

Child Centred Policing Conference Children and Young People's Mental Health – State of the Nation

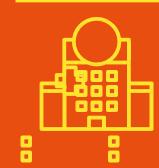


Who we are and our approach

Building on over 27 years' experience of working with schools and local communities.

Place2Be is a children's mental health charity providing school-based support and in-depth training programmes to improve the emotional wellbeing of pupils, families, teachers and school staff.

Children and young people's mental health – state of the nation



In 2021, one in six children aged 5 to 16 years were identified as having a probable mental disorder (NHS Digital). This rises to one in four young people aged 17-19



50% of mental health conditions are established by the time a child reaches the age of 14, and 75% by age 24



Factors including family income, heavy use of social media, being bullied, frequent arguing with parents, and poor maternal health have all been shown to have an impact on young people's mental health (Education Policy Institute)



Early intervention is vital to address problems and provide support before issues escalate. However early intervention support for CYP experiencing mental health is patchy, is hard to access and waiting lists are high i.e CAMHS 18-20 months in Devon.



The most vulnerable children in society

Children in counselling services are more likely than other pupils at their school to be eligible for Pupil Premium and free school meals, to have Special Educational Needs, to be Looked After and on a Child Protection Plan*.



According to recent data:

46% received free school meals



8% were the subject of a child protection plan

93% of children had at least one adverse childhood experience**

Place



^{**38%} had 4 or more, such as abuse, domestic violence or the loss of a parent (June 2019)

Mental Health and the links to the Youth Justice System

- Around 17 per cent of under-18s involved in the criminal justice system have mental health difficulties, compared to an average of 10 per cent in the wider population.
- Children and young people in contact with the youth justice system are modelikely to have mental health problems than those who are not
- ➤ Certain mental health disorders can increase an individual's capacity to react in certain situations. Particularly Attention Deficient and Hyperactivity Disorder (ADHD)
- ➤ Heavy prevalence of exposure to domestic abuse, a sense of abandonment and neglect and experience of bereavement can have an escalation effect on behaviour
- ➤ There is a correlation between the impact of trauma on young people and the relationship between this trauma and their mental health and well-being and crime

The types of mental health difficulties ranged from anxiety and depression to schizophrenia and bipolar disorder.



Presenting Issues

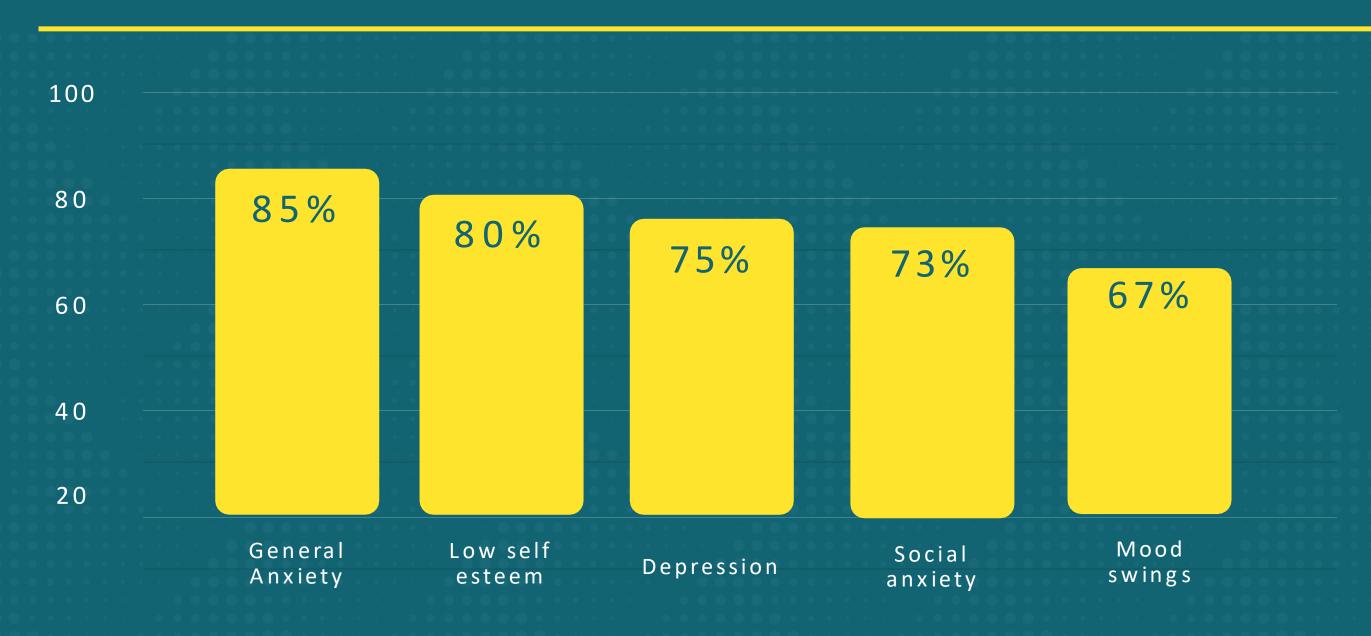
What are the issues that
Secondary Young
People are experiencing?



