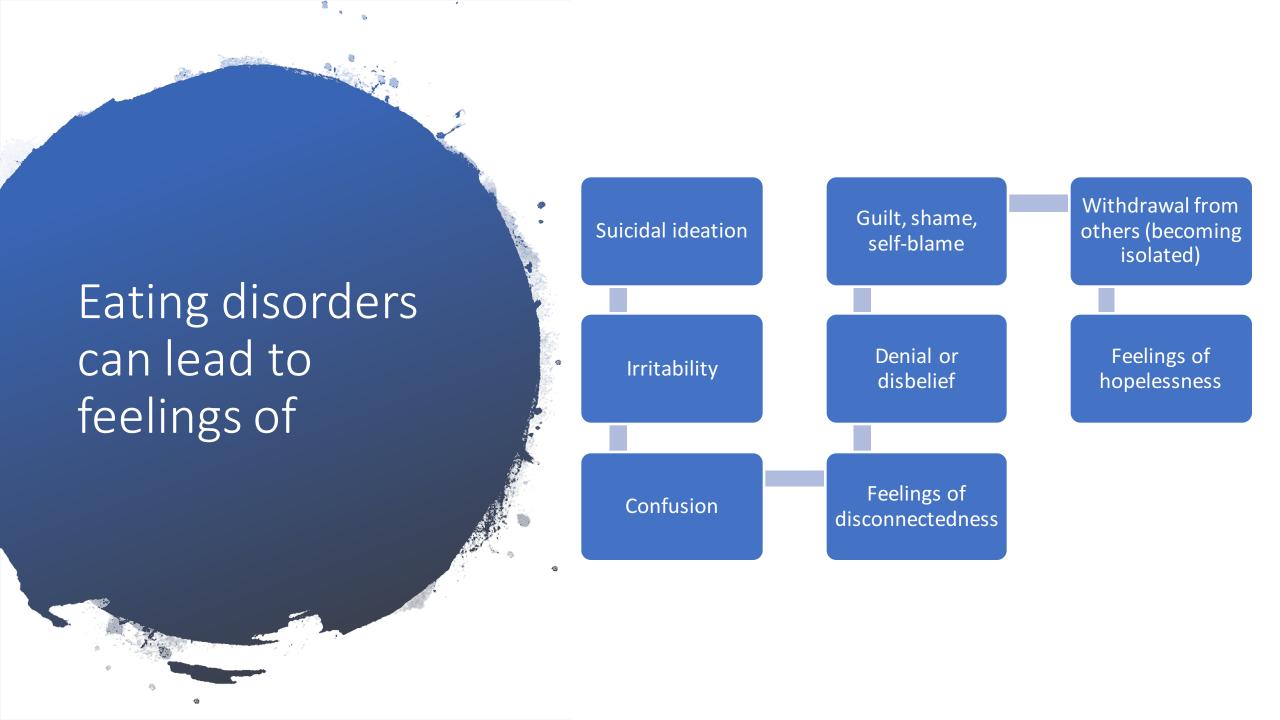
- The symptoms of anxiety start out the same as just feeling generally anxious but get worse or last longer than they should. These include:
- Feeling frightened, nervous or panicky all the time
- Difficulty sleeping
- Low appetite
- Lack of concentration
- Tired and irritable
- Palpitations when your heart feels like its racing
- Dry mouth
- Trembling
- Feeling faint
- Stomach cramps and/or diarrhoea
- Feeling one, some or even most of the above doesn't necessarily mean you have anxiety. It's important to talk to your GP to get a full diagnosis.
- Anxiety can be completely debilitating



- Self-harm is any act of intentional selfinjury or self-poisoning. Examples include:
- Self-cutting
- Taking an overdose
- Swallowing objects or poisons
- Hitting or bruising
- Self-strangulation with ligatures
- Burning
- Suicide



- Canadian research suggests that eating disorders are the most deadly of all mental illnesses. The death toll for youth age 15-24 is 12 times greater than for all other causes combined.
- Children as young as eight years old have been diagnosed with eating disorders





- Talk to your young person and explain that you are worried about them
- If you are still concerned talk to your GP
- Share your concerns with us