

Mental Health and the Resilient Therapy Toolkit

Experience in Mind

Written by

Adam, Aiyshah, Amy, Andrea, Carla, Debs, Ed, Emma, Faye, Hannah, Heidi, Jamie, Joel, Kat, Lara, Lisa, Megan, Rob, Rosie, Sam, Sarah, Stella, Tom, Victoria, Zoe

With

Sam Taylor and Angie Hart

A guide for parents about mental health
written by young people

Mental Health and the Resilient Therapy Toolkit

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Angie Hart/Sam Taylor

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Introduction

This book is for any parent or carer who is at all concerned about the mental health of their child.

It is written by young people who have themselves experienced mental health issues, with a little help from a couple of adult friends. It is designed to give parents and carers insight into how young people themselves see their world and the problems they experience. We hope it will help you feel better equipped to offer a safe, supportive environment so that you can fully support your child and their emotional wellbeing. Often parents think they know what young people think, but this book might give you a few surprises about what young people think could help them. If you can get your head around this, it might help improve tricky situations facing you at home.

You might not have thought about mental health before now – perhaps you are just beginning to wonder if your child needs extra support, or you might just be interested to know a bit about what it's all about. Perhaps you are already getting some professional help – it's important that you do if you think that something is wrong. Just as physical illness needs attention and care, however minor, so does mental ill-health. As we explain below, it is more common than you might think and, although not necessarily severe, can be difficult and traumatic for a young person to deal with.

About Experience in Mind

Experience in Mind is a volunteer project for young people aged 16–25 who have had some experience of mental health issues, either as a carer or through personal experience. This is the third resource the young people have written using their experiences. It is the first focussing specifically on information for parents and carers to help you understand how you can be more responsive to your child's needs.

About Sam Taylor

Sam is an experienced youth worker, teacher, qualified counsellor and play therapist who has worked with young people, children and families for 15 years. She has worked closely with the young people from Experience in Mind on the writing of this guide which is the third of their publications. Sam trains and helps young people to deliver mental health training and facilitates creative art workshops encouraging young people to express themselves creatively through art, photography, animations and film. Sam is an active member of the Resilience Forum at the University of Brighton.

About Angie Hart

This guide has been written with help from Professor Angie Hart and we are using her ideas about resilience to frame it. Angie is an academic and a child and family therapist. She works at the University of Brighton and is co-director of Boingboing, a community interest company dedicated to using resilience ideas in research and practice. She has written two other books on using resilience ideas in child and family mental health. Angie has three children adopted from the care system. The website boingboing.org.uk tells you more about her work.



Section 1

Mental health and resilience

What is mental health?

Mental health is a part of every person's life, just like physical health is. But when mental health is mentioned, it is not uncommon for people to focus on the negatives, thinking of mental health only in terms of problems and disorders. However, mental health

encompasses positives too – feeling happy, confident, and connected to others are all mental health issues and vital for our wellbeing. Generally, a person's mental health relates to how they think, feel and behave in everyday life, especially in regards to the ability to enjoy life and bounce back from setbacks.



Problems with our mental health are more common than you may think: it is estimated that one in four people will experience some kind of mental ill-health issue in the course of a year. The causes of such issues can be complex, and the effects can last for a short or longer period of time. Many people cope with mental health issues but do not have a diagnosis or a label for their condition. This does not mean their issues are any less real than someone who does have a diagnosis.

Some mental health issues you may be aware of are:

- depression
- anxiety
- eating disorders
- self-harm.



Mental health and young people

Young people (we're talking 11–25-year-olds) are exposed to many situations that can affect their wellbeing and contribute to a mental health issue. The life-changes experienced during this time can be difficult and confusing. There are many transitions to be made that go beyond the physical changes that come with adolescence – leaving school, finding a job, leaving home, first relationships/break-ups, starting university, discovering sexuality.

Transitional times can be hard for young people, and having a loving and supportive family can provide them with a safe base from which to explore their new world. It is natural for young people to want to act independently from their parents, but they will need to seek advice sometimes. Having an open and honest relationship with you, the parent or carer, can make a real difference. When all topics are up for discussion and there are no taboos within the family, any concerns the young person has can be raised without fear of judgement. They can be sorted out sooner rather than later (or not at all) and hopefully prevent the problem from growing and getting worse. Research has shown that young people who feel able to talk openly with their parents generally have lower rates of depression, drug or alcohol abuse, and teenage pregnancies (among other things).

But it's crucial to do the talking at the young person's pace. Forcing them to talk about issues before they are ready may make them feel threatened; they may not want to talk if too much pressure is put on them.

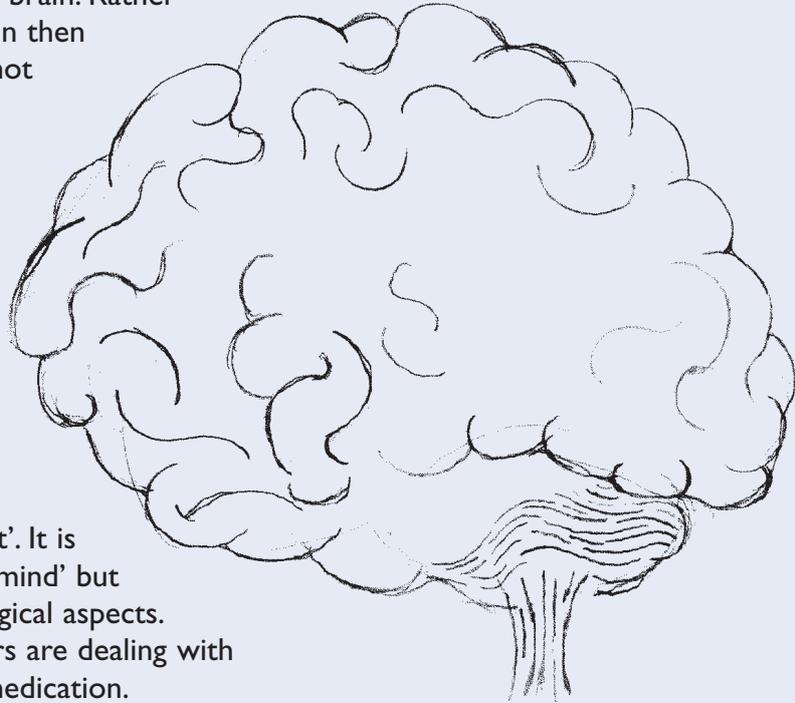
It is completely normal for parents to find it difficult to cope with this transitional time in a young person's life. Parents sometimes feel anxious and depressed themselves because they think they cannot help or 'get through' to the young person. Building up your own resilience (the 'bounce-back factor') can help enormously with your ability to help your daughter or son. By taking care of yourself, you are better equipped to take care of others. Section two discusses resilience in greater detail, and section three gives details of how to get support for yourself.

It is not surprising then that rates of mental health problems among children increase as they reach adolescence, and certain mental health issues typically arise during this transitional period. Anxiety and depression are the most common problems to affect young people. Eating disorders are also common among adolescent and young women (although the number of young men seeking help for eating disorders is increasing), with the peak age being 16. In the UK it is estimated that ten per cent of under-18s have a mental health problem that is severe enough to interfere with their day-to-day life, and half of these will have a clinical diagnosis of a mental health disorder.

The brain and mental health

Our brains are amazing things. They allow us to live, to think, to problem-solve, to create things, to decide what we want for lunch, to see, to hear and so many other functions. Sometimes they can work slightly differently and mental health problems can appear. However mental health is not the result of a 'broken' brain. Rather it is more that the brain then works differently and not to its full potential.

It is important to understand the possible biological factors in mental health. If you have a headache, you can't just 'snap out of it'. Similarly, someone with depression or anxiety can't just 'snap out of it'. It is not simply a 'frame of mind' but has chemical and biological aspects. These are what doctors are dealing with when they prescribe medication.



The brain is made up of 100 billion neurons, which act like wires, taking information around our brains and to various parts of our bodies. It also has different areas (lobes) that have their own specialised jobs but which work together and interact. Important to the brain's function are certain chemicals. Too much or too little of these can cause mental health problems.

However, other factors such as our genetic make-up and how we have been brought up also come into play – the development of our brains depends on our genes and our environment. This is the basis of the nature/nurture debate which we often hear about. What makes us who we are? Is it our inherited material that is part of us from the womb? Or are we shaped by our environment and what happens to us as we grow up? Most likely it is a combination of the two. Resilient Therapy, used in this book, can help with the many environmental issues that affect our mental health.

An introduction to Resilient Therapy

In this book we use a set of ideas, developed by Angie Hart and colleagues, known as Resilient Therapy, to help you think through how best to support your child. The young people writing this book have found these ideas useful. Resilience is about understanding and supporting children and young people to do better than you might think they'd do given the tricky circumstances they face as they grow up. Resilient Therapy has a framework that we think you will find useful in planning what to do with your child. This book guides you through this framework, and give you ideas about how to use it. But first we take more of a look at the idea of resilience.

Have you ever wondered why some kids do better than others given very similar circumstances? There is lots of research all about this (see *Resilient Therapy: Working with Children and Families* by Angie Hart, Derek Blincow and Helen Thomas, published by Routledge) and it makes sense to use what we know to think about ways to help young people with mental health difficulties do as well as they can. What we call the 'Resilient Therapy toolkit' puts together lots of ideas on resilience so that people can use it to help their individual situation. Hopefully you'll find it useful as a parent as you make your journey forward helping your young person move on.

Resilient Therapy can help a child bring about changes that makes their lives more fulfilling and enjoyable. It encourages your child to have long-term strength and to have the capacity to bounce back from challenges or to deal with trauma. Looking at Resilient Therapy in relation to your own life can also support you as a parent. (If you want to know more about how to do that, take a look at *Helping Children with Complex Needs Bounce Back. Resilient Therapy for Parents and Professionals* by Kim Aumann and Angie Hart, published by Jessica Kingsley). In this guide we draw on that book which is written by two adults with lots of experience of using Resilient Therapy, one of whom thought up the idea. Kim Aumann is a practitioner supporting parents. Angie Hart is an academic, a parent of children with complex needs and a practitioner herself. Alongside Sam Taylor, an adult who facilitates *Experience in Mind*, Angie Hart helped write this book and has helped us understand Resilient Therapy. Writing the book has been a very creative process, and it's quite unusual to see a book on mental health written by young people in collaboration with adults. We haven't always agreed on exactly what to say and how to say it, but Sam and Angie have tried to give the final word to the young people. The end result then is that it really is written from their point of view, and they have got to grips with Resilient Therapy and how to apply it.



So, out of all the many theories and frameworks that we could choose as the basis for this book, why we have chosen the Resilient Therapy framework?

First, Resilient Therapy focuses on what we can do, rather than what we can't.

Writing this book and learning about Resilient Therapy has helped me work through some of my mental health issues and see them in a different more positive perspective. I can now see how my family can help me make changes that can actually help.



Second, Resilient Therapy is an approach which gives young people and their parents a lot of knowledge and power over what they might like to try. This might seem surprising given that the authors call it a therapy. Don't professionals do therapy, not parents? Well, the authors of Resilient Therapy are reclaiming the word. They see therapy as a hands-on thing that can be done by anybody, not just professionals. You've probably heard of retail therapy. Well, anyone can indulge in a bit of that, especially if they're stressed out with parenting. But Resilient Therapy might be a better therapeutic solution. And it won't break the bank.

Writing this book has helped me realise how difficult it must be to be a parent who is experiencing mental health problems. I feel so grateful that they supported me especially through the difficult times.

Sometimes we can feel like we're being taken over by professionals with their appointments, complicated jargon and different diagnoses. Resilient Therapy includes some of the more formal therapies, but is quite empowering because it shows all the different things you and your child can do to improve their situation. It doesn't just rely on professionals taking over. It uses a whole-person approach that looks at all aspects of life. It is called Resilient Therapy because it is not just about professionals changing things – you, your family and your child can also have a great effect.

From writing this book I can see how me and my family can make a difference and can make positive changes. It's good to see that my family can be as powerful as professionals and often they know me more because they have known me all my life.

Third, Resilient Therapy draws on a lot of research on these issues and what helps. As someone's done all that work so we might as well use it!

Finally, Resilient Therapy helps you focus on carrying on with life. It doesn't diminish or dismiss your child's mental health issues, but it does offer ways of dealing with and coping with family life while you are also dealing with your child's mental health problems.

When your child has mental health issues it is easy to just focus on that – to see only your child’s self-injury or their eating disorder. Your child’s mental health issue becomes the centre for all of family life’s stresses and worries. Hopefully, using the Resilient Therapy toolkit will encourage and help your family to develop a safe and calm home-life that is as stress-free as possible for everyone. For example, we know from the resilience research that sometimes you can be doing something that seems completely unrelated to your child’s mental health difficulties, but that can actually help them get better. For example, finding an interest could help your child find more meaning in their life.



In a book that Angie Hart has co-written, the authors describe Resilient Therapy as being about ‘the kinds of things we need to make happen: events, parenting strategies, relationships, resources, to help children manage life when it’s tough. Plus ways of thinking and acting we need for ourselves if we want to make things better for children.

Resilient Therapy is about energy, commitment and perseverance. It is also about attention to detail and improvements in little things that can make all the difference.

It can include increasing feelings of security, building self-esteem, promoting competence and working towards a range of modest personal goals that reduce the risk of more severe mental health problems, all because you are more resilient. Resilient Therapy can also help you as a parent increase your child’s ability to respond resiliently to life’s challenges.

Resilient Therapy uses two ideas that we will return to later: turning points and chain reactions.

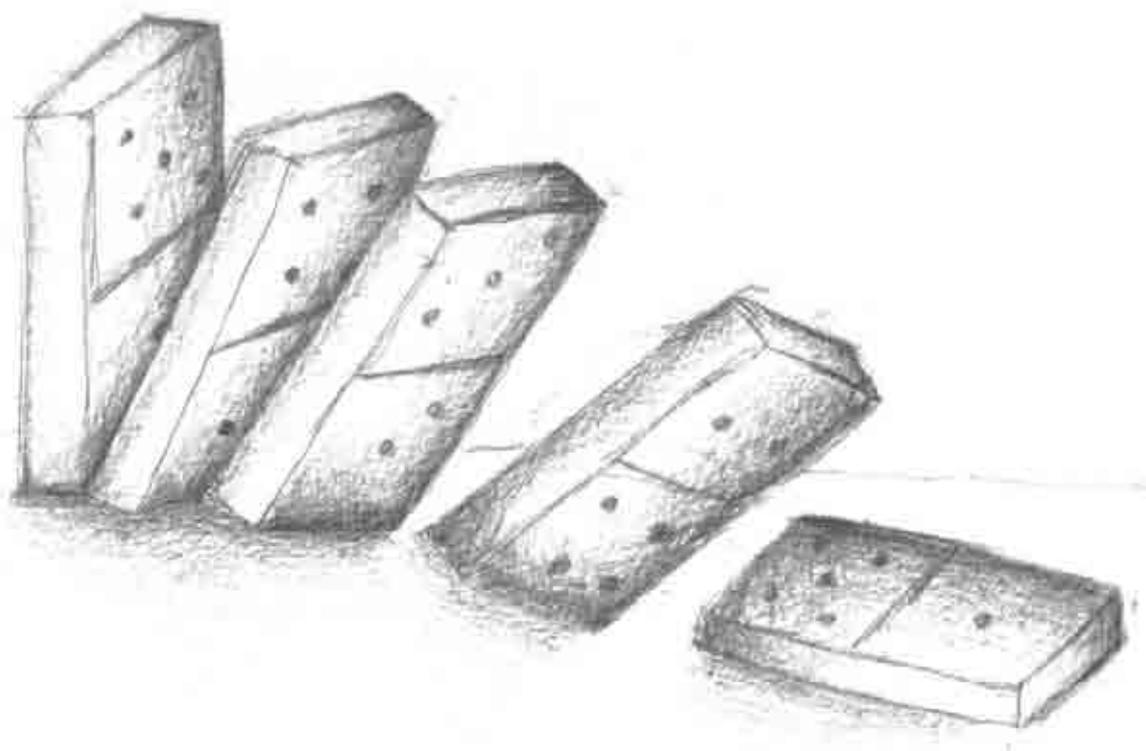
A turning point is an event in a person’s life that is important because it sets them off on a different path and their life subsequently takes a different course. Turning points can be deliberate but also include events over which the individual has no choice. Resilient Therapy encourages positive turning points. For example, a young person choosing to speak to a doctor about their secret mental health issue can be a turning point in their life. For many of the young people in the Experience in Mind project, taking the step to volunteer has been a turning point.