www.menti.com code-22686283

Issues that children and young people bring to counselling

Secondary





- 39% experience self-destructive thoughts or acts, and 22% have experienced suicidal thoughts.
- 21% experience eating difficulties.



Presenting Issues

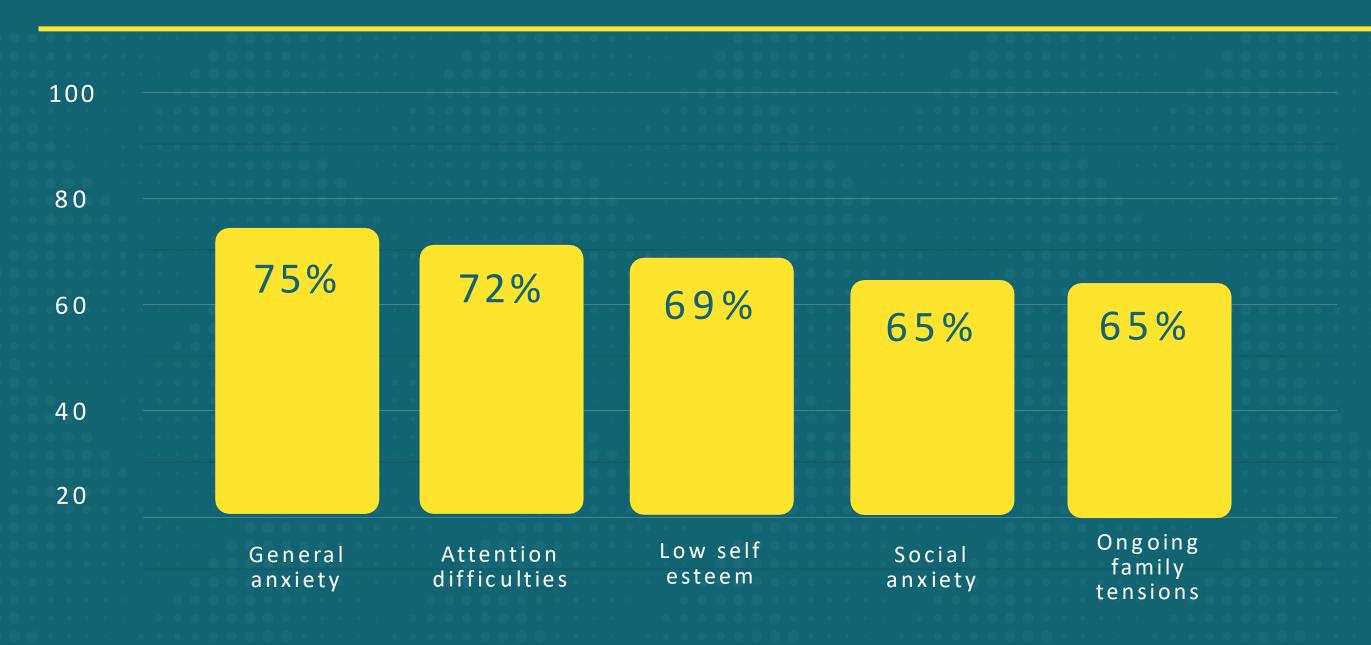
What are the issues that Primary Young People are experiencing?



www.menti.com code-22686283

Issues that children and young people bring to counselling

Primary





- 14% experience self-destructive thoughts or acts and 7% experience suicidal thoughts.
- 17% experience eating difficulties.



Long term benefits



For every £1 invested, mental health services in primary schools has the potential to return £6.20 to society by improving the long-term outcomes for each child (Pro Bono Economics).



This is as a result of expected reduced rates of truancy, exclusion, smoking and depression, crime and higher rates of employment and wages.



The children themselves benefit economically, mainly due to higher lifetime earnings from increased employment and higher wages.



Government also benefits from increased tax revenue and lower spending on public services (such as health and the criminal justice system).





What can the Police do to support good mental health?



A small increase in knowledge can lead to a fundamental shift, ensure your teams know what part they play in the universal mental health of the school community.



Mental Health is everybody's business. Mental ill health doesn't develop in isolation, and it won't be healed in isolation.



Everyone taking responsibility for recognizing when a child or young person is struggling and knowing what action to take.



Involve children and young people in decisions about their mental health.





Youth Mental Health Devon & Cornwall





Cecilia Corbetta Regional Clinical Lead



Resilience - Definition

'Resilire' – to leap or spring back

Resilience is the ability to roll with the punches and not let adversity define you.

When adversity strikes, you still experience anger, grief, pain and loss but you can still function – and recover

Children are not born with resilience, which is produced through the interaction of biological systems and protective factors in the social environment.



Risk factors in children

- Being male
- Insecure attachment
- Academic/school failure
- Material poverty
- Chaotic parenting
- Persistent bullying
- ACES: Domestic abuse/violence; Parental abuse (physical, psychological, sexual, emotional)



Risk Factors/Pressures in the Family

- Divorce/separation
- House prices
- Redundancy/poverty
- Mental health issues in parents
- Substance misuse
- Loss and bereavement
- Neglect



Resilience Factors in the Child

- Being female
- Positive school experiences
- Higher intelligence
- Capacity to reflect
- Capacity to re-frame adversity
- Easy temperament

- Empathy with others
- A sense of humour
- Secure attachment
- Coping skills
- Good communication skills
- Being able to express emotions (for boys)

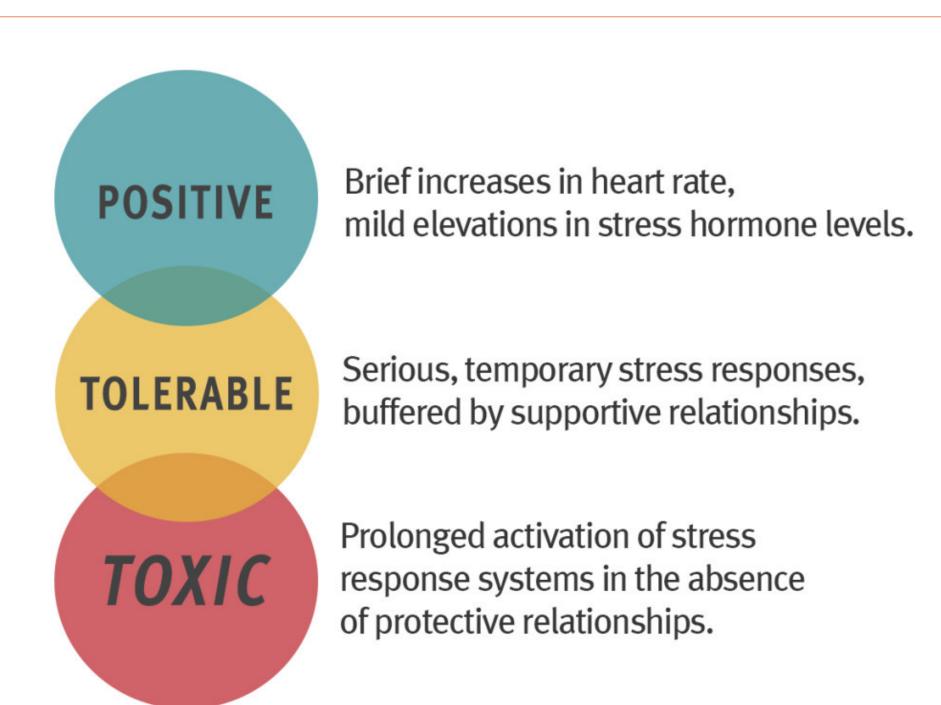


Resilience: Key Concepts

- The single most common factor for children who develop resilience is at least one stable and committed relationship with a supportive parent, caregiver, or other adult.
- Children who do well in the face of serious hardship typically have a biological resistance to adversity *and* strong relationships with the important adults in their family and community
- Learning to cope with manageable threats is critical for the development of resilience
- The capabilities that underlie resilience can be strengthened at any age.



Toxic Stress





Attachment relationships and Resilience

- Strong link between parent/child attachment relationship and child's resilience
- Parent as the 'secure base': developmental function throughout life and during crisis and challenging times
- Schools and community groups as a 'secure base' for children
- Teachers and community workers as key secondary attachment figures
- The power of secure relationships in promoting 'mentally healthy' communities
- Having healthy connections with others in the family and wider community can strongly boost resilience and well being......
 - ...and mitigate against the impact of stressful experiences.



Internal Working Model

Child's Internal Working Model:

When things get difficult this dictates the child's confidence...

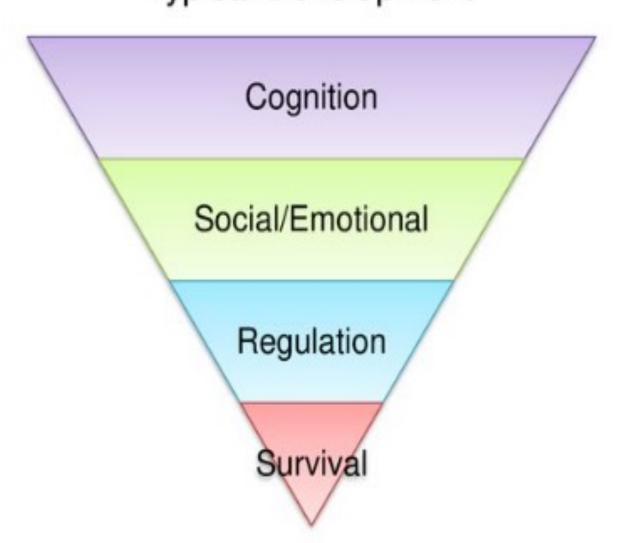
- in their capacity to cope
- in how they access support from adults
- In their ability to Repair the situation and learn



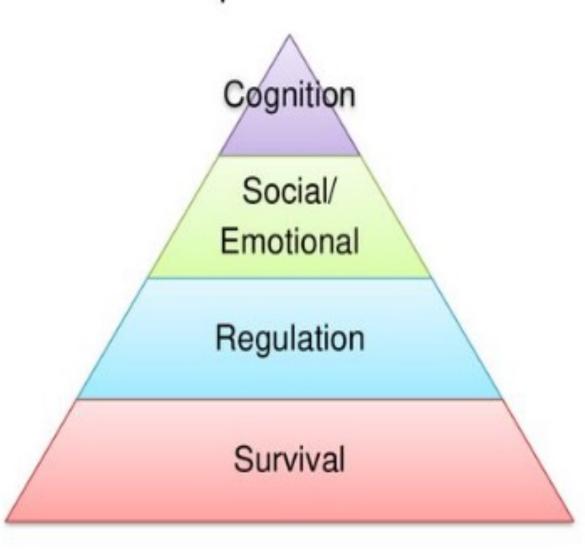


Trauma and Brain Development





Developmental Trauma





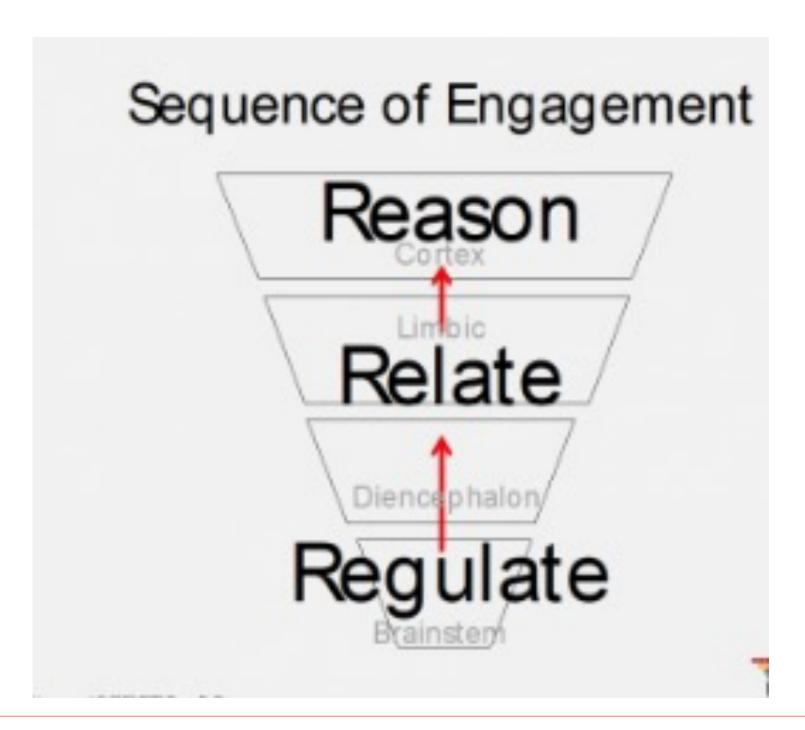
The 4 F's of Fear: a survival response

- Fight Attack the tiger
- Flight Run from the tiger
- Freeze hide from the tiger
- Fawn convince the tiger not to eat you



The Three Rs of Brain-based regulation







A few ideas to support de-escalation – brain and body

- Use their name, remind them they are safe
- Name safety (words/body language)
- Use eye contact
- Slow yourself down/Use a calm, low voice
- Use gentle, simple grounding questions (How old are you?)
- Ask them questions about their surroundings/5,4,3,2,1
- Get them something to eat, chew or drink
- Get them moving (walk around, throw something back and forth)
- Give opportunities to make choices



Relational Trauma and Relational Repair

- All behaviour is communication: pay attention to what you think the child or young person might be trying to communicate, especially when dealing with challenging behaviour. ('What happened to you?' vs 'What's wrong with you?)
- Make time to listen and acknowledge feelings with empathy.
- Normalise, don't minimise or try to rescue.
- Model self-regulation
- Help the child or young person think about and develop coping strategies to deal with overwhelming feelings (relaxation, exercise, journaling, music, distraction techniques etc)

'Your history of connectedness is a better predictor of your health than your history of adversity'.

Bruce Perry



Case Study



Please take a moment to consider....

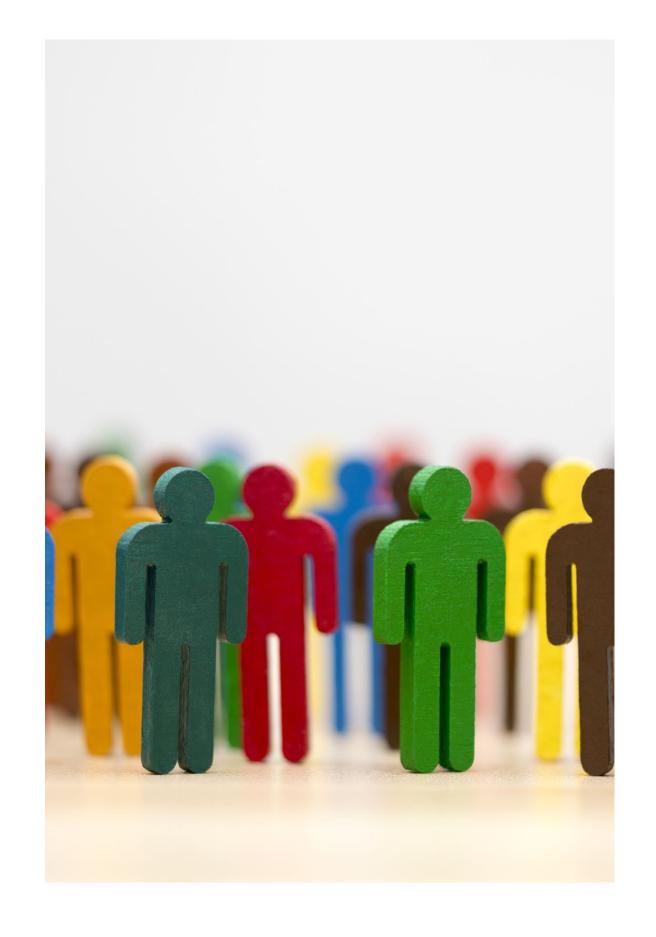
- What might the child's behaviour have been communicating about their past experiences?
- How could your response have helped them to regulate their emotions (considering the 4 Fs of Fears)?
- Private reflection: a personal trigger, and a selfregulation technique that works for you

Key Principles of Trauma Informed Practice

There are 6 principles of trauma-informed practice:

- Safety
- Trust
- Choice
- Collaboration
- Empowerment
- Cultural consideration

"Every interaction is an Intervention" Karen Treisman



Secondary Trauma

This can be an occupational hazard if you work with vulnerable children. The symptoms of Secondary Trauma mimic the symptoms of PTSD. Look out for:

- ✓ Emotional exhaustion
- ✓ Increasingly negative perception of self
- ✓ Depression
- ✓ Anxiety
- ✓ Difficulty eating or sleeping
- ✓ Feelings of hopelessness

Be self aware/Know your limits/Take meaningful breaks/Seek support



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