

Mental Health Promotion for Children and Young People.

Lhara Mullins

National University of Ireland Galway

lhara.mullins@nuigalway.ie

09/03/2017

Before we start...

- This may be emotionally difficult
- We will discuss suicide & suicide prevention
- Self care is key! (resources on last slide)
- My context

What This Workshop will Explore...

- How to identify & support young people to promote their mental health
- Factual case studies to highlight the issue at a practice level
- Methods of suicide prevention

What is Mental Health?

- “Mental health is defined as a state of well-being in which every individual realizes his or her own potential, can cope with the normal stresses of life & is able to make a contribution to her or his community” (WHO, 2015)
- Not necessarily concerned with lack of illness or disability
- Young people can feel sad or low due to life occurrences or issues
- This is cause for concern when this impacts their ability to cope with & engage in their everyday life/activities

Case Study 1

- *John is 15, he has consistently caused trouble in school, is disrespectful to teachers & just doesn't want to be there. John is expelled from school & attends a programme for young people out of school*
- *What supports could help?*
- *What key stakeholders should be involved?*
- *What happened next?*

How Might a Child or Young Person Living with Mental Ill Health Feel?

• Angry

Alone

Frustrated

Confused

Unwanted

Afraid

Hated

Unaware

Hopeless...I felt Hopeless...

That feeling tended to come back often. Hopelessness and I became good friends, long before I even considered that I could have a mental illness diagnosis. It'd sing me to sleep at night, tucking me in with my own hot tears. It'd kiss me goodnight with a knot in my stomach, feeling as if it was keeping me warm by holding me hostage. Hopelessness and I became best friends. And I found this friend sitting on my lap again as I sat in the psychiatrist's office, getting my official diagnosis.

When I went home that evening, I found myself on the computer, researching my diagnosis. I wanted so badly to find something to give me hope. Facebook groups seemed so dark and gloomy. Twitter had nothing good to say, as a celebrity had just had a major lapse with their Bipolar Disorder. Instagram was just moody people posing with knives and pills. Tumblr was worse than that. Finally I even resorted to Pinterest for some hope, and only found pins for some books, but all the ones I saw had typos in the previews and seemed so depressive.

Sighing, I leaned back against the couch and let out a massive sigh, my friend hopelessness entering the room again. I needed to find some hope (Workman, 2017)

Gone with the Wind....

“A stark wind was blowing, whipping hair into a frenzy, scarves lifted to float with the current. A strong burst nearly knocked me, like a wall rushing at full speed in relentless pursuit. At times only a gentle caress, the wind can be comforting and uplifting- creating beauty yet threatening destruction. This force; untamed and ever present, felt yet never seen” (Ashley, 2017).

- Varying typical means of communication may enhance the likelihood of a young person sharing their feelings. Examples?

Stigma & Discrimination

Based on an Irish study in 2014:

- 65% of respondents acknowledge that being treated for a mental health problem is viewed by Irish Society as a sign of failure.
- 1 in 5 would not trust someone who previously had a mental health problem.
- 13% (1 in 8) report they would not marry someone who previously experienced a mental health problem even though he/she seems fully recovered (with a further 19% uncertain)
- Only 54% hold the view that Irish people would willingly accept someone with a mental health problem as a close friend

(St. Patricks, 2014)

Our Own Stigma..

- How many of you have visited the dentist in the past 2 years?
- How many of you have visited your GP in the past year?
- How many of you have taken any over the counter medication in the past year?
- Now if I was to ask: How many of you have taken prescribed medication for depression or anxiety in the past year...
- Or, how many of you have visited your GP to address mental ill health in the past 5 years?
- What is different? Why is this different? Why do we feel this way?

Activity: Stigma & Solutions

- In groups of 4/5: make a list of 5 reasons you may be apprehensive about sharing your own experiences of mental illness;
- Or not seeking help as promptly for mental illness as you would for physical illness
- Pass your list on to the group to your right
- Now brainstorm & come up with methods of overcoming each of these reasons written & share with the class group
- What does this activity illustrate?

Erasing the Divide

- Young people need to know that we also as adults... need to promote our own mental health & address problems if they arise
- Young people feedback: didn't realised that mental illness is something their parent, teacher or support worker may be experiencing
- Discussing mental health as something WE ALL should nurture normalises mental health promoting behaviours

Social Exclusion of Children with Mental Ill Health

2015 study on children's opinions & experiences of peers with ADHD or depression (O'Driscoll et al, 2015) -

Children report excluding peers with mental health conditions due to:

Fear

- They will be excluded too
- Friendship won't be reciprocated

Fear

- They may get into trouble (due to their peer's behavior)
- Their own mental health be negatively effected

Fear

- They may be judged by their peers
- Their peer with a MH condition might embarrass them

What Young People Living with Mental Illness Want from Professionals

- To be listened to & feel heard
- To be treated the same as other children & their parents
- To be present & included in discussions around their care
- To have privacy relating to their mental health
- To have a say in decisions about their care/treatment

You tube Clip Comhairle na nOg Galway

- Experts on young people & mental health?
- We need to listen to young people in order to effectively engage with them in promoting their mental health
- <https://www.youtube.com/watch?v=psHlo8vzy1Q>

Case Study 2

- *Sandra has consistently been an A student. She is the head girl of her school, has lots of friends & is well liked by her teachers. Sandra has decided on the course she wants in college & feels some stress & pressure as the leaving cert approaches.*
- *What supports could be in place?*
- *Does Sandra really need supports?*
- *What happened next?*

Case Study 3

- *Michelle has Aspergers & ADHD. The transition from primary to secondary school has been very difficult for her. Michelle struggles to make friends, keep up with her school work & cope with the practical issues such as queuing in the canteen & getting her books for class. Michelle is becoming increasingly aggressive & threatening toward other students.*
- *What supports might help?*
- *Are there any factors which may present particular challenges?*
- *What happened next?*

Why is Mental Health Promotion Important for Social Care & Social Work?

- Young people in receipt of services have usually been already disadvantaged in some way
- May not have the resilience of their peers
- May not understand their emotions or why they feel so sad/angry/hopeless, distressed
- You may be the first person who has noticed they're not okay, or the first person they felt they could open up to
- This means your role is pivotal in offering support & sourcing additional help for the young person

How Might the Symptoms of Mental Illness Present Young People?

- weight loss or gain
- insomnia or wanting to sleep a lot
- feelings of hopelessness
- disengagement
- lack of interest in activities/hobbies
- self-harm
- aggression/anger
- easily upset
- self-neglect
- confusion
- hallucinations

Risk Factors for Mental Illness

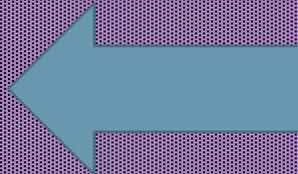
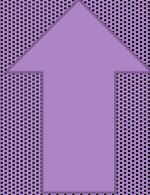
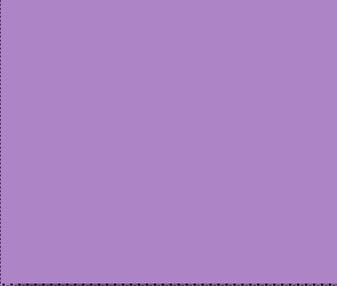
Poverty
Parent with
mental illness
Lack of
parental
supervision

Poor
educational
attainment
Child abuse
Parental
substance
abuse

Poor physical
health
Poor housing
Parental
unemployment
& divorce

Bowen's Family System's Theory

- Each family member influences & is influenced by one another
- Positive interactions result in more positive interactions
- While negative interactions result in further negative interactions
- Intervening to support a young person relating to their mental health must consider the context in which they live & interact everyday (Kerr, 2000)



Exploring & Sharing Family System's Theory

- Supporting parents to support their child & empowering the young person to understand how to improve their mental health
 - May reduce the likelihood of issues reoccurring
 - May provide parents & young person with the theoretical knowledge to understand the dynamics within their own family
 - May enable parents & young person to identify triggers of negative interactions & aim to avoid them
 - Enables practitioners to work in partnership with parents for their benefit & the benefit of their child
 - Supports parents to identify their own solutions
(equally as significant if the young person is in care & not living at home)

Factors Which Promote Mental Health in Young People

- Positive peer relationships
- Consistency in boundaries & discipline
- Motivation to achieve
- Positive mentors/role models
- Social capital: membership of groups, church, employment
- Academic achievement
- Extended family support
- Positive teacher expectations
- Opportunities for exploration relating to: relationships, community, school
- Physical & emotional safety/security

(Canadian Paediatric Society, 2018)

5 Ways to Wellbeing (Mental Health Ireland, 2018)



TALK & LISTEN,
BE THERE,
FEEL CONNECTED



DO WHAT YOU CAN,
ENJOY WHAT YOU DO,
MOVE YOUR MOOD



REMEMBER
THE SIMPLE
THINGS THAT
GIVE YOU JOY



EMBRACE NEW
EXPERIENCES,
SEE OPPORTUNITIES,
SURPRISE YOURSELF



Your time,
your words,
your presence

Activity

- Break into groups of 4/5 (ensure there is a mix of professions!)
- Discuss the following case study:

Alan is 15 & living in a residential setting for 4 months having been in multiple foster placements which broke down. Alan is regularly aggressive with staff & threatens other young people on a daily basis. Alan has been assessed for mental health conditions & no diagnosis has been made to date. One day Alan gives his PS4 to another SU & comes to thank you for trying to help him the past few months.

What are your initial thoughts?

Could Alan's behaviour be cause for concern?

What would your immediate reaction be?

Suicide Prevention: Warning Signs

- Giving away possessions
- Extreme behaviour changes
- Withdrawing
- Severe anxiety
- Engaging in reckless behaviours (driving, alcohol, drugs)
- Obtaining means to act (rope, meds, blades)
- Talking about dying or after they die
- Getting affairs in order (may relate to finances, friends/family, responsibilities)
- A sudden calmness or improvement in mood (may signify decision is made)
- (Turn the tide, 2018)

Retrospective Study on Completed Suicides in Ireland (NSRF, 2012)

- Interviewed family members of people who died by suicide (70)
- Interviewed health care professionals in contact with the deceased person (64)

Retrospective Study on Youth Suicide in Ireland

Consumed alcohol at time of death-35%

<60%-mental health issues in family

Break up/relationship issues

Previous self-harm-45%

Psychiatric assessment prior to death- only 31% of people

Saying goodbye to family & friends

Suicide of a family member or close friend in the past

Over 50% had substance abuse issues

Anniversary of a lost loved one- 20%

What is Your Role in if You Suspect a Young Person is Feeling Suicidal?

ASK

- are you feeling suicidal?
- do you feel like you want to harm your self?

ACTIVELY LISTEN

- paraphrase what they have said
- ensure they feel heard
- acknowledge their pain

ALTERNATIVES

- offer immediate alternatives
- contact GP or Gardai immediately
- remain with the young person until someone else takes over the responsibility

What Alternatives can you Offer?

- Any alternative that will distract the young person from their plan to end their life in that moment
 - will we just take a few minutes to talk things through?
 - could I make contact with your counsellor/parents/a friend so they can offer you support right now?
 - ask about people the young person loves & why they love them
 - introduce ideas that acknowledge the pain, issues & problems but offer the chance to live & overcome this

(Adapted from Asist training-Living Works, 2017)

Activity

- In the same groups as before, discuss why self-care is important when supporting the mental health of young people
- Make a list of barriers to engaging in self-care
- Then make a list of methods to overcome each barrier to self-care

Self Care: The Overlooked Core Competency! (Jackson, 2014)

- Lack of effective self-care reduces your ability to effectively provide care & support to other people
- Supporting a young person experiencing mental illness can be extremely difficult emotionally (calling a spade a spade!)
- You have a moral & ethical obligation to promote your own health
- Your personal life should not be taken over with stress, burnout & emotional distress from your professional life

What Does Self-Care Look Like??

Very individual:
no one size fits
all

Create clear
boundaries (again
this is
challenging)

Take off your
professional hat
after hours

Say NO!

Ask for help

Prioritise your
own physical &
mental health

Examples: professional supervision, peer supervision (may be more readily available), debriefing routines, allocated time for self-care, switching off work phone/not opening emails, writing in a journal.

- Other examples???

Summary

- We need to normalise mental health promotion: change the dialogue-5 ways to wellbeing for everyone
- Recognise signs a young person may be experiencing mental illness & how to best support them
- Recognise signs of suicidal behaviour & how to address the issue head on
- Recognise the importance of self-care for practitioners- if we don't feel well ourselves, it will be more difficult to promote mental health for young people in our care

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Resources list for support/self-care/information

- 3 ts: <http://www.3ts.ie>
- ASIST: Applied Suicide Intervention Skills Training: Contact your local HSE suicide prevention officer (details on HSE.ie)
- Pieta House: www.pieta.ie
- Aware: www.aware.ie
- Mental Health Ireland: www.mentalhealthireland.ie
- Suicide Prevention Ireland: <https://suicideprevention.ie/>
- National Suicide Research Foundation: www.nsrhf.ie/