A chain reaction is a series of events, each one triggered by the one before. Resilient Therapy is all about avoiding negative ones and encouraging positive ones. For example, an argument at home might lead to skipping school, poor exam results and more anxiety (negative). But the same argument, handled differently, could lead to better understanding, a discussion with teachers, better performance at school and a happier person (a positive chain reaction).

Experience in Mind has helped me believe in myself. I have learnt how to deliver training about mental health issues and the group has helped me find a place where I feel that I belong. I have met people who have gone through similar experiences to me. We mentor each other through the difficult issues that we are experiencing.

Before I started volunteering for Experience in Mind I was so depressed I never wanted to leave the house. I believed that no one understood what I was going through and then I started volunteering which was a real turning point for me. The project is a safe place where I have been encouraged to turn a bad experience into something good and it has given me a reason to get out of bed every morning.

By using this book you could help your child to foster such positive chain reactions.



Resilient Therapy and the ‘noble truths’

Earlier we mentioned that Resilient Therapy has what we think of as a toolkit. Underpinning this toolkit is something called ‘noble truths’. This is the name given to the underlying beliefs and values that are important to make Resilient Therapy work. This doesn’t mean they are easy to achieve, but they are principles to strive for and return to when things get overwhelming.

They are:

Acceptance – when you recognise that you are a good enough parent and that you can accept your child’s or your family’s current situation. It is important to fully acknowledge how you, your child and your family is feeling and try to realistically assess your situation, unconditionally believing you are a good enough parent and your family is dealing with the situation as best they can. At the same time it is important to acknowledge that as a parent and family you may need some outside support.

I used to cut my arms on a regular basis. When my mum first found out she was very scared and shouted at me and said I was stupid. I then continued to self-harm but in secret. Then my doctor referred me to the mental health service and I started seeing a counsellor. The counsellor spoke to my mum and supported her as well as me. The counsellor helped my mum understand and not be so scared of what was going on for me. The counsellor said that self-injury is like having a cold and it couldn't be easily stopped or prevented. My mum started to look at it differently from then on. My mum, through the support of my counsellor, no longer ignored it or told me not to do it. She acknowledged it and this made me feel ok about it and I felt more supported. Slowly, with the support of my mum and counsellor, I self-harmed less.

Conserving – when you hang on to (conserve) things that are good, noticing the growth and change in your child's progress and focussing on the things that work well; building simple routines into your daily schedule that help you capture little successes and verbally recognise positive experiences in your family life.

Since I was diagnosed with bulimia, I've been through some really hard times with my dad. It hasn't been easy but my relationship with him has been great. I talk to my dad frequently and he is an excellent form of support. He constantly reminds me of how far I have come and how different my life is now. One of the things that is helping me recover is knowing I have regular times when I call my dad. Also I know if I am feeling really bad he will come and pick me up. I know he will always be there and I can speak to him about my anxieties and worries as well as talk through what's been going on in my head. He constantly reaffirms to me how well I am doing and this encouragement and support is what keeps me going. His belief in me helps me believe in myself.

Commitment – acknowledging the continual commitment that you as a parent have to your child and family and hanging on in there and being consistent; sharing trusting relationships with your child and having reliable and predictable contact while maintaining that balance between over- and under-involvement in your child's life. This is really important, especially when your child is recovering from a negative mental health experience. It is important to promote and encourage your child to make independent decisions while also knowing that as a parent you can provide a safety net when things don't work out.

My parents are really supportive. Their support and commitment has really helped and been part of my recovery from anorexia. I remember when I was really ill they both stayed with me in hospital and have come along to all the appointments with professionals and other services. I feel like I can talk to them about anything and they can really empathise with me. At first my parents wanted to keep me close to them at all times and they weren't very good at encouraging me to be independent, but now they encourage me to make decisions for myself.

It is important that I can make decisions for myself and be independent from them. I know that no matter what happens they are there when I need them, especially when something doesn't work out. What is really good is that they don't judge when I make mistakes. They know it is important that I learn from my own experiences and they are there to help me learn from my own mistakes.

Enlisting – realising you can't do it all on your own, enlisting the help of others. Encourage a community of people around you who appreciate and value the effort that you and your child are making. Surround yourself with people with authority, professional status and expert knowledge to help you and even act on your behalf.

When I found out I suffered from bi-polar disorder my parents were completely lost and didn't know what to do. After trying to struggle with it on their own my dad phoned the local youth advice centre. He got some numbers for organisations that could give me and my family support. These included a support worker and a peer support youth group for me, and a family mediation support group who could help with basic stuff like applying for money to support me as well as how to deal with and understand more fully my disorder. My auntie is also around to give us all support. I know that my dad talks through things with her regularly and she is someone I can talk to. My mum has a best mate who works in the mental health field and gives my mum tips if they are going through a hard time. I think it is great that my parents get support because I feel less worried about them and how they are coping with it all. It means I can focus on me and I know that I will eventually and slowly get better.



Young person Lara illustrates the noble truths through a description of her relationship with her mum

When I first started having problems, I didn't know what was happening to me, so I found it hard to put it into words. I wrote a list of what I now know to be symptoms of depression and anxiety and handed it to my mum. She promptly told me that if I was feeling all that, I should not be able to function. Looking back, she was probably just scared or didn't want to think that her daughter was feeling so awful about herself and the world.

A lot has changed since I handed her that paper. I wouldn't say that our relationship is perfect, nor that we don't have our moments, but we've both come along way together. She is the main person in my support network now and I feel I can talk to her any time I need to. Although she may not always understand she will always listen, and really listen, not just hear but also understand what I am saying.

Acceptance

My mum has now accepted my depression and anxiety. Accepting was a starting point for us having a good relationship. She could accept exactly where I am right now. It was good she accepted the situation even though it all must have felt very daunting. Often I feel like she is in tune with me and she is warm and understanding.

Conserving

It is really good to have that. Even when I don't feel like talking we will sit together, and do things to keep me occupied. I remember many a night when she sat up with me doing jigsaw puzzles until the early hours of the morning, when I couldn't sleep.

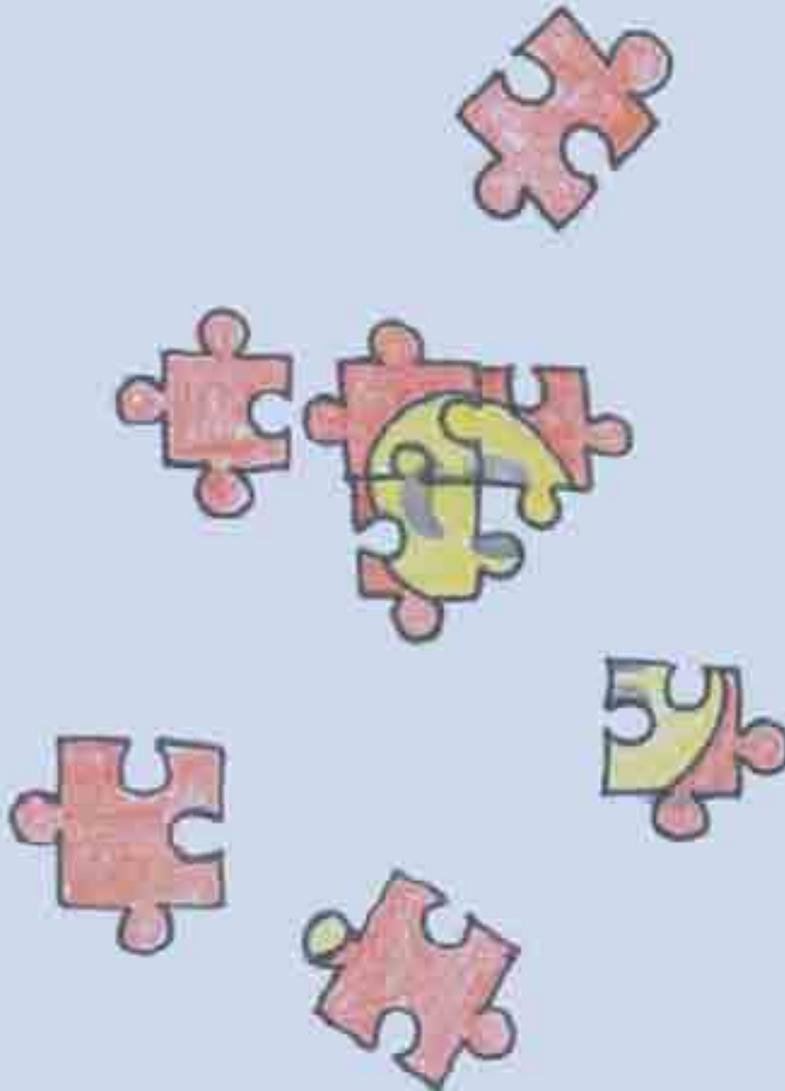
When I feel particularly ill my mum makes sure she creates a safe space for me just to be in with her. My mum is consistent and reliable and I feel like she can support and just be with my difficult emotions. We do things that we like doing together and that gives me a focus and structure and I end up feeling better.

Commitment

I guess we both had to learn more about what was going on for me, before we came to a system that works for us. Just knowing that they are there for me really helps, even though they can't make it disappear. Communication doesn't always have to mean talking – she can now often tell when I'm upset or needing support and will be there to offer it if I want help. Equally though, she knows (most of the time) when to give me space, and just let me ride it out. I know that my mum is a reliable, constant form of support. It is great that I can tell my mum anything and that I can just say anything and she will stay calm and cope with it.

Enlisting

My mum has also been great at getting support for me. She is very good at recruiting others and making sure I get the right professional help. My family are very supportive and I have a great psychotherapist as well as regularly going with my mum to appointments to the child and mental health team. My mum is very good at speaking up for me.



The Resilient Therapy toolkit

Resilient Therapy uses a toolkit with five themes:

- basics
- belonging
- learning
- coping
- core self.

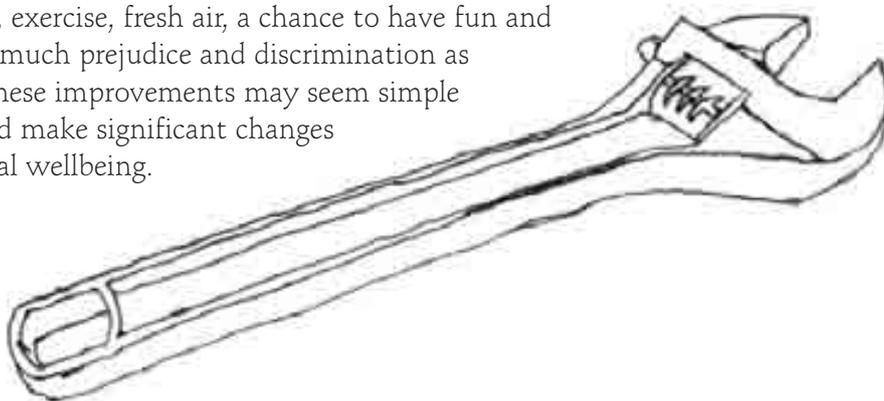
Within these themes there is a range of possible things to do and try to become more resilient. Some suggestions are borrowed from other therapies and some are new ones. Think of the toolkit as a box of pick-and-mix ideas which can be used to strengthen your child and help build your child's ability to respond to life resiliently.



When trying to apply the toolkit, it is important to always work with all the noble truths in mind. The different aspects of Resilient Therapy are not designed to be used as a step-by-step guide one after the other – they can all be called upon when needed and several can be used at the same time.

Basics In order to encourage your child to be more resilient it is important that the basic necessities needed for life are put in place and maintained. This means making sure your child has a good night's sleep, a safe happy home environment, a healthy diet, exercise, fresh air, a chance to have fun and a life as free from as much prejudice and discrimination as possible. Although these improvements may seem simple or obvious they could make significant changes to your child's mental wellbeing.

Belonging is an important aspect of resilience-building. When a child has good relationships in their



life, and they belong to a group that accept them as they are, this helps your child create a good sense of self and identity. Parents can help by trying to encourage good relationships with friends, family and others. It is important your child has somewhere they feel that they belong (clubs, activities, school, relationships with animals, and a favourite place) and that they meet people who are good influences, who help them make a sense of where they come from and their place in the world. It is really vital that your child finds something they feel good at, an activity or a talent, a way of expressing themselves, be it sport, music, writing, looking after a pet... it can be almost anything. The important thing is that being part of a group where they do or talk about this activity can have a positive effect.

Resilient Therapy Toolkit

Basics – the basic necessities needed for life

- Good enough housing
- Enough money to live
- Being safe
- Access and transport
- Healthy diet
- Exercise and fresh air
- Playtime and leisure
- Being free from prejudice and discrimination

Coping – helping children to get by in everyday life.

Help child to:

- Understand boundaries and keep within them
- Be brave
- Solve problems
- Put on rose-tinted glasses
- Foster their interests
- Calm her/himself down, self-soothe
- Remember that tomorrow is another day
- Help child to lean on others when necessary

Learning – learning not only includes school education, but also helping with their life skills, talents and interests

- Make school life work as well as possible
- Engage mentors for children
- Map out career/life plan
- Help the child to organise her/himself
- Highlight achievements
- Develop life skills

Belonging – helping a child make good relationships with family and friends

- Find somewhere for the child to belong
- Tap into good influences
- Keep relationships going
- The more healthy relationships the better
- Take what you can from any relationship where there is some hope
- Get together people the child can count on
- Belonging involves responsibilities and obligations too
- Focus on good times and places
- Make sense of where a child has come from
- Predict a good experience of someone/something new
- Help child make friends and mix with other children
- Help child understand her/his place in the world

Core self – working to shape a child's character

- Instil a sense of hope
- Teach the child to understand other people's feelings
- Help the child know her/himself
- Help child take responsibility for her/himself
- Foster their talents
- There are tried and tested treatments for specific problems, use them



See also Appendix on page 100

Learning is a fundamental part of your child being able to function successfully in the world. Helping your child develop talents, interests and life skills, encouraging them to learn how to cope, how to express their emotions, understand boundaries and have aspirations, are crucial parts of helping them become more resilient. Helping your child have life plans, visions, and getting organised allows them to develop new skills that are an essential part of them increasing their learning.

Coping helps your child build up a particular set of skills to help them with the challenges of everyday life. Encouraging your child to cope helps them develop a sense of bravery, an ability to solve problems, to stand up for their own views and beliefs, foster interests and make themselves feel better. One good way of coping is making sure that, as a parent, you are surrounded by a good community of support.

Core self is when, as a parent, you help your child build an understanding of who they are and their own personal strengths. Encouraging your child to put themselves in other people's shoes and be sensitive to how other people feel can help raise awareness of how they feel and how their behaviour can affect other people's feelings. It is important to help them be self-aware and take responsibility for themselves and their behaviour towards others while at the same time believing in them. Help them try out different things and they may find something they are talented at. Also be open to exploring with your child the benefits of support outside the family, such as therapies and medication.



How can a parent or carer help?

This section uses the Resilient Therapy toolkit to show examples of positive practice from parents and carers. All the examples come from young people from Experience in Mind, either drawing upon past experience or from what they feel would have helped them with their mental health difficulties. Though there cannot be a definitive guide on how to help a young person with mental health issues, all of the following pieces of advice have been developed and refined through consensus. They should not be seen as rules as such, but many people have found them very helpful.

Basics

In order to encourage your child to be more resilient it is important that the basic necessities needed for life are put in place and maintained.

Good enough housing

My mum suffered from depression and sometimes couldn't get out of bed. We didn't have any money and unfortunately the house needed lots of repairs. In my bedroom the guttering would leak and make my room all damp. That made me feel even more depressed. It was really horrible and my mum didn't seem to notice.

Children need a decent home environment. Never underestimate the impact housing can have on family life. You might not think what's happening affects your child, but you may be surprised. If your home is a difficult place for your children to live in, try to make it safer or more accessible for your children. Make your home a sanctuary.

Enough money to live

Growing up I lived with my brother and dad. My dad suffered from bi-polar disorder. Most of the time he was real fun and we always did lots of exciting things. But the consequence of that was that we had no money. He would rack up credit card bills and not pay them. I had to deal with bailiffs knocking on the door and try and budget whatever money we had for food and bills.

Money can make a difference not only to family quality of life but to your own stress levels. Managing money is quite a skill which doesn't come naturally to all of us. So if you're one of those people who find it hard to sort out your finances, remember that all kinds of people get into debt for lots of different reasons. But whatever the reason, there are steps you can take to deal with it.

Being safe

I know my parents really love me and supported me through recovering from an eating disorder. One of the hardest things my parents found when I was recovering was to trust that I would be ok. I had to tell them they had to let me make mistakes and that they couldn't watch over me all the time. My parents listened and although they found it hard at first they slowly allowed me to be more independent.

Being safe is about helping children to let go of having you around all the time and learning to manage the risks of being in the big wide world. It can be like a tightrope for parents sometimes. Pushing children to try things out when they're ever so anxious might put them off trying at all. But wrapping them in cotton wool doesn't do them any favours either. And taking a laid-back view about what they do and where they go can leave them not knowing how far they can go (without 'boundaries') and vulnerable. Of course there is a balance to be struck. Planning for risky situations with them and going over things afterwards to spot what went well and what they could do differently next time can reassure you as well as your child.



Transport and access to places and things

I suffer from severe depression. I live out of town and have to rely on getting a bus into town and to places. Unfortunately I used to be really bullied on the bus by schoolgirls and this has made me really anxious about getting the bus. I have to be really careful what time I get the bus and if I think that I am going to get bullied I don't get on the bus I just go back home.

When you have a child who is suffering from a mental health issue this can be a challenge as well as making it hard to get to appointments. Travelling can be exhausting, emotionally draining and expensive. So it is worth exploring the help that might be available to make getting out and about more manageable.

Healthy diet

When I am feeling depressed it is really hard getting myself to eat properly and I know that if I don't eat properly then this can make me feel even more depressed.

Food is very important to your child's wellbeing – it affects their moods, behaviours and their ability to learn. Providing food for our children is often a big part of us feeling like good enough parents. Examples we set with our own eating habits can have quite an impact because children's eating habits are often programmed in an early age.

Exercise and fresh air

Running, for me, has turned my life around. I used to feel so stressed and overwhelmed by everything. Then I started running regularly and it made me feel so much better.

Sometimes when everything gets too much and I feel like I need to self-harm I try to take myself out of the house. I walk in the park and then go and sit on my favourite bench. I find the fresh air and different surrounding helps me see things differently and I feel a lot calmer too.

I sometimes go to the allotment with my foster dad. It is so relaxing and I love watching how things grow. It is also special time just for me and him.

Children today spend more time doing inactive things like playing on their computer games, texting on mobile phones and watching TV. Regular exercise can be brilliant for children. It can improve their mood (because it stimulates the chemical serotonin which makes us feel happier and less stressed). It's also a chance to meet up with friends or make new ones, forget about the stresses of school and even build a sense of achievement.

Playtime and leisure

When I was revising for my GCSEs I was so stressed out I didn't want to see anyone or do anything apart from revise. I remember my mum had to lock away my books and make me go out with friends to play football in the park.

Play and free time is an essential part of growing up for all children. Access to open spaces, free play and leisure opportunities help improve young people's wellbeing. It enriches their development in all sorts of ways – socially, physically, intellectually, culturally and emotionally.



Being free from prejudice and discrimination

I used to get bullied by school kids on the bus. This made it hard going to school. If I couldn't get a lift with my parents then I would refuse to go. They thought I was just being difficult and lazy.

Talk to your child about prejudice and discrimination. Showing your child you want to listen to them can make a big difference. They need to be reassured that telling you is the right thing to do, that you won't get too angry or upset, and that you will support them. Help them think about ways they can deal with difficult situations. Coming up with their own ideas about how to feel safe is a very resilient thing to do. Also find ways you can build their confidence, doing things they like and with people who like them.

A young person's experience of the basics – Faye's story

I remember as a young child my parents never spoke or communicated with each other. Both my mum and my dad were severely depressed and shut off. As you can imagine, at home everybody lived in separate rooms and as a result my childhood was extremely lonely and isolated.

Good enough housing: the family and home environment can really affect your child's mental health. Make your home a sanctuary and as stress-free and calm as possible with fun activities.

Often I lived alone in my bedroom and retreated from the world, reading books and drawing. I also had to feed and take care of myself. I remember being very small and very hungry and searching through food cupboards that were very easy to reach and close to the floor. Consequently I ended up living on a basic diet of chocolate and crisps.

Healthy diet: it is really important for your child's mental health that they eat properly. Eating habits are formed early in life, and a good diet will help them with their wellbeing and mood.

As I grew up the lack of communication and intimacy I shared with my parents affected my self-esteem. This also made me an easy target for bullies. I remember when I was seven crying and shocking my mum by saying that I was bullied because I was ginger, overweight and wore glasses.

I found primary school to be a horrific place. I used to get punched in the stomach, smacked and shouted at. I hated school and stopped going. By the time I was nine I was agoraphobic and school phobic. I was constantly bullied and isolated. I felt numb, sad and low. I wouldn't say that I was depressed but then I didn't know what depression actually was.



On the whole the teachers didn't know how to deal with it. Often they ignored the bullying. My mum confronted the teachers and there was a meeting with me and one of the main bullies but the meeting was never resolved and after the bullying just continued.

Being free from prejudice and discrimination: Faye's mum did try to get the school to stop the bullying but more needed to be done. As much as possible try to make sure your child lives in a bully-free, safe environment and this will build their confidence and self-esteem.

The irony was that although I could never concentrate and learn anything at school due to fear of being bullied, I would often would do well in class work and tests because I was clever. I used to get 100 per cent in spelling and English. This was because I would spend all my time alone reading, it was my escape. Reading was a form of salvation.

This shows how a negative chain reaction can change into a positive chain reaction.

When I went to secondary school my life finally got better. The school had a really good pastoral support system and I was fully supported. I felt safe at secondary school and slowly my confidence increased. Also my home life became better. My dad moved out and me and my mum got support family support.

I also joined a young carers project which was a real turning point in my life. I could have fun with other young people and not worry about looking after my mum or Dad. I went on trips with the group such as to the cinema, ice skating and swimming. The group had pizza and film nights and we also made things. We had workshops about what it's like to be a girl or a boy and other things like that. The workshops were done in a fun way and we had a laugh while learning about things. I love going to the group and felt safe enough to be myself because people were there to support me and accepted me for being me. I could listen to other young people's experiences and realise what I was going through was similar to their experiences. I could understand that it was not my fault and that I was not to blame for things that had happened to me.

Play and leisure: Faye going to the young carers group was a real turning point in her life. Going to the group allowed her to have free time and play because as a carer Faye did not experience this at home. Having somewhere safe to go and something to do is part of the business of building a child's resilience because it's about increasing their skills, confidence and self-esteem.



Belonging

Parents can help by trying to encourage good relationships with friends, family and others.

Find somewhere for the child to belong

Remind them that you love them, that you always will, and that you will be there for them always. Truly listen to what they are saying; it's all too easy to dismiss someone's genuine feelings as being "just part of their illness". Always do your best to hear them out, as even if you do not agree it may be very much appreciated, and allow them to get their feelings off their chest, to lessen some of their feelings of loneliness and isolation.

As a parent you can always help improve your child's sense of belonging. Forming a strong bond can help your child feel protected when they are feeling vulnerable.

Tap into good influences

I regularly go to Rasp (Refugee and Asylum Seekers Project). It's a place where I feel completely accepted and belong. I can have fun and talk to other young people who understand me. We listen to different cultural music, make things and are respectful of other young people's cultures. There is a gentle, safe respectful atmosphere. I love it and feel that at last I can be myself.

Tapping into good influences is about identifying and encouraging others to take a role in your child's life. Having role models for your child can provide them with support and back-up in addition to what you offer. They might be people your child already knows like teachers or club organisers or people you seek out or befriend. What these people have in common is that they are a role model for how to do and say things, because they are liked or looked up to by your child.

The more healthy relationships the better

I have a cat called Pebbles. I talk to him when I am feeling sad. Pebbles seems to understand. He cuddles me and seems to listen. He's a real comfort to me.

I used to go next door and spend hours with our neighbour. She wanted me to call her auntie. We would watch Count Down together and eat biscuits as well as help out in her garden. I was going through a really rough time and after school I didn't want to go home and be on my own. I never talked to her about it and she never asked. It was a place where I could go and we would keep each other company.

It is important to increase the number of good influences in your child's life, so they outweigh the bad ones. Pets are uncomplicated, straightforward and honest. Animals keep secrets, they don't tell you off, and they don't make fun of you. Also our children's relationships don't all have to be deep and meaningful. Low-key ones can have a good effect and be significant.



Take what you can get from any relationship where there is some hope

I know my mum is not sure about me going to the Experience in Mind group and talking about mental health issues. She is worried I will get all gloomy and depressed but she also sees it's good that I am getting out of the house and that I have an interest and a purpose as well as somewhere I can go and feel I belong.

While you might need to make a leap of faith to believe that there is potential in relationships that seem quite negative, it's worth giving them a go if you want to take up every opportunity to positively expand your child's network.

Get together people the child can count on

My dad has been brilliant at sorting out a group of people who can help me with my schizophrenia. They are like this small army.

The idea here is to get people who can help and support you and your child to get connected. It's important to present a united front and to communicate as a network, agreeing on a good plan of action.

Belonging involves responsibilities and obligations too

A big turning point for me was when I started volunteering for the youth council. Being a volunteer has helped me feel more responsible and able to do and achieve things. I am responsible for organising and delivering training. I like the fact that I have responsibility and that people can take me seriously and believe in me.

It's good to start children off on a path that sees responsibility and obligation as a central part of belonging. Children who have appropriate roles and responsibilities, including running errands and doing odd jobs, have a good chance of developing positive self-esteem and a sense of being able to make their own mark on what happens in the world.

Focus on good times and places

With my auntie I made a happy box. It is a shoe box which I decorated and then I have put lots of pictures of good times, things that smell nice, some Playdough that feels nice, a cuddly toy and little miniature figures that make me feel happy. I get this box out when I am feeling down and it somehow helps me see that there is some hope and that life is going to be ok.

It is important to develop rituals, family customs and ceremonies with your children. These are not only helpful at the time. They also serve as a record of good events that have happened and you can revisit them in later years. They are a reminder that, despite the difficult things, there are lots of good things too that shouldn't get buried under the misery. Bottling up good experiences can help children reconnect to people in their lives who have had some degree of healthy relationship with them.

Make sense of where a child has come from

Talk to your child about their mental health issues. It may seem that you are hearing the same conversation over and over, but building an understanding of how your child is feeling can bring you together in a difficult time, and help you to recognise when things are beginning to get better. Empathy is crucial.

Writing for this book has really helped me. It has helped me write my own story. It is my narrative and it helps me get out of my head all sorts of things I have been going through and to see where I am now.

Help your child understand their history. Sharing stories with trusted adults builds resilience. It develops connections and a shared account of things.

Predict a good experience of someone/something new

My dad phoned up Experience in Mind and found out all the information possible about what the project does and how I can get involved. He came with me and stayed downstairs at the first session. He got all the information about the project beforehand and talked to me about it and this made me feel safe as well as ready to take that risk. It was great he supported me and helped set this up for me. Now I go somewhere I feel I belong and have a new interest and new friends.

Helping children to take the risk and try new things requires loads of flexibility on your part: plan it, do it, quiz it – to see if you can identify what works well and not so well.

Help your child make friends and mix with other children

My mum really welcomes my friends and she invites them around to watch X Factor and makes us cups of tea. She knows how important it is for me to have friends especially when before I was so low I never left the house and saw nobody.

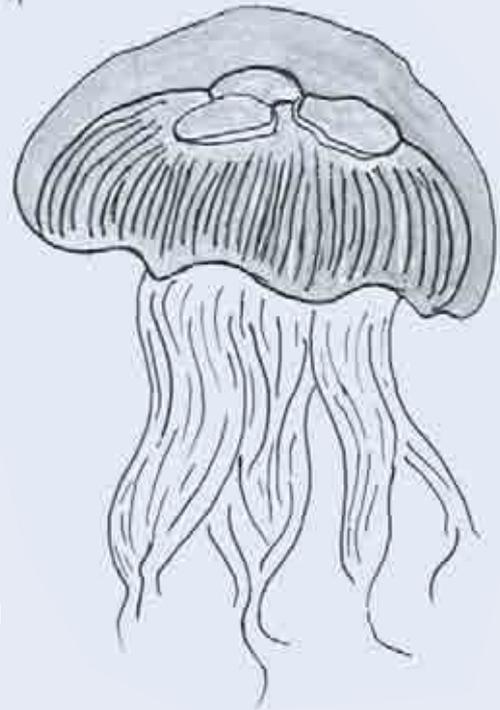
Even though your child might have quite a few negative relationships in their life, forming just one positive relationship can be powerful. Talking to your child about why someone might be a good friend, what they might have to be good at and what the ingredients of a good friendship are could help your child to consider things they can do to make friends.

Help your child understand their place in the world

To begin with, keep an eye on how you react to your child's behaviour. Your reactions can affect how someone feels about their current difficulties. While it is impossible to avoid frustration and confusion all of the time, try to promote an open, accepting attitude in yourself as much as possible.

Some of their behaviour may seem absurd or worrying to you, and for your own wellbeing it is important not to totally conceal how you are feeling. Attempt to understand why they may be acting in this manner. It helps them, and it can help you too.

Your child is a child first, with strengths and qualities like the rest of us. But they also have needs that are helpful to define in order to sort out the extra support they require to reach good outcomes. It's good to value and welcome their diversity, noticing that relationships are crucial, and expecting to have some information and training yourself about how to support their need.



A young person's experience of belonging – Andrea's story

My depression first started when I was about 13. At home I was bullied by my sister who would say stuff like 'your body is really horrible no-one is gonna love you', 'you're a boffin and a geek'. She repeatedly said that I was fat and insulted me. Every time I achieved something she put me down, even when I lost loads of weight she said I was too thin. As a result I had no self-confidence. So I didn't feel very safe at home and I felt like I didn't belong.

Find somewhere for the child to belong: Andrea's experience of bullying at home did not make her feel that she belonged. Everyone needs to belong and feel accepted. Belonging and being part of a family helps a child create a sense of self and identity. When a child experiences love and safety at an early age they can develop the idea that the world is a safe place. Belonging and being part of a family can help a child build a sense of belonging, they can opt in and out of various groups and establish different types of relationships thorough out their lives.

My mum used to get involved in arguments and tried her hardest to stop my sister. She was a vital source of support for me. However, my dad used to pretend nothing was happening. There was a divide in the family between me and my mum and my dad and my sister. To make things worse I could tell that my parents' relationship was slowly moving apart and when I moved out of home they eventually divorced.

Looking back my relationship with my mum helped me survive and get through, it was one relationship in my life that was really important. At the time my mum was really close to me and was a good friend and I listened to her lots. I know she did the best that she could. She took me out for walks and fresh air. I could tell her exactly how I was feeling and I felt safe enough to tell her I felt really depressed.

Keep relationships going: children need people in their lives who will commit to them and accept their situation. Andrea's mum was a constant source of support and this was really helpful to her. Bonding with family provides a safe and dependable base for a child to grow and become more confident in themselves. Feeling they belong helps them explore and take risks.

Unfortunately my home life was mirrored by my school life. At school I used to get called fat and ugly too. I was also constantly called a geek because I worked really hard and had braces. So how I was treated at home was reaffirmed at school. I hated school. I would really fear going there. I would constantly fear what someone would say next. If I was playing sports people would shout at me. I would walk down the corridor and people would shout at me. In the classroom people would whisper insults. I was bullied in my group of friends too. I was an easy target. I would go bright red all the time and be embarrassed by it. My mum would often be at the school trying to stop the bullying but because it seemed like it was everyone it was hard to stop. Also the bullying was really subtle and hard for teachers to see or pick up.

Even though I was really good friends with my mum she used to encourage me to make new friends that were nicer. I found this hard because my self-esteem was so low and the school environment was really hostile. Looking back I had a good friend which was my Mum and she helped me get through school and my depression.

Help your child make friends and mix with other children: Andrea's mum encouraged Andrea to try and make positive friendships. One positive friendship can be very powerful. Andrea's mum was a very close friend. Sometimes it is hard to find friends that are appropriate to your child's age. Don't despair: You can encourage your child to establish good friendships with family members: grandparents, aunts and cousins; or next door neighbours, mentors, or activity groups such as creative or environmental groups. Surround your child with positive people that they can relate to.

Although I felt really lonely at school and often depressed I realise that because my mum was so supportive I managed to do well academically. I really enjoyed studying. It was a distraction from all the rubbish in my life. My mum helped me see my strengths in that I was clever and could achieve well at school. My mum made sure I was well supported by teachers so that I could achieve. The teachers understood my situation and worked together to make sure I wasn't bullied in front of them and that the bullying wouldn't interfere with my studying.

Get together people you child can count on: Andrea's mum made sure that teachers supported Andrea, that teachers communicated with each other and provided a network of support for Andrea.

With the help of my mum and teachers I managed to survive school. I often still felt alone, very isolated and depressed. Even though I went through all of this I still managed to achieve academically and I ended up going to A level college. It was like studying kept me going and I had goals.

This was a turning point for Andrea and shows that school really matters in a child's life and is a clear path to building resilience. Through all the adversity Andrea experienced she had aspirations to learn and she had goals and these helped her become more successful and manage her life more resiliently. Andrea set goals and mapped out a career plan.

After I left school a big weight lifted off my shoulders. I stopped comfort eating and I lost loads of weight. I went to A level college and could wear different clothes and felt like I was a different person. My mum encouraged me to try and make new friends and although I didn't feel very confident I eventually did make some new friends. It was hard letting go of my old friends because even though they were often very negative and put me down they were a familiar part of my life.

The more healthy relationships the better: Andrea's mum encouraged Andrea to make better friends. This is an example of a positive chain reaction where Andrea makes stronger healthy relationships that are more influential than negative ones. The good influences in her life help increase Andrea's confidence and self-esteem.

While I was at college my mum encouraged me to volunteer. I loved animals and she helped me volunteer with the RSPCA animal shelter. I worked with other volunteers as well as vets and nurses. Volunteering helped me develop my passion and I was surrounded by people who believed in me which was great. I then decided to study zoology at university.

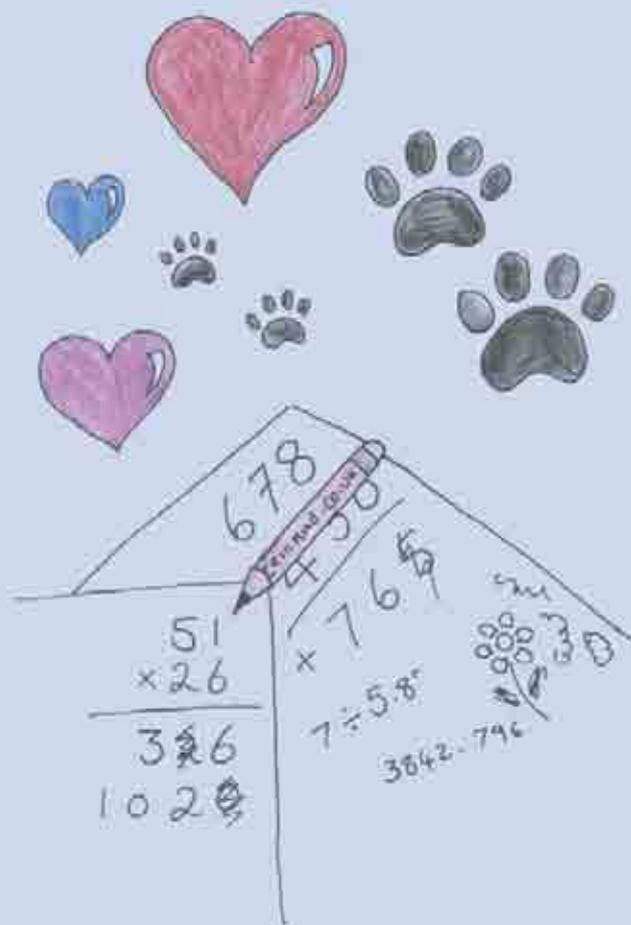
Tap into good influences: Andrea's mum encouraged her to volunteer and work with animals. The volunteer placement was a success. She was surrounded by a group of professionals that helped her develop her passion and a group of people who believed in her.

I did eventually go to university. I made really good friends with people I could talk to and felt like I belonged. It was great being away from home and from my sister. I had a chance to find myself and to be an adult not a terrified child.

When I went to university my parents finally separated. After my parents divorced, interestingly my relationship with my dad really improved. He now is an excellent dad. He listens to me and is always there for me. I can phone him in the middle of the night and talk to him if I am feeling low. Having a good relationship with him, knowing that he really loves me and I can rely on him no matter what has helped my depression remarkably. It feels like it has changed and lifted. I can be honest with him and have talked openly about how horrible it felt in our house when I was growing up. He said he was really depressed and that he withdrew from me because I was so close to my mum. By talking about it I can understand what happened and why I was depressed. I feel more connected with him and also with the depressed part of myself.

Make sense of where your child has come from: together Andrea and her dad can understand their family history and this has helped them develop deeper connections.

My sister and I are now friends although I am very cautious of her. My mum and dad have real regret that they couldn't stop my sister bullying me. Looking back my sister was older than me and she didn't like the fact that I was the baby, also because I had a very close relationship with my mum. I am still very close with my mum, we have video nights once a week. She really believes in me and encourages me to take risks as well as build my confidence.



Coping

Coping helps your child build up a particular set of skills to help them with the challenges of everyday life.

Understand boundaries and keep within them

I suffer from depression and one thing I really notice is that my depression really improves when family life becomes calmer and there are clear routines and structure.

By boundaries we mean setting and keeping to limits. Setting boundaries can help a child feel safe. Children need routine and structure to feel safe. It can be hard as a parent to be consistent and to follow through with things you've said you're going to do. But children really do feel better when they know where they are. So it's worth trying to stick with what you said you'd do and give them some clear rules about how to behave.

Be brave

My parents were there for me, they really helped me. I had to be brave in order to recover, I had to face myself and all my fears, all the things I hated and loathed about myself.

While the majority of staff in child and adolescent mental health services (CAMHS) are knowledgeable and amenable, there may well be times where you find it difficult to get the treatment and support that you or your child feels that they need. Don't be afraid to be insistent, and fight for what you agree is right; a determined, united front can overcome a lot when it comes to pushing for what you feel is right.

Being brave invites us to help children face their uncomfortable, scared feelings, and to actively work with them. Being brave enables us to experience that, and to confront our personal power, instead of passively relying on other people to sort everything out.



Solve problems

Don't pretend that there is no problem, or that your child's mental health issues will magically disappear by themselves. Recovery is absolutely possible, but the first step is accepting that there is a problem, for both of you.

Speak to professionals and find out as much as you can about what your child is going through. Keep possible treatments in mind and acknowledge the hurdles that a young person may face on the road to recovery.

While it can often be better to approach a problem head on, we think it's also true that stepping back can create space for solutions to arrive. Allow yourself to sit and accept that perhaps you 'don't know' and don't have solutions. Getting used to living with uncertainty can take some pressure off and this can be a solution in itself. You cannot fix everything. Although once you start taking a bit of action you can end up feeling better about things, it is equally important to take a break from worrying and problem-solving sometimes.

Put on rose-tinted glasses (yes, really)

I would never look back and say I wish I had not had anorexia. I have learnt so much about myself, about how I deal with pressure and stress. What really is important to me, what I like and don't like and what really matters to me and what do I want to give priority to really matters to me and my parents helped me view anorexia in this way.

Putting on rose-tinted glasses is an idea about putting a resilient spin on things. It's about looking at bad things that have happened and adding a positive twist to them. This idea is about deliberately adopting a stance that helps make sense of something from the past in a positive way. It offers another view for children to make sense of or develop a more adaptive view of their lives. Sometimes it is about managing life rather than changing it.

Foster their interests

When I was feeling really depressed me and my dad went to the cinema together and watched sci-fi films.

My mum would get me to listen to recorded novels in bed. Harry Potter really helped me in dark times.

Drawing, art – my mum would get us to draw together and even though I was really low I could sit there and draw in silence and now I'm really good at art!

This involves doing fun things that may not have anything to do with what children are struggling with. It can give children opportunities to succeed and as a result their self-esteem improves and they have fun. The quality of their lives improves. Succeeding helps children feel as though they are in control of their lives which makes them feel happier and as a result stronger and more able to deal with difficulties that come their way. This can be an area where you notice the things children do well and where they show real talent and creativity at managing difficulties.



Calming themselves down (self-soothing)

Do your best to pick up on how they are feeling, and act accordingly. Sometimes a hug and a chat can help a lot, but it is also important to know when to step back and give them space to calm themselves down. Looking back, it would have been helpful if my mum had taught me to soothe myself, through rubbing my own arm gently for example, or through taking up something like yoga. That way I might have got to see myself as someone who could make myself feel better. I can understand that for a parent it can seem like a task at first but persevere and you can develop an intuitive sense for when your company will be helpful, and when it may not be.

It's always worth trying to get your child to notice when, where and why they are feeling upset. Try to get them to notice and understand why they are feeling what they are feeling. Self-awareness is key to helping them feel calmer and more in control of their feelings and themselves.

Remember that tomorrow is another day

My parents were rocks. They were an extremely valuable source of support. They helped me get through it. They believed in me and believed I would get better. So they were always helping me to see that I did have a future. And even when I doubted it, they remembered for me that tomorrow was another day.

Really managing to remember that tomorrow is another day helps us find a solid place to stand, and then we're not so overwhelmed by our emotions in the present moment.

Help your child to lean on others when necessary

I'm not good at asking for help... nor is my mum. But she got me to talk to a teacher and the teacher was so understanding and helpful. Now I have support with my anxiety in lessons. I can sometimes do my work in another room that is calm and relaxed if the classroom is really busy and noisy. I also see a school counsellor and the school is much more understanding – I'm now not "the difficult child who runs out of lessons"

Learning to lean on others and trusting that they can help you and your child can be a hard thing to do. Leaning on others can help you get a bit of distance from the situation, so you can come at it afresh. It also can help other people really understand what it is you're coping with.



A young person's experience of coping – Lisa's story

In Resilient Therapy coping skills range from 'learning to fake it until you make it' right through to developing the talent to sit with horrible feelings in the knowledge that this time will pass. At first Lisa did not have any control over her life and her mum had problems accepting Lisa's mental health issues. However, slowly Lisa started making resilient moves and now she is in a better place. Lisa did eventually feel more powerful in that she could make decisions and have control over her life.

I first started self-harming when I was 14-years-old. I remember at that time I was having a really bad time at school, I was being bullied by a lot of students and my home life wasn't great either. On one particular occasion I remember having a really bad day at school, I was being bullied and I had an argument with my dad. At the time I felt worthless and really useless and I wanted to hurt myself, so I cut myself with a kitchen knife and really hurt myself.

Children learn coping skills when things are going wrong. Self-injury is a coping skill and is a way of expressing pain and hurt.

It was hard because no-one had ever told me what self-harm was. I hadn't read about it or heard about it. I thought that there was no way anyone else would do it or would want to do it to themselves; it made me feel really ashamed and alone.

Although self-injury is a form of coping, a child who self-injures can feel incredibly confused and ashamed.

The first time I self-harmed my mum noticed the scars on my arms. She was really frightened and freaked out. She shouted at me told me I was stupid. She didn't know how to react and became protective of me. After that we had an argument about it and she didn't mention it again. I think she just assumed I wouldn't do it again.

Often punishment adds to a child's feelings shame, self-loathing and disgust.

When I self-harmed I felt disgusted with myself and had a general feeling of self-loathing. When I cut myself I felt very relieved from my constant feelings of disgust and pain, it made me feel happy and it was like a massive relief for me. I could forget all my troubles and feel in control of my feelings. It would feel better for at least five minutes and sometimes for up to two days.

Parents might find it helpful to think about safe ways in which children who self-harm can do this. Holding ice, rubber band or counting 10 seconds.

I continued self-harming in secret and my family didn't know, only my best friend Yaz knew. Even though Yaz has never self-harmed she has always been understanding and at school she was in all my classes and we were always together and we are such good friends. She knew what I was going through. Yaz was bullied too and we stuck up for each other and helped each other.

Help your child to lean on others when necessary: Lisa knew that she could lean on her friend for support – she is someone she could trust who could really understand her situation.

Yaz told me that something was wrong I was getting worse and I needed to do something about it. She never told me not to do it. She never put me down or made me feel disgusted. She could see why I was feeling so bad. I felt completely safe with her and she helped me cope.

Understanding boundaries and keep within them: Yaz helped Lisa see that she had to set a limit, a boundary. Lisa's way of coping had become unsafe.

I still felt really distraught and I took an overdose and then told Yaz. She made me go to the Doctor.

A real turning point for me was that Yaz got me to go to see my doctor. The doctor was really friendly, nice and understanding. She didn't tell me off. She listened to me and didn't judge or tell me what to do. I was referred to the Child and Adolescent Mental Health Service. I had an assessment and then went to see a counsellor and art therapist.

This shows how Lisa set off a positive chain reaction with just one resilient move – her turning point.

It slowly helped changed things because somewhere I could go and not feel like a freak, but just relax and talk about how I was feeling. She said she could understand why I was feeling like this and that it is normal to feel bad. She helped me see it in a whole new light it and it stopped me blaming myself, accepting who I was and where



I was. I saw her for two years and she was really committed to seeing me. I felt safe telling her everything. I was embarrassed for a long time and I had felt ashamed but she never asked because I was embarrassed. She was gentle and I just wasn't ready. This helped raise my self-esteem because she was so accepting of how I felt over time it was ok to feel bad about everything that had happened.

Being brave: counselling helped

Lisa have the courage to confront her personal power. Lisa was brave enough to face her uncomfortable, scared feelings and to actively work through them.

My relationship with my mum hadn't improved since the first time I self-injured and she was frustrated with me because I was depressed and wasn't getting any better. She wanted me to get a job and at the time I was not in any fit state of mind to do this. My counsellor also helped improve my relationships with my mum. My counsellor said it was not practical for me to be employed. She stuck up for me to my mum and she told my mum to think of self-injury and depression like having a cold or flu. My mum looked at it differently from then on.

Solve problems: Lisa's counsellor helped Lisa and her mum to come up with different solutions. The counsellor helped Lisa and mum stand back and take note of how Lisa was dealing with her problems and how they were different from the way mum dealt with them. The counsellor helped Lisa's mum remember that you don't have to solve everything, and you might have to learn to tolerate feelings of uncertainty and ambiguity.

My counsellor didn't try to make me feel better or rescue me but at the same time she made me feel I can cope. She made me feel normal and not alone. She also challenged my parents, saying that they expected too much of me and that this was not fair and that I was doing the best that I could. This made them realise the pressure and expectations that they put on me was unrealistic. It was a great feeling to know that someone was actually on my side and she completely covered my back. My counsellor stopped me feeling shame, disgust and self-loathing. She said she could understand why I was doing it and that other people in my situation would do it and find it hard to cope with this stuff if it was going on with them.

Solve problems: interestingly Lisa's counsellor did not try and fix Lisa's problems or stop Lisa self-injuring. The counsellor encouraged Lisa to stay with her uncomfortable feelings and this in turn helped Lisa feel less pressurised and confused, allowing her to unravel mixed feelings of shame, guilt, disgust, anger and self-loathing. Allowing Lisa to live with uncertainty was a solution in itself.

I also started taking anti-depressants and this helped balance my depression. Anti-depressants and counselling slowly helped my life become better. After my counsellor spoke to my mum she was more supportive. My mum no longer ignored it or told me not to do it. She acknowledged it and brought me specific bandages and she made me feel ok about it. She couldn't stop the way I was feeling but she made sure I was looking after myself. We often now do things together like art and drawing, we listen to music together, we're going to a crystal healing class together and she is great at taking me out for a coffee when I am feeling down and need to get out of the house.

I don't say to myself that I won't self-harm or that I can't self-harm. I don't restrict myself. If I don't I can be more in control. I can stop and think about it and I can distract myself, then I ask myself do I want to do it or do I need to do it and so I think about doing it in a controlled way. When I was strict with myself and said I wasn't going to do it, it made me feel helpless. I just felt like I needed to do it more than I wanted to and I couldn't do it would build up into an uncontrolled urge of me just wanting to do it. It is still really hard and I hardly do it. It is not a daily thing in my life anymore. For so many years it was a massive part of my identity and was part of who I am and what I do.

Remember tomorrow is another day: this shows Lisa can use the resilient move of remembering that tomorrow is another day and this helps her find a solid place to stand and not be so overwhelmed by her emotions in the present moment.

More and more I am replacing it with art and keeping myself occupied with volunteering with Experience in Mind where I create art and resources and give training about self-injury. Going to Experience in Mind helps me not self-injure because it is a safe place and somewhere I can go and belong and speak about it openly. I can also raise awareness about mental health and share my experiences with other people so that they also don't have to feel so isolated and ashamed.

Fostering interests: Lisa's story illustrates how a young person can turn negative chain reactions into positive ones. Leaning on a friend for support and working with a counsellor helped Lisa create a better relationship with her mum. Now Lisa also does art and volunteers. Lisa has interests in her life and feels she can succeed and this gives Lisa more of a sense of control in her life.





Core self

Core self is when, as a parent, you help your child build an understanding of who they are and their own personal strengths

Instill a sense of hope

Never see mental health issues as a weakness. Mental health illnesses are complex, and it is no more logical or acceptable to blame a young person for their mental health issues than it would be to blame them for developing cancer, or a heart defect. A diagnosis doesn't have to be a death sentence or bar anyone from achieving what they'd like to do with their life. Many very creative and successful individuals have suffered from and lived with mental health problems.

Young people do recover from a mental health illness and it is important that, as a parent, you are not fearful of diagnosis or of getting outside support. If you believe that your child can recover then that belief will help your child start making the right resilient moves to recovery.

Teach them to understand other people's feelings

Sometimes I feel so down I completely withdraw and close off from the world. I feel completely alone. My mum says it's really important that I listen to other people's experiences and see that they are going through pain too. She gets me to read other people's stories of recovery and this really helps me gain a different perspective.

It is important that you teach your child to understand and be aware of other people's feelings. This can be difficult when they are overwhelmed by their own feelings but understanding other people's feelings helps them to understand that others can be experiencing hard times too and that they are not alone in their mental health experience.

Helping your child know themselves

I used to suffer from depression. One of the most important things I worked on with my counsellor was understanding mine and other people's emotions. I never knew what I really thought or really felt. I had to check with others to see what they were thinking or feeling so that I knew what I "should" feel or think. Now I can accept my thoughts and feelings.

I used to think I was responsible for other people's emotions. If someone was angry then I had made them angry. Today I accept I have no control over anyone's emotions.

Don't always assume that you know what is right for your child. Though they might be ill, a young person still knows best how they are feeling. Remember to take their views into account, alongside those of competent and experienced professionals, before making any decisions about their care or future.

It's an important part of recovery for your child to gain awareness and insight into problems they have experienced and to grow and adapt. It is important that young people feel and understand what is going on from the inside. Learning about mental health is very important for your child.

Help your child take responsibility for themselves

Remember, even though you may feel tempted to keep your child close at all times, encouraging them to make independent decisions as much as possible can help build their self-esteem, and allow them to develop as an individual. Don't live through them. You have your own life and own way of viewing the world. Keep in mind that your child's perspective will differ from your own, and that this is positive.

When I started to recover from anorexia my mum found it hard and wanted to look after me all the time. These were tense times. I would argue with my mum telling her to back off and trust that I could now look after myself.

Help your child build their capacity to take responsibility for themselves. By knowing themselves they can see that they have a relationship to the things and people around them and can influence this, rather than assuming things happen to them all the time. Help them know their own sense of usefulness and personal power. Grabbing hold of daily opportunities to help them control situations and understand they have the power to make choices and decisions in their life helps them see they can take control of their lives rather than life happening to them.

Foster their talents

Having aspirations helped me get through my mental health illness. I would concentrate and throw myself into my school work. I loved learning and I put lots of effort into it and got good marks.

School was very daunting, really pressured, but other interests in everyday life gave me a sense of hope. While I was recovering from anorexia I wanted to learn about different things and this gave me a sense of hope in my life. I learnt that I had interests and talents that weren't to do with academic achievement. Understanding and finding these interests helped me feel excited and I wanted to live and experience all these things I was learning about.

Finding out what really matters to them is a fundamental part of your child's growth and development. Fostering their talents is about building qualities and good points they already have and maximising their influence. By fostering their talents we give them a chance to understand more about their abilities. Often children are good at things that they or we don't notice or they don't value. Doing fun stuff and fostering talent is a way to begin to experience some choice in life, a sense of achievement and competence.

There are tried and tested treatments for specific problems; use them

Remember that you are not solely responsible for your child's wellbeing, they have their own mind, and you should not blame yourself for these difficulties arising. Mental health issues can affect anyone, and there are many, many factors that can lead to them developing a mental illness.

Never be scared of getting professional help to support you and your child. You can use the Resilient Therapy toolkit and explore the possible benefits of medication and therapies.



A young person's experience of core self – Rob's story

Core self is about personal ideas, beliefs and assumptions that children have in relation to themselves. Its focus is on understanding who you are, and then building internal, personal strengths, because how a child feels about themselves affects their approach to life. This case study illustrates how Rob is now recovering from anorexia and has slowly made internal changes with the help and support of his parents and professional help.

In hindsight it seems apparent that I had been depressed for a few years and had long felt that I had little hope and few prospects in life. Aged 14 and in school year 10 my depression got worse due to academic pressure. It seemed that to achieve at school we would have to eat, drink, and sleep GCSE syllabi for the foreseeable future. Staff at the school had put increasing pressure on us to succeed and do well at our GCSEs.

At school I was also bullied about the way I looked, my choices in life and even my taste in music something that seemed to happen every day. During this time my friend's mum had developed terminal breast cancer and was looked after by my mum who was a palliative care nurse. I felt guilty and a sense of responsibility to my friend as I had a great relationship with my parents and my friend would be left bereft.

The combined pressure became so great that I began not wanting to eat because I felt like I didn't deserve to because I was feeling so much guilt. I first remember this starting during a family holiday to New York. After coming back I became obsessed with my school work and wanted as little human contact as possible. I felt out of control in my life, so controlling my food intake introduced a kind of order when nothing else made sense. I was punishing myself, in a way, as I saw myself as a horrible, 'broken' person. It was a vicious circle – the fact that I was not eating properly and felt so strongly about myself made it difficult to think rationally.

My parents forced me to make an appointment with my local doctor who was helpful but was not trained to recognise an eating disorder especially in a male. However I had a paediatric appointment due to

my poor circulation and the fact that my hands and feet had become purple-hued as well as I had a slow heart rate. I was admitted to hospital for tests. While I was there I was visited by a worker from the child and adolescent mental health services (CAMHS) who, after a short talk, diagnosed me with anorexia nervosa. This was a relief as it meant it was no longer alone in how I felt and I could get help.



During my admission the staff tried to convince me to eat and gave me protein shakes. They were very supportive but struggled to understand what I was going through. Fortunately my parents visited me often which was a tremendous source of support and comfort. My parents showed me unconditional love and gave me a sense of hope that I could eventually recover and no longer experience so much emotional pain.

Instill a sense of hope: hope is what we have when everything else seems to be taken away. It's the quality we bring to our lives that helps us hold on to the possibility of change and the anticipation and wish that tomorrow will be better.

Eventually I was visited by a psychiatrist who warned me I would become seriously ill if I did not start eating and I was transferred to a specialist unit. This was a turning point for me. It started a course of events that led me to get the help that I needed.

Turning point: although this seems to be a negative time, going to the specialist unit was a turning point for Rob.

At the unit there were other young people with mental health problems who were really supportive because they knew what I was going through and could share great empathy with what I was going through. They also talked about their experiences and I learnt about what it felt like for them and understanding other people's feeling helped me feel not so alone. I started different types of therapy. I learnt from other people's experiences and I heard other young people openly talk about eating disorders for the first time.

Teach the child to understand other people's feelings: from other young people's experiences Rob gained a sense of understanding of his own mental health issue.

I was put into an intensive re-feeding programme which forced me to eat large amounts of food every day. This was a traumatic experience but helped me reach a healthy weight in a way that nothing else could have done.

There are tried and tested treatments for specific problems, use them: no matter what we do and how hard we try to support children, sometimes it is worth exploring possible benefits of medication and therapies. These can often change something fundamental. Sometimes things need urgent attention and a treatment can really work where all else fails.

The other young people in the unit helped me a great deal as did the constant support of my parents and in particular my mum who would visit me most days after work.

An eating disorder is usually a manifestation of deeper emotional problems. The support helped me to get better. Through therapy, listening and talking to other young people and with my parents I slowly started to get to know myself better. I started to address why I was feeling the way I was feeling and exploring how my feelings were connected to food.

Helping children know themselves: in order for a child to feel good they need to feel it from the inside. The route to feeling good from the inside is through learning about yourself and looking to the inner self and trusting in your own abilities, to see through life's difficulties. Rob also was able to understand other people's feelings through having his own feelings properly understood and responded to.

One turning point for me was when I went to cognitive behaviour therapy (CBT). The therapy helped to shift my negative assumptions and feelings towards myself and life in general, helping to put these thoughts into perspective. The open counselling environment and emphasis on discussing the basis of negative thoughts helped me to reduce the strength of these thoughts had over me I could now tackle and overcome them. Getting some of them down onto paper helped reduce the power the thoughts had over me. This helped me feel like I could take more responsibility for my life.

Helping your child take responsibility for themselves: Rob slowly learnt how to self- manage his negative thoughts and beliefs and this helped him build his self-esteem.

The last couple of years since leaving hospital have been full of ups and downs, but I've achieved things that I'd never imagined I would in my lifetime. My parents have been a tremendous help in building my self-esteem and giving me hope for the future. They encourage me to try out different opportunities in life. I now write for an internet magazine and am an ambassador for BEAT (Eating Disorder Charity). I also volunteer for Experience in Mind and am going to a music college in September

Foster their talents: Rob's parents helped him find out what really matters to him. They praised, encouraged and supported him to find what he is good at and then try it out. Capture your child's talent and direct it well.



Learning

Helping your child develop talents, interests and life skills, encouraging them to learn how to cope, how to express their emotions, understand boundaries and have aspirations, are crucial parts of helping them become more resilient.

Make school life work as well as possible

School is an essential part of your child's growth and development. Work with school to make your child's experience of school the best as possible. Make use of mentors, pastoral support, a counsellor who can work with your child in and out of school. Everything your child goes through will be part of a learning process and will be something they can grow and learn from.

Learning and mental health are also very important. Awareness of what you have been through and learning from personal experiences as well as about yourself is very important. Learn to love and forgive yourself.

A positive school not only provides the place for academic achievement, but also offers a stable environment for learning other things, like getting along with adults and other young people, and finding out about established or accepted social ways of being.

Sometimes academic pressure from school can contribute to making your child's mental health issue worse. It is worth working with the school pastoral service to make a plan for the best way to ensure this does not contribute to mental ill-health.

Find a mentor

I used to suffer from really bad anxiety and hated school and nearly dropped out without any GCSEs. Luckily one teacher took me under her wing. This teacher made a world of difference. She supported me both emotionally and practically. The teacher mentored me and I ended up leaving school with five GCSEs.

One of the things that has helped me recover is finding a peer support group. I can be with like-minded people who completely understand what I have been through.

We know from research that children do better in school if they have one or two trusted individuals who they can turn to when things get tricky, and who act as role models for their learning.

Map out a career/life plan

Having aspirations helped me work through my mental health issues. It gave me hope. I could dream about all the different possibilities.

Having a view to the future can set children up for eventually mapping out a meaningful adult life. We know you might be using all your resources to manage the present, but dipping your toe in tomorrow can set up a whole series of chain reactions that promote resilience.

Help a child to organise themselves

When you are suffering from mental health issues life can be even more stressful when it is chaotic and overwhelming. My family gently helped me feel more organised and less overwhelmed. Life feels more manageable and my head slightly clearer.

Mum helps me with organising appointments by having a big family diary and I put everything down in it.

They got me to write out a plan for the week and organise in advance what I was doing. This helped me feel like I had something to do every day of the week.

Although often very difficult to maintain, structure can play an important part in helping family life run more smoothly.

Highlight achievements

My mum is really good at reminding me of all the little successes I have achieved on an everyday basis. Together we can recognise how far we have come.

Noticing their successes, their strengths, their talents and interests helps build a child's resilience and confidence.

Develop life skills

I would never choose not to go through the mental health experience that I have been through – it has been a great opportunity for me to learn who I really am and find out my real priorities in life.

I learnt from all the pain and negativity I went through. It was key to understanding how to feel better and learning to improve and grow as a person

Learning can be soothing. It is a way of understanding how things work and exploring the world. Learning and understanding can help you learn that there are loads of things to be in awe off.

Developing life skills is about teaching children the necessary skills for living. Successfully teaching life skills relies on breaking things down into small parts so we can teach them to our children. Developing life skills is about relating learning to real life and children need your help to do this.

Young person's experience of learning – Ed's story

Primary school was OK – there were small classes and we stayed together for the different bits of the timetable so I knew what was happening, what was going on.

Secondary school on the other hand I hated – it was big and frightening. I was the only person from my primary school that went to this secondary school. There were too many people and too many different classes and lots of hard homework. There were loads of us. I didn't like crowds and felt very small and anonymous. I liked blending into the background. I didn't like meeting and speaking to new people. I would also worry loads about everything.

My way of surviving was to hang out with other young people who also didn't like school. I hung around with the troublemakers. I was a very quiet troublemaker. I was not aggressive or violent, just withdrawn and didn't want to be at school. If I got into trouble I would walk off and by the time I reached year 10 and year 11 I bunked off frequently. The teachers and the school didn't seem to care or speak to me about it. They just left me alone.

Underneath my bad behaviour and not wanting to engage or be involved in anything was my anxiety about being in a classroom. I always thought I was going to embarrass myself. I worried that I would say something wrong and make a fool of myself. I worried that I would look stupid.

Develop life skills: Ed could have had support with learning and developing life skills. He could have been given strategies on how to cope with large numbers of students and how to cope with his anxiety. The strategies could have broken down into stages and this could have helped Ed to cope. The strategies could have been: breathing and relaxation techniques, being able to sit where he wanted, having an exit plan if he needed to leave the classroom, an assigned buddy to be with him in breaks and lunch time, a regular structured classroom routine. These strategies could be tailored to Ed's individual needs.

The teachers must have thought I wasn't worth bothering with because I was so withdrawn. Perhaps they didn't know I was there. I gave the impression that I didn't want to learn so they didn't bother trying to teach me. The only time they gave me individual attention was when they were telling me off.

Make school life work as well as possible: it is apparent from the beginning that Ed could have been more supported at school if his parents or school had picked up what was going on. As a parent it is really important to try to make school life work as well as possible. Research tells us that going to school regularly and doing well at school is one of the most helpful factors in supporting disadvantaged children to do better than expected. School provides structure within which to learn new things step by step. It gives access to people who can help and support your child to do this and it aims to educate to build children's self-esteem and know-how which they take with them into adult life.



Looking back I wished I had enjoyed school more. I really loved playing my guitar and I never ever did that at school. I liked sports such as PE and running. I also liked French. But I never enjoyed any of these lessons. I just hated school and everything about it.

Highlight your child's talent: it would have been great if Ed's achievements like playing the guitar, enjoying sports and French lessons had been picked up. If Ed's parents or a teacher had noticed this interest and skill, it would have been good for Ed if they had encouraged him. Ed could then have seen that it was possible for him to achieve and be successful.

By the time I was in year 11, I was only going to the lessons I wanted to and I had completely withdrawn. I also smoked a lot of weed which made me want to withdraw even more. At the same time I finally realised I needed to get some grades.

Map out career/life plan: Ed unfortunately did not have any goals or life plan. Education seemed to him fruitless and studying did not give Ed any sense of achievement. Ed did not have any aspirations or a sense of purpose and did not have any idea of what he wanted to do in the future. Then a positive chain reaction took place...

And luckily one teacher did take me under her wing and this was a real turning point for me. She helped with GCSE course work and would phone me up at home and give me work to do at home.

Help the child to organise themselves: Ed's teacher helped Ed organise himself, setting simple goals for Ed to achieve.

I ended up studying loads at home. The teacher would be very persistent. I remember her ringing my dad and trying to get him involved to encourage me to do work. Also luckily I'm a lot better in exams than course work and in the end got four grade Cs and one grade B.

Engage with mentors: Ed's teacher made a world of difference to Ed's last year at school. The teacher supported Ed both emotionally and practically. The teacher was also very good at mentoring in the style that fitted his needs: challenging Ed by phoning him up but also giving him work to do at home. The teacher's belief in Ed's potential helped Ed get his GCSEs.





Section 2

Working with Resilient Therapy

Common mental health issues

Introduction

This section is written by the young people of Experience in Mind because they wanted to share their own personal experiences of mental health problems. They want to raise awareness and understanding around mental health issues, to help parents and carers and young people communicate and hopefully stop other young people going through some of things they have been through.

Here the young people describe the different, but most common, mental health problems and what can be done to help. They also describe what happened to them. Even if you think you know about these problems, you might be surprised by how the young people themselves see them. Some of the case studies may appear worrying at first as they are based on young people's negative experiences. But we focus on positive recommendations that helped these young people recover and the tools from the toolkit (basics, belonging, learning, coping, core self) that might usefully be used. Hopefully this will help you respond positively if you are facing a similar situation.

Depression

What is it?

Symptoms of depression are: low mood, low self-worth, no hope about the future and no longer enjoying activities that you once enjoyed doing. You might also not look after yourself so well, and not be able to get out of bed due to lack of motivation. A person can appear alright on the outside yet still feel very depressed on the inside.

What does it feel like?

Winston Churchill described it as his 'black dog' and many other people describe it as a 'dark cloud' that envelops everything. These are good ways of describing what it feels like when you are depressed. Although each person's experiences of depression is different there are some common themes.

A lot of people with depression describe feelings of emptiness or bleakness. The world can appear a very dark place where everything is somehow tainted or devoid of any meaning

or enjoyment. This is the feeling that being in a dark cloud quite accurately describes. It is the greying of the world that is the calling card of depression.

As well as feelings of emptiness a person's perception of themselves can be negatively influenced by the effects of depression. Low self-worth is perhaps one of the most damaging effects of depression. People with depression can feel that they are completely worthless despite their achievements and how well they manage to do. Self-confidence can drop significantly because of the effects of depression on their self-esteem. It is therefore understandable that someone who is depressed may not want to speak to anyone or leave the house.

Some people assume a simple solution to depression is that they should just 'do something fun' and they will be happy again. This ignores the fact that for a person who is depressed many of the things that they used to enjoy aren't enjoyable and fun is not an option. It makes the depression worse as there is no way out. Even concentrating on a TV programme can become too difficult and not enjoyable.

If someone has no hope about the future then day-to-day motivation can become debilitating. The energy required to carry out the very simplest of tasks becomes non-existent. Getting up, showered and ready for school or work feels like a massive achievement because of the huge amount of effort that it has taken when all you want to do is go back to bed and shut the world out.

Adam's experience of depression

Looking back it started when I was 16. I started avoiding people, feeling very anxious about social situations and then I started taking less care of myself, not showering or having a bath. And from then on it was a very vicious circle: the less I did the less I wanted to do, the more I withdrew and the more I wanted to withdraw.

Belonging: as a parent it is important to notice if your child is no longer communicating. Keeping communication going is really important. Try to encourage them to be open and honest. Good family relationships and a sense of family cohesion can encourage your child to feel that they belong and help them not feel so isolated and alone.

The hardest part was when nothing was actually going on. I was doing well at school. I was relatively popular because I put up a bit of a façade. It felt like everything was getting darker and darker and I started to feel suicidal as well. At the time I didn't mention this to anyone I was so encased in my head. My head was like a prison.

Core self: help your child know themselves. Encourage them to reflect, share and express themselves. Often when someone talks about how they are feeling this helps lighten the power of emotions and gets them to slowly understand what they are experiencing and going through.

People did notice. Generally people thought because I was avoiding people and not taking care of myself, they just assumed I was on drugs, smoking cannabis, when I wasn't.

My family didn't know what to do so they did nothing. And if they did say or suggest something I would snap. I could be very angry.

Core self: there are tried and tested treatments for specific problems. When your child is going through a really tough time and you have tried lots of different Resilient Therapy techniques then it is time to gain support from a network of professionals.

Although it was a gradual descent over a period of time it generally got worse and worse, I completely withdrew. I had no friends. I dreaded going to school and college. My attendance was really bad.

Belonging: keep relationships going. If your child is not communicating with you get them to communicate with someone close to your family that your child can rely on. This could be a close family friend, school mentor or counsellor or even a next door neighbour. Your child might need to speak to someone privately and you may need to respect their need for confidentiality.

Because my depression was so bad I eventually went to the doctor. My doctor was fantastic, he definitely noticed something was wrong. He prescribed me anti-depressants and got me an appointment with a mental health nurse.

For Adam going to see doctor was a **turning point**. Adam had got support. doctor listened to Adam and picked up on signs of his depression Adam had got to a point where he needed medication which helped him to engage with other people.

I can't say that I got better immediately but very slowly I got better. The medication started to work and I was encouraged to talk about my depression. My mood swings calmed down a lot. The more I educated myself about depression the easier I understood it. It was an actual relief to get a label of being depressed. I think it is good that it has been named.

Core self: help your child know themselves/help children to take responsibility for themselves.

Adam read and learnt about depression and this helped him understand what his depression was about. The more Adam could understand his depression the more accepting he was of his condition. Adam could now look to his inner self and trust his own abilities and this could help him deal better with difficulties in his life.



Based on Adam's experience here are some suggestions about what could have helped

Problem	How to help them work through it
My child feels anxious about social situations.	With your child, help them to identify places where they feel 'safe' and slowly encourage them to socialise in these surroundings. This can motivate them to discover further environments where they build up confidence in places they wouldn't have previously visited.
My child has started to take less care of their personal appearance.	Be aware and notice this could be a warning.
My child has really withdrawn from going out/doing activities	Encourage him/her to go out with you or find other people they can go out with. At the same time don't force them. A safe routine can be really helpful.
My child appears to be doing well at school but comes home and seems to be really unhappy.	Recognise that children can appear to be doing well, seeming fine on the surface but not being so fine underneath.
My child is being really angry and defensive when I try to talk to them.	Understand that when your child is depressed they can feel very isolated, scared and on edge. It's important to be approachable to your child and let them come to you or encourage them to talk to a neutral person such as a neighbour mentor or other family member.
My child is being very secretive.	Try to build up a trusting relationship with your child. Suggest counselling if you are aware of a problem. Try to maintain an environment where it is ok to express and talk about how you feel. Remind them that it is good to talk and share what they are going through with someone they feel comfortable with (this might not be a parent).
My child is behaving strangely at school.	Look behind the behaviour. What is going on? Is it a cry for help? With your child's permission talk to the school and work out best way they can support your child.

Self-harm

Self harm can be shocking and scary. But it is important to raise awareness around what it is and the best ways you as a parent or carer can support your child.

What is it?

Self-harm, sometimes referred to as self-injury, is the act of somebody deliberately harming themselves. There are many different ways in which someone can self-harm, including cutting, burning and hitting themselves. People may use more than one way to harm themselves, and self-harm can occur in all ages.

There is a lot of stigma around self-harm, with the most common stereotype being that the person is attention-seeking or is trying to be manipulative. This is not the case and every incident should be treated seriously. Self-harm can often be a very personal and private act. Also, this belief is not helpful, as it can stop a young person seeking the help and support they need in order to improve their resilience.

Although many people are quick to associate self-harm with suicide attempts or a person experiencing suicidal thoughts, this is rarely the case. Self-harm, for the majority of young people, is a coping mechanism and a way of regaining control or relieving tension.

What does it feel like?

Young people who self-harm are likely to be feeling desperately unhappy, trapped and alone. This can lead to a young person using self-harm as a way of coping with these overwhelming negative feelings. Self-harm may act as self-punishment in response to feelings of 'being a bad person', or feelings of guilt and shame. Young people can also feel detached from their lives or reality and feel like they have no control over things. They may find that self-harm can help them to reconnect or make them feel 'real' or 'alive'.

Hannah's experience of self-harm

I started cutting when I was 18, shortly after I started university. I had never heard of self-harm and the first time I did it I couldn't understand why I had done it, I just blamed it on being drunk. I didn't regret it, however. I was really stressed at the time and somehow feeling the sting of the cut for days after made me feel calm. The next time I was drunk, I did it again but worse and I remember sitting in class the next day feeling proud that I had done that to myself, it was my secret.

It became more frequent and soon I didn't need to be drunk to do it but it wasn't till I read an article about self-harm in a magazine that I realised that what I was doing was something that had a name and something other people did too. It was scary to realise that I had a problem, but it couldn't stop me, the feeling I got from harming myself couldn't compare to anything.

But it didn't take long before I was dependent on it and my girlfriend at the time convinced me to get help.

Core self: helping your child to take responsibility for themselves. This builds on knowing themselves. It's about helping them to see that they have a relationship to the things and people around them and that they can have an impact on, rather than assuming things happen to them all the time. Hannah's Counsellor helped her to see that she has control over certain situations and has power to make choices and decisions in her life.

I went to the doctor, who put me on anti-depressants and referred me for counselling. Counselling helped me to explore the reasons why I did it. My self-esteem had been low for a long time, mainly due to events in my past and because I hated who I was. At school it was bearable because I buried myself in my books and it resulted in achieving something academically and for a while life seemed to be ok.

Core self: helping your child know themselves. In order for children to feel good they need to feel it from the inside. The route to feeling good from the inside is through learning about themselves and accepting of the fact that there are areas that they may wish to further develop and change. Knowing yourself helps you to trust your own abilities. This can be done by encouraging them to become aware of their own strengths and weaknesses as well as notice what's important to them. Parents can help a child to develop their own sense of identity by encouraging them to recognise and talk about their feelings safely.

When I started university, however, I was no longer the 'best in the class' and I couldn't cope with that, I felt like I had nothing going for me. I was continuously putting on weight from binge eating and I hated myself for being gay, I thought I was a total freak.

I became a frequent visitor at the hospital A & E department and although the staff would often treat me really nastily, it didn't change anything, I just hated myself more. It felt like nobody understood me. Medical professionals thought I was attention-seeking and a waste of time. Friends and family thought I was manipulative and just trying to hurt them. None of these attitudes helped, they just made me feel worse and I didn't want to live any longer.

Belonging: at this time what could have helped Hannah was to find somewhere where she felt that she belonged and felt secure within herself. Hannah needed family, friends, or mentors that could have helped her feel cared for. Building and keeping successful relationships can really help children feel good about themselves.

The extent of my problems hit home when I had time out from university because I wasn't well enough to go on my year abroad. But I still couldn't dig myself out of the hole and instead just tried to pretend that I was getting better. I was later allowed to do my year abroad but then my problems spiralled out of control again because there was nobody there watching me.

Five weeks later I had to leave and move back to my parents' house. It was so difficult but with my parents watching my every move I was unable to self-destruct. Of course I was very depressed but my addiction to harm was weakening and this gave me some space to really get better.

When your child is recovering it is really important to unconditionally love and value your child and welcome their diversity.

A real turning point was when I joined Allsorts youth project and my life slowly turned around completely. For the first time I found an environment where I could be completely accepted for who I was. The other young people at Allsorts are so diverse and have had so many problems themselves and they are not freaks at all, so there is no way that I am! Instantly I was looking forward all week to that evening when I could be in this environment. Soon my self-esteem improved dramatically through the regular mental health and wellbeing orientated workshops and programmes.

Belonging: finding somewhere to belong. Hannah found a group where she felt a sense of belonging. It was a place Hannah could form good relationships and connections. Tapping into good influences: The good influences in the group reintroduced a sense of self worth. Hannah had found a group that gave her a sense of community, acceptance and purpose.

I've made the best friends I've ever had and met the most decent people in my whole life! The volunteering opportunities have probably helped me the most because they've improved my confidence and given me a reason to be really proud of myself. I have since moved to Brighton, returned to university and am also volunteering for Experience in Mind as well as Allsorts. I have a clear focus in life again and am far better equipped to overcome obstacles without the need to fall back into my old life.

Coping: fostering interests. Joining Experience in Mind and Allsorts gave Hannah the opportunities to succeed which helped her self esteem to improve. Succeeding helps children feel that they are in control of their lives, which makes them feel happier and as a result stronger and more able to deal with difficulties that come their way.



Based on Hannah’s experience here are some suggestions about what could have helped

Problem	How to help them through it
I’ve noticed my child has scars on their arms and I don’t know what this is and why they are doing it.	One in ten children/young people self-harm. Often children do this in secret and feel very ashamed. It is important to try and talk about self-injury openly and honestly if the child wants to. It is best not to punish your child as this can add to feelings of confusion and shame and it can lead them to self-harm in secret.
I’ve asked my child to stop harming and they refuse. I can’t understand why.	As a parent, when your child self-harms try not to focus on the self-harm but focus on how they are feeling. Self-harm is often pent up emotions of anger, fear, shame and disgust. Try to encourage your child to express their feelings in an alternative way.
I feel like my child is self-harming just to seek attention.	When someone self-harms it is attention-needing, not attention-seeking. Often when someone is self-harming they feel isolated, scared and lonely.
When I ask my child why they self-harm they say they really hate themselves.	When your child self-harms communication with your child is essential. Through this it can help them to understand and explore reasons why they would want to self-harm.
My child feels they have to be the best at everything they do and if they don’t do their best they feel like a failure and this can make them want to self-harm.	Praise your child and help them see you love them unconditionally. Make them feel good about their achievements help them see that it is unrealistic to be the best at everything.
I think my child self-harms because she has issues with her sexual identity.	As a parent, work with them to understand any negative beliefs around their sexuality. Accept your child for who they are.

Now that I am aware that my child self-harms I feel like I have to watch their every move.

Remember that self-harm is not about the act of self-harm, it is about your child's inability to communicate and express emotions. Help them communicate what they are going through instead of trying to prevent them from self-harming.



Eating disorders

What are they?

Eating disorders can occur in people of any age or background and to both males and females, but adolescent females (12–25-year-olds) are seen to be most susceptible to developing them. Young people's experiences of eating disorder vary from person to person.

Anorexia nervosa is when someone restricts their food intake and remains considerably under the weight that would be expected for their height and age for a long period of time usually by restricting food intake.

Bulimia nervosa is most common among people in their late teens and early twenties. People with bulimia often binge eat and then make themselves sick to control their weight, this is due to distorted body image and or low self esteem.

Eating Disorder Not Otherwise Specified (EDNOS) is the term that applies to those who exhibit symptoms of different eating disorders, without seeming to fall under one particular category. This condition can also be a manifestation of moods.

Binge eating disorder and compulsive overeating can lead to problems with obesity which can be dangerous if not treated.

What does it feel like?

Eating disorders arise due to a number of different emotional factors with the most common being: low self-esteem, poor body image, feelings of being 'different' or inferior to other people, personal or professional/academic stress, bereavement and loss, emotional or sexual abuse and feelings of being out of control in life

There are many other factors and each person develops their eating disorder for different reasons, but the way that people suffering with eating disorders feel is fairly consistent.

An eating disorder can drown you in feelings of self-loathing, desolation and despair, making you feel that there is no hope for you, that you are a worthless, disgusting waste of space, that you do not deserve to be happy, to live, to eat. While food and eating are obviously significant factors in an eating disorder, in the experience of many people the focus on and obsession with food is a reflection of far deeper emotional difficulties. For example, people may suffer from depression before developing anorexia nervosa. They may eat less and less because they feel they don't 'deserve' to eat, and they cut everything that they enjoy out of their life. Restricting food intake may be the only way they feel they have control over life.

Someone with an eating disorder cannot just snap out of it and eat normally. Imagine that you had done something appalling, and that made you feel disgusted in yourself, in your own skin. That is how someone with an eating disorder can feel every time that they take a bite of something. It's not about the food itself, but in our society food often represents self-affirmation, and we are continually bombarded with conflicting messages about types of food, how much we should eat, and so on. Refusing to eat seems like the ultimate self-denial, and for someone that feels so hateful towards themselves, it can be

impossible to resist at first. An eating disorder can come about for any number of reasons, but what can be said of the majority of eating disorders is that they are an attempt to deal with life: a harmful coping mechanism. People with an eating disorder are not ‘just doing it for attention’ or out of spite at their family or friends, and they do not choose to develop it.



Megan's eating disorder experience

Thinking about it, I have had a strange relationship with food for as long as I can remember. It's difficult to explain because it is linked to so many other things – my self-esteem, social anxiety and problems with self-harm.

The first time I remember food being an issue was when I was six-years-old and went to visit my old childminder. Her daughter and another friend were eating beans on toast at the dining-room table. My childminder asked me if I wanted some and although I was really hungry I said 'no' and made the excuse that I had already eaten. It felt really embarrassing to eat in front of other people in case I did something stupid. I just kept thinking things like 'what if I drop my fork, or the whole plate falls on the floor?', 'what do they expect me to do with the plate when I am finished?', or 'what if I don't like it?'

Belonging: This shows how important it is to belong. Everyone longs to feel cared for, so building and keeping successful relationships can really help children to feel good about themselves. If Megan had felt like she belonged in her childminders home then she may have felt more comfortable eating food in front of other children. If she had experienced a good, safe and dependable base then she could have developed an understanding of the world as a relative safe place and slowly tried out new and interesting things.

Back then, the problems I had with food and eating centred around feeling embarrassed rather than feeling overweight or that I shouldn't eat. As long as I didn't go round to a friend's or relative's house at mealtimes I was ok with food. However, when I was about 13 or 14 things got worse and it wasn't just the fear that I would do something wrong at the dinner table that made me embarrassed, I felt embarrassed over the way I looked. It was probably a combination of low self-esteem and seeing the way other kids laugh at overweight people eating. Although I have never been overweight I always thought people were looking at me and felt embarrassed at my size even though I was 'normal'. Through high school I would hardly ever eat a proper lunch with my friends but snack on chocolate bars, sweets and fizzy drinks.

Help the child to know themselves. It's worth helping your child to develop some awareness of who they are. In order for children to feel good about themselves they need to feel it from the inside, so that they don't have to rely on outsiders telling them all the time. The route to feeling good from the inside is through learning about yourself.

My food problem had begun because I had no control over other things that were happening to me in my life and now it was completely out of control. I can't describe how low this left me feeling and how invasive and persistent the thoughts are that come with it.

I would weigh myself several times a day and my mood would fluctuate with whatever the scales read. There were things that I did to counteract how much I had eaten – I never found that purging helped me but I would often go on a long walk or for a run, or would try not to eat for the rest of the day. But this only led to more bingeing and comfort eating.

When these counterbalancing activities weren't enough or when I had binged or felt low and out of control I would often turn to other forms of self-harm to stop the thoughts and distress. While these helped, it meant more things to hide from my parents who had no idea anything was going on. It was extremely difficult and painful having to hide things away, but at the time it was so much easier for my parents not to be involved as they were half the problem to begin with. Teachers didn't know the extent of my problems either, and as I was quite badly behaved at times, the head teacher simply told my parents that I was 'playing games'. Even when I did air my problems with food to someone, they told me that I wasn't making myself sick so I didn't have bulimia and that was that. End of.

Learning: Make school life work as much as possible. School can offer a stable environment for learning and finding out about established or accepted social ways of being, life skills and self development. It is important to have regular contact with school and to make sure that school is providing the best possible experience for your child.

During the two years I spent doing my A levels I became severely depressed. By the time I had got my results and was about to go to university I realised that I couldn't cope any more. I certainly couldn't deal with going to a new place and making new friends but I also knew that staying at home with my parents was a dead end too. Following an overdose I ended up in A & E and was admitted to psychiatric hospital. Suddenly my parents and everyone around me knew about everything. Strangely this changed my relationship with food and I gained control over my eating for the first time. However instead of eating healthily I barely ate at all. The thoughts and feelings I had around food were still intense and persistent but I didn't care as long as I wasn't eating. For once I was in control. And I loved it.

My weight plummeted and at first it made me feel happy; the nice remarks people made, having to buy smaller clothes, having control. It made me euphoric at times. However as time went on and I was diagnosed with anorexia, I became more and more obsessed; my whole life became about losing weight. I would avoid seeing friends just so I could stay at home and not eat. The meticulous weighing myself got worse and if I hadn't lost weight from the day before I would be extremely distressed. I was continuously calculating calories and looking at myself in the mirror.

Various therapy options were offered to me, some specifically for eating, and others for depression or just to talk to someone. I had appointments with someone from the child and adolescent services once a week which kept me afloat, but I knew that unless I went to university and tried to get on with things then nothing was likely to change. The first year was tough as I put on a lot of weight – which was needed – but I kept myself busy and met lots of new friends. I also joined a group of people going through similar experiences with food that met once a week. It helped to ease some of the intense feelings I had around food and gradually, over the next couple of years, food and my weight began to take up less and less space in my life and didn't bother me so much.

Core self: use tried and tested treatments for specific problems. Using tried and tested treatments is about the things that can be done to help boost the other things we do to build a child's resilience. By using tried and tested treatments and getting support for her mental health condition Megan could put other Resilient Therapy treatments in place. She could go to university (coping: being brave and learning: setting goals and mapping out a career or life plan). She made new friends (belonging: keeping relationships going) and went to a support group (core self: helping children to take responsibility for themselves).

I've also had the opportunity to talk and explore some of the things that have contributed to my problems with eating which has helped greatly. I'm not going to lie and tell you it's all hunky-dory now because it's not. I still go through bad patches and food is still something I seek to control when I'm feeling down or stressed. I still think I'm fat, although everyone tells me I'm not but I am doing better at believing them. The best and biggest change is that the persistent and invasive thoughts that gripped me and determined how I felt and saw myself have calmed down and don't have so much control over my self-esteem. I can even go out and enjoy a meal with friends. Recovery is a long process and my relationship with food will always be something I have to be careful about, but at least for now it doesn't control my life.



Based on Megan's experience here are some suggestions about what could have helped

Problem	How to help them through it
My child is embarrassed to eat in front of people.	Try to maintain a relaxed family meal time. Be aware and accepting. Don't pressure them to eat or make an issue about food.
My child has a negative body image.	Help them develop a positive self-image. Be aware of your own body image and how it may influence your child by giving positive feedback. Try to talk about how people have different attitudes to food/body weight and how this is natural and ok.
My child says they only feel in control when they do not eat or restrict their food.	Be aware that imposing control through not eating is not a good thing. Support them and work through what they are finding difficult.
I think my child is depressed and this is why they are not eating.	Try to encourage them to talk about what is going on and encourage them to get support from friends and continue with their favourite activities.
My child says they have recurrent negative thoughts and they keep expressing negative feelings about themselves.	Remind your child an eating disorder is not necessarily about food and that it can be about emotions, depression and invasive thoughts.
I'm worried that my child might have an eating disorder but they don't show all the symptoms and behaviours of a specific eating disorder.	Eating disorders do not necessarily fall under specific labels. Be aware that people experience mental health issues individually. People can maintain a healthy weight throughout their eating disorders and so you can't necessarily tell by their weight.
My child thinks they are fat and is obsessed with their weight.	Be loving and accepting of your child, no matter how they are. As a parent be aware of the comments you make around your child's body image. The problem won't just magically disappear so it is important to support your child as a family unit.

As a parent I'm quite over-protective of my child.

Be trusting and give your child space to breath. Being over-protective can be suffocating. Be supportive but not overbearing and this will help them to recover.



Anxiety

What is it?

Anxiety is related to fear, which is one of the most basic emotions humans (and all animals) experience. When we think of fear in relation to other animals it's easy to understand that fear can be a useful emotion, as it helps keep them alert, thus protecting them from threatening or dangerous situations. People are much more complex though, and sometimes experience fear when the situation is actually safe and there is no direct threat. Feeling anxious is all part of the human experience, but for some people the anxiety becomes so great that it starts to cause notable distress and regularly affects that person's everyday life. In these cases the person could be said to have an 'anxiety disorder'. Although no two people's experiences of an anxiety disorder will ever be exactly the same, we can group some common types of anxieties together. Common types of anxiety are:

- **phobias** – intense anxiety that is triggered by a particular stimulus, eg spiders, dogs, being in small spaces
- **social anxiety** – anxiety triggered by social situations, eg meeting new people, doing group work
- **generalised anxiety** – anxiety that is felt most of the time but with no obvious trigger
- **panic disorder** – experiencing unpredictable panic attacks, which are sudden bouts of overwhelming anxiety accompanied by extreme physical symptoms of anxiety (described below).

It is likely that someone experiencing distressing and prolonged anxiety will also feel depressed. Depression and anxiety very often go together.

What does it feel like?

When an animal experiences fear, it triggers what is known as the 'fight or flight' response to help them deal with the danger or threat. People physically experience this 'fight or flight' response when they feel fearful, and chemicals such as adrenaline are released in their bodies. Unfortunately for us, it isn't always triggered by physical danger – someone with a phobia of dogs may get that feeling from simply seeing a picture of a dog. They are likely to feel their heart beating faster, feel breathless, get 'butterflies' or stomach ache, feel pressure in the head, start sweating, feel restless like they need to escape and other uncomfortable symptoms. In the more extreme of cases, such as a panic attack, some people feel like they are going to die or lose their mind. People who suffer from panic attacks will experience these symptoms very strongly.

There are also emotional effects of anxiety. During the anxiety-provoking situation the person is likely to feel unable to focus or concentrate because their minds are preoccupied by the anxiety. Many people experience too many thoughts racing through their minds and this can seem overwhelming. The person may feel ashamed, weak, or embarrassed by their experience of anxiety (it is very important to reassure them that this is nothing to be ashamed of). They may feel helpless and out of control, which can have negative effects

on their self-esteem and confidence if the issues are not addressed. They may get themselves into a vicious circle by avoiding situations that they fear, which actually serves to keep the fear/anxiety going and deprives them of opportunities to cope effectively.



Amy's experience of anxiety

I have always felt quite anxious. When I was 10 I experienced a trauma. I watched a television programme I probably shouldn't have watched where two men were really violent to each other and one man ended up repeatedly flushing the other man's head in the toilet. At the time I couldn't understand or believe it – that particular violent act seemed like the most horrific and disgusting thing I had ever seen. When I tried to speak to my mum about it she shouted at me for it and so I did not tell the rest of my family in case they told her or they also ridiculed me.

Belonging: help your child to understand their place in the world. Your child is a child first with strengths and qualities like the rest of us. Value and welcome their diversity. Help them find ways that strengthen their resilience. If Amy had been supported by her Mum after her terrifying experience then Amy would have felt valued and loved; home and family life would have felt like a dependable safe base.

Because of this I tried to deal with it on my own. A few months later my family moved house. I didn't know anyone so withdrew more and more. My fears became a real phobia around this time and this meant that my anxiety was expressed in strange ways such as having to touch wood several times or say a phrase to protect my family. I had lots of protective behaviours too, to avoid TV and films that contained violence and I became adept at making excuses to leave rooms in case people worked out what the source of my anxiety was which made me feel isolated.

As well as thinking that everyone was constantly talking about the violent act, I believed everyone was out to get me. When I got on the bus I thought I could hear people whispering and talking all about it and making jokes about it. I had to constantly check to see how safe a situation was. It was exhausting. Because I was focusing on that all the time I didn't have time to make friends with other people. I was known as weird and would spend break times alone at school. I hated being so scared of this disgusting thing and the shame of people finding out would be paralyzing.

Learning: engage with mentors. Research shows that children do better in school if they have one or a few individuals your child can trust. Mentors support children's development and learning in a range of situations. If you notice that your child is not happy then it is important to try to encourage a mentor to help your child. If your child needs someone to help them at school find out if your school has a mentoring scheme and ask if your child could be referred to their scheme.

Home life was difficult. By the time of puberty my relationship with my mother had completely broken down and now I would not open up to her about anything. I had many protective strategies, such as hiding away from violent films. In general school was hard – I had to read text in school books in advance to make sure that it did not have that disgusting, violent act mentioned in it. I was always thinking and planning ahead, always trying to assess the risk of my source of fear coming up in things like books, films, or conversations.

Slowly at school I made some nice friends and the first person I ever told about it was a school friend when I was 15. I couldn't bear to tell her verbally, I had her read it in a book. Shortly after that I started my GCSEs and it was mentioned in a text that could have been used for an English exam. I forced myself to confide in a teacher, although I

had to have my friend tell him because the shame of doing it myself seemed too overwhelming. The teacher really understood and let me work how I wanted to outside of the classroom. He also suggested I talk to my parents and see a counsellor.

Learning: make school life work as well as possible. School can not only provide the structure to help your child learn new things it can also offer access to people who can help and build a child's self esteem. Amy's teacher could see that Amy needed support and encouraged her to see a counsellor.

I didn't want to tell my parents so I went to my GP who referred me to a counsellor who I could to speak to about everything, all in confidence. When I was 16 I met my current boyfriend who helped me a great deal and understood what I was going through. Also his family were really supportive and a lot more supporting than my family!

Belonging: the more healthy relationships the better. Increase the number of good influences in your child's life. Make healthy relationships stronger and more influential than negative ones. Keep relationships going. Children need people in their lives who will commit to them and accept their situations. Amy built relationships with people who she could talk to and share what she was going through. Amy's relationship with her boyfriend's parents provided Amy with a safe dependable base and somewhere to belong.

At 19 I went to university and over the course of the three years there I saw three more counsellors and finally a psychiatrist. I knew that cognitive behavioural therapy (CBT) would be best for me, but the psychiatrist wanted to put me on medication. I gave the meds a go but had bad side effects within a few days, so I stopped taking them. When he suggested I try more medication I stopped seeing him.

After graduating I finally got a referral to a CBT therapist which was a real turning point. As he had overcome a phobia himself he had perfect empathy with me and with his support I worked through my way of thinking. He helped me expose myself to frightening situations and help me to push my boundaries while at the same time knowing not to push me too far which helped me realise I could cope with anything!

Core self: instill a sense of hope. Gaining hope is often seen as a turning point in a person's life. Amy's CBT therapist gave Amy hope as he had overcome phobia himself and could really understand what Amy was going through. Hope is about the future and the possibility and promise that life can be different to how it is now, that it doesn't follow the expected pattern or negative path some might have predicted and, it can help your child to become more resilient.

It's taken me 13 years to shed my fears, but if I could go back in time I wouldn't change a thing. I have used my pain as something to learn from and grow as a person, and now I feel so peaceful and happy inside. I don't have to plan for everything now... it makes me feel so free. I am also in a better position to take care of others and my loved ones. I feel no bitterness or resentment towards my mother any more, even though I'm not sure if she'll ever be able to talk to me about this. I now have more time for healthy positive relationships in my life, and am so excited at the prospect of helping others manage their anxiety through my upcoming employment within the NHS mental health services.

Based on Amy's experience here are some suggestions about what could have helped

Problem	How to help them through it
My child is really anxious and I don't know what to do.	Try to stay calm and try and talk to them to find out what is wrong.
My child has persistent and obsessive habits.	Be patient and don't become frustrated. Educate yourself about compulsive behaviours and anxiety and seek support for you and your child
My child is isolating themselves.	Gently talk to them about why they have become isolated, without pressurising. Approach them in a normal way and encourage them to talk about it.
I'm really worried about my child. She has few friends. She says people call her weird and tends to spend break times alone.	Speak to your child and, with your child, speak to the school and work with them to solve the issue. What support do they have available? Are there any clubs at school the child could get involved with? Also explore outside groups and clubs and seek positive influences for your child.
I've just found out my child is seeing a counsellor.	Support them and tell them it is a positive step forward. After counselling make sure there is a safe space for them to go to and just there for them.
I haven't got a clue how to talk to my child about their issues.	Seek support and advice. Read and learn about their issues.

How Resilient Therapy can help you and your child

For all the above mental health issues, and indeed mental wellbeing in general, there is a lot you can do in your day-to-day life to make the situation better, and to keep things on a more even keel. Here is a recap of the things you can do, as outlined in the Resilient Therapy toolkit.

Basics

Good enough housing – make sure your child has a room or corner of the house that is their safe place where they can retreat and have quiet time.

Enough money to live – basic necessities are really important and can encourage family life to be stress-free as possible.

Being safe – encourage the family home to feel like a safe, open, relaxed environment where your child can experience rest and complete 'head space'.

Access and transport – be aware of how overcrowded buses and transport can affect a young person who is experiencing mental health problems.

Healthy diet – encourage dinner-time to be a stress-free time and not a time for focus on mental health issues.

Exercise and fresh air – encourage your child to sit peacefully outside on a park bench or hilltop and breathe in the fresh air.

Playtime and leisure – allow your child to balance times where they need their space listening to music and reading in their rooms with other times that they spend with family.

Being free from prejudice and discrimination – be pro-active and make sure your child has a stress-free life as much as possible (no bullying or discrimination).

Coping

Understand boundaries and keep within them – agree with your child that if their mental health issues become too extreme then, as a parent, you will intervene. This will make everyone feel more secure. Although your child may resist, after they have recovered they will probably thank you.

Be brave – help your child understand the triggers of things. Awareness is the key to feeling better and encouraging them to understand their uncomfortable, scared feelings and how this is affecting their mental health.

Solve problems – realise you can't instantly fix your child's mental health issues. They will slowly recover in time. If you do try to solve problems it is important to discuss issues fully with your child as much as possible and encourage them to be part of the process.

Put on rose-tinted glasses – remember, your child will grow and learn from the mental health experience and they will recover.

Foster their interests – create a safe space in your house where your child can retreat and listen to music or write or read. Fostering their interests can help them escape their mental health issues.

Calm themselves down (self-soothe) – encourage your child to notice when they are becoming stressed, anxious or depressed and look at ways they can calm themselves to feel better. Also encourage them to explore what caused or triggered their stress or anxiety in the past.

Remember that tomorrow is another day – young people who volunteer for Experience in Mind have recovered from their mental health issues and it is likely your child will recover.

Help your child to lean on others when necessary – try to encourage your child to share their experiences with others and surround them with people you and they trust and who they can lean on.

Learning

Make school life work as well as possible – make school life as comfortable as possible by making teachers, mentors and pastoral support aware of what your child is going through.

Engage mentors for children – find individuals you can trust to give your child specialist support: school counsellor, school mentor, key worker, social worker, Connexions worker, youth worker, next door neighbours, favourite auntie...

Map out career/life plan – encourage your child to have a sense of purpose and help them think about how they would like to create their future. It doesn't have to be related to school achievement. It could be riding a bike in the country or watching a new film that has been released at the cinema or reading a book.

Help the child to organise themselves – structure and routine can help your child feel safe. Especially when they are deeply distressed and feeling vulnerable when they are experiencing mental health problems.

Highlight achievements – notice, recognise and talk about small successes and really value what they have achieved.

Develop life skills – break things down step-by-step and don't be upset if their recovery doesn't go to plan. Try to help your child to explore strategies to help with their mental health.

Belonging

Find somewhere for the child to belong – really try to understand your child’s experience. Make them feel valued and show them you totally believe that their experience is valid and true.

Tap into good influences – help them find a place or group where your child fits in and doesn’t have to hide or be ashamed about their mental health experience. Find a self-help group where they can talk and be really honest and open.

Keep relationships going – find people who can commit to helping your child and arrange times for them to do things with your child individually as a family and with other young people.

The more healthy relationships the better – animals are great healers as well as aunts, uncles, grandparents, family friends and people who can be a positive influence on you and your child’s life.

Take what you can from any relationship where there is some hope – encourage your child to join a regulated website such as BEAT Forum (eating disorder website) or Young Mind so they can speak to other young people who are in recovery.

Get together people your child can count on – make sure your child is surrounded by sensitive people who show compassion and respect.

Belonging involves responsibilities and obligations too – encourage your child to feel useful and a valued member of the family where they share an important role in family life.

Focus on good times and places – look through photo albums together, have a film night once a week, walk the dog on Sunday together. Make time for your child that isn’t just focusing on mental health issues.

Make sense of where a child has come from – help your child understand their history and what makes them who they are. Encourage your child to talk about their experience and what they are learning about themselves and how this connects with the past.

Predict a good experience of someone/something new – help them believe that they can recover and help them take risks to become confident. Encourage them to join support groups or communities that enable them to be part of something.

Help your child make friends and mix with other children – help them find a peer support group that understands what they are going through.

Help your child understand their place in the world – learn and read about what they are experiencing. Watch TV programmes and talk to other people about it. Accept their mental health issue and allow it to be part of family life and not something that is hidden or taboo.

Core self

Instill a sense of hope – let them know they have not failed and it is not the end of the world. They are still a loving wonderful person and they will and can recover from their mental health issue.

Teach your child to understand other people's feelings – encourage them to volunteer or be part of a peer support group where they can listen and hear other young people's mental health experiences.

Help your child know themselves – encourage them to keep a diary or record of their thoughts or feelings. This can be done visually through art, voice recordings or a diary.

Help your child take responsibility for themselves – come up with a system with your child so that they can let others know what they are feeling. For instance, they could use a number between 0–10 where 5 is 'normal' and 10 is 'highest manic'. This is particularly useful if the young person has problems expressing their feelings and letting others know how they feel.

Foster their talents – encourage and support their interests and things they find useful to improve their self-esteem.

There are tried and tested treatments for specific problems, use them – create a network of professionals that can support you and your family.





Section 3

Professional help

Introduction

Resilient Therapy gives us lots of ideas about what parents and young people themselves can do to get back on track. To put some of the ideas of the toolkit into action though, it might be useful to have professional support and involvement. But don't expect miracles and remember, sometimes what you, your family or your friends can do is the most important thing.

Remember the noble truth called enlisting? This is all about getting the help of others, 'enlisting' them to support you and your child. You can enlist different professionals for different reasons and recruiting others can be really healthy. It can be highly beneficial to develop communities of people around you who appreciate and value the effort you and your child are making. It can make a world of difference when, as a parent who is running out of steam, you get together with professionals.

Here we take a brief look at the types of help that are available, and how they can help develop the tools of the Resilient Therapy toolkit: **basics, belonging, learning, coping** and **core self**. But remember, our list is not exhaustive. Your child may well get additional benefits beyond those mentioned here.

Remember also, the starting point is usually a talking with your family doctor. They will then help you find the extra help that is right for you and your child.



Dealing with professionals

Who to go to

The first port of call for most people is your GP who will refer you if necessary to further help within the NHS. However, if you or your child do not feel comfortable talking to your GP there are lots of other ways to get help including your child's school which might be able to sort out difficulties and provide extra support. They can also make referrals to the Child and Adolescent Mental Health Services (see below).

You can find out about other support services by contacting your local council's social services or youth advice service.

For many parents, having to deal with an array of professionals can be as daunting as having to support the young person. For some people, it is even more daunting. Using the Resilient Therapy framework can help. If you are feeling anxious then you could apply calming techniques (calm yourself down – coping); if you are having a particularly hard time ask a friend to go with you to a meeting (get together people you can count on – belonging) and be brave. Remember, having your child's needs considered and taken seriously is your right (be brave – coping).

Meeting with professionals

Meetings usually go better when you prepare. It helps you to feel more at ease. Because it's not so easy to think on the spot, make a list of questions and points you want to raise and take it with you.

At the meeting ask questions and keep asking questions if necessary until you have the information you want in a way that makes sense to you. Before you finish the meeting, summarise what you think has been said and what people are agreeing to do next.

After the meeting jot down what was agreed because you might forget the detail in a few month's time. It helps to keep a record of all that's gone on. Apart from reminding you of the hard work you're putting in, if things get problematic and people haven't done what they said they would, you've got something to refer back to.

Child and Adolescent Mental Health Services (CAMHS)

Child and Adolescent Mental Health Services (CAMHS) provide specialist mental health services. It is a multidisciplinary service, that is it includes a range of child mental health professionals such as child psychiatrists, child psychotherapists, family therapists, children's psychiatric nurses) and therapists such as art therapists.

The CAMHS team will work with you as a parent to help sort out your difficulties. They can identify the problem, understand the causes and advise you about what may help. You will usually be referred to CAMHS, if necessary, by your GP who is your first port of call. In some areas you as the parent or carer can refer your child to see a specialist. To find out more about this, contact your local council's children's services.



Talking therapies

A talking therapy is where a young person can talk through and resolve issues with a trained practitioner. There are a large number of different practices that professionals may follow and there are a huge number of books, websites and other publications about this subject. Talking therapies can be used in one of two ways within the field of mental health. Firstly, there is straightforward referral for a specific talking therapy – a young person is referred to a professional with specialist training in one or more therapies to address a particular mental health-related issue.

Secondly, a young person's key worker (Connexions or youth worker for example) may be trained in one or more talking therapies. In this case it is likely that they will use elements of talking therapies in their daily work.

Every young person has different ways of coping with personal difficulties. Young people often deal with stressful situations and events by talking to their parents, a family member or a friend. However, in certain situations encouraging your child to speak to someone outside the family may be more helpful.

You may have heard of counselling, cognitive behavioural therapy (CBT) or psychotherapy. These are all different types of talking therapy, but they share some common features. All can be a positive way of addressing any unresolved issues that your child may have. It can also help young people to better understand their problems, rather than ignoring them and hoping that they will go away, only for them to come back later. It can also give a young person a better understanding of other people's points of view.

For some problems and conditions, one type of talking treatment may be better than another. Different talking treatments also suit different young people.



Counselling

Counselling can help a your child make sense of their life, resolve specific problems, help decision-making and many other issues affecting emotional and mental wellbeing.

Some counsellors may go through a whole list of options, and examine the pros and cons of each, so your child can make better-informed decisions. Others counsellors may just listen (speaking out loud about their problems helps a young person put their thoughts in order). The counsellor will not tell a young person what to do, and they will be left to make their own choices.

The possibilities are endless, and will depend upon a combination of your child's particular problem, and the style of counselling used by the counsellor.

Relevant Resilient Therapy toolkit themes

- Coping:** understanding possible boundaries and keeping within them; helping your child understand, explore and negotiate boundaries; helping your child discover things that they may not have considered before.
- Basics:** being free from prejudice and discrimination, helping your child explore how they can feel more resilient against bullying. This can impact on your child's identity and internalised sense of self-worth.
- Belonging:** making sense of where your child has come from –positive shared story-making, self-talk and story-telling is a way a child can learn and manage life events and change



Cognitive behavioural therapy (CBT)

CBT is a short- to medium-term therapy that focuses on the present. CBT is based on the idea that emotional distress is caused by the way we think, and that changing our way of thinking eases worry, anxiety and emotional distress. The therapist helps your child to examine their self-beliefs, perceptions and thinking patterns, and identify how these affect their emotional wellbeing and actions. Homework between sessions is a key part of CBT, which may consist of journal and diary keeping, as well as experiments to test out new ways of thinking and responding. In CBT the client takes a very active role in the therapy, which can help them feel positively responsible for their recovery and can encourage pride when they make progress, ultimately increasing confidence in the self.

For example: a girl sees her friends whispering and instantly assumes that they are talking about her in a negative way. The therapist would help your child to recognise that these are irrational thoughts not actually based on external evidence. It is only her interpretation. She can learn methods to take a more positive, less harmful approach to what she sees.

Relevant Resilient Therapy toolkit themes

- Coping:** solving problems. CBT can enhance your child's cognitive intelligence and help increase their ability to generate different solutions to potential problems and negotiate their way through hardship.
- Core self:** instilling a sense of hope. Hope can help your child move on and be a turning point in your child's life through trying out new ways of thinking. They can come to understand that certain obstacles that seem difficult can be overcome through changing thought patterns and responses or reactions to stress.
- Coping:** putting on rose-tinted glasses helps people see their past experiences in the best light possible, helping them to develop more adaptive, resilient view of their lives.



Family therapy

This may be offered when the whole family is in difficulty. The therapist explores their views and relationships in order to understand the problems the family is having. It helps family members communicate better with each other. Family therapy helps a family explore how it is structured and how people within that family relate to each other. The family unit works together to share an understanding of what the problem is as a whole. In family therapy each member can explore their perceptions of the relationship between different family members. It helps explore false beliefs and misunderstandings between family members and resolve communication problems.

Relevant Resilient Therapy toolkit themes

Belonging: finding somewhere for your child to belong, helping your child feel they belong as part of your family, helping create a sense of family cohesion; keeping relationships going, understanding your child's needs more, through consistency and commitment; taking what you can from any relationships where there is some hope. More positive involvement in your child's life, rebuilding your relationship with your child, applying the noble truths of conserving, accepting and commitment; helping your child feel they have an appropriate role in your family with responsibilities and obligations. This helps your child develop self-esteem and a sense of self-belief.



Child psychotherapy

This works at a deeper emotional level with your child than counselling. The psychotherapist will work with your child, sometimes for as long as a year, to identify and explore difficult and often painful feelings and experiences, including feelings of anxiety, depression, trauma, or perhaps the loss of meaning of one's life.

Relevant Resilient Therapy toolkit themes

Belonging: keeping relationships going, understanding your child's needs more, through consistency and commitment, understanding past family experiences

Core self: teaching your child to know themselves. The child psychotherapist can help your child become more self-aware, develop a stronger sense of identity and function better;

teaching the child to understand other people's feelings, empathise more, be more attuned and aware of other people's feelings and to become more self-responsible.

Interpersonal therapy

This therapy is a kind of psychotherapy designed for working with children who experience depression. It aims to improve your child's relationships with other people and help the social side of their life. It is based on the idea that a young person's depression is often linked to things like a fight with a parent or falling out with friends. These types of events can trigger depression. But the depression may also come first, and their mood might lead to fights or school problems. Either way, during interpersonal therapy, the therapist encourages the young person to learn new and better ways of relating to people.

Relevant Resilient Therapy toolkit themes

Core self: teaching your child to understand other people's feelings and encouraging your child to put themselves in other people's shoes and to be sensitive and understanding of what someone is experiencing and the impact their behaviour has on other people;

helping your child take responsibility for themselves. This can help your child become more aware of their needs and they can begin to decide on what they want out of life. They can also decide to be with peers who are actively pursuing their plans for the future. They can be more discriminating about the positive influences in their life;

helping your child understand themselves, allowing them to get realistic feedback, assess their capabilities and highlight their achievements.

Coping: helping your child imagine alternative solutions and solve problems they may face in different situations.

Psychoanalytic counselling

Psychoanalytic counselling helps your child explore unconscious beliefs about their personal motivations, which result in conflict between expressed goals and actions. The therapist will help your child gain awareness of how unconscious drives influence their intentions, desires and beliefs. This awareness helps the young person to make better decisions and choices and change repetitive behaviours that are rooted in the past, especially in early childhood experiences.

Relevant Resilient Therapy toolkit themes

Belonging: keeping relationships going, understanding your child's needs more, through consistency and commitment, understanding past family experiences.

Core self: helping your child take responsibility for themselves. This is useful because it helps your child learn to manage their life and their emotions.

Coping: being brave, helping a child expand their horizons giving them new possibilities for personal development and self-fulfilment.

Anger management

This is a form of counselling that helps your child cope with any angry feelings that have a negative effect on their education, behaviour and personal relationships. Anger management commonly uses techniques and exercises that help a young person control or reduce the triggers that make them angry. The goal of anger management is to help your child to stop triggers that cause your child's anger to erupt. Your child can't get rid of, or avoid, the things or the people that make them angry, nor can they change them, but they can learn to control their angry reactions.

Relevant Resilient Therapy toolkit themes

Coping: calming themselves down (self-soothing) can stop anxieties and emotions from escalating. Your child can learn about the triggers that make them angry and how these emotions manifest in their body. Your child can then learn strategies to calm themselves down at difficult moments;

being brave, encouraging your child to take new risks and try out new ways of behaving and relating to other people;

understanding boundaries and keeping within them. This is where your child can learn to negotiate a co-existence that enables them to get along reasonably well with others.



Self-esteem groupwork

In a small group, with other children of the same age, your child can learn about their identity and explore issues around their low self-esteem. The group may be run by a trained therapist, mentor or teacher. Through the use of groupwork methods such as games and creative activities and the support of other children your child can build their confidence and self-esteem.

Relevant Resilient Therapy toolkit themes

Core self: fostering their talents. This can encourage your child to try out new things in the group and discover areas in their lives that they have not developed.

Belonging: helping your child make friends and mix with other children. This will help your child make appropriate good friends. Your child can form safe and secure friendships where they are accepted for who they are. This can encourage them to further grow and take risks in life;

helping your child to lean on others when necessary. With gentle encouragement from other group members your child can learn to ask for help;

tapping into good influences. Group members can support each other and act as role models. Being supported by other group members can help build your child's self-esteem;

predicting a good experience of someone/ something new – groups can be a springboard to developing positive relationships.

Learning: developing life skills. A supportive group environment can help your child notice and foster their talents.



Life coaching

This coaching tends to focus on an existing problem (from which to move away) or a specific outcome that the individual wishes to achieve (to move towards). This is achieved through questioning and visualisation exercises that raise awareness and encourage reflection.

A life coach will work with your child to find the most appropriate tools and strategies to explore their hopes for the future. Life coaching has a positive and nurturing approach and can support people to move forward without necessarily having to address issues they are not ready to face.

Additionally, if your child has other issues that need to be addressed, coaching may help them to become more positive and able to engage with another model of therapy.

Relevant Resilient Therapy toolkit themes

Belonging: focussing on good times and places. Life coaching can help your child review the good times in their life. This can help them reconnect to people in their family.

Learning: highlighting achievements. A life coach can help your child have clear, definable goals. The effect of this could build a child's self-esteem and confidence;

helping the child organise themselves. A life coach can help your child develop skills to self-manage and be more organised;

mapping out a career/life plan. A life coach can help your child develop a strong sense of purpose and help them achieve their goals and working towards a positive future.

Creative arts therapy

This is helpful for a wide range of emotional and behavioural problems arising from the complex issues that children face today. Using art and a creative toolkit your child could explore and express their feelings and concerns without always having to rely on words.

The creative process involved in creative arts therapy – painting, drawing, writing and drama – can be healing and life-enhancing. Creative arts therapists use the creative process and the issues that come up to help your child increase their insight and judgement, cope better with stress, work through traumatic experiences and have better relationships with family and friends. Children can also enjoy the life-affirming pleasures of the creative experience.

Relevant Resilient Therapy toolkit themes

Belonging: helping your child understand their place in the world. Through drawing, painting and so on your child can explore their identity and sense of belonging. This can help them understand, explore and create a greater understanding of their place in the world

Core self: fostering their talents. Whether it is photography, painting, poetry, drama... your child's undeveloped talents could slowly emerge.

Coping: calming down (self-soothing). Many artistic endeavours can help your child calm down and gain control over difficult situations



Mentoring

A mentor can be anyone who is a good role model for your child and someone who they can trust and confidentially talk to. Your child can have an informal mentor who could be a close family member, a neighbour or family friend. Alternatively you could get formal support for your child through various organisations. Schools often have mentoring schemes where support staff work as mentors or older students are peer mentors. Other organisations such as youth offending teams and young people's care services may also have mentor schemes.



Relevant Resilient Therapy toolkit themes

Belonging: taking what you can from any relationship where there is some hope. A family friend, neighbour or babysitter could all be mentors. Look at relationships in a different light. Some relationships may be far more positive than you think; getting together people you can count on. Help your child maintain a good number of continuous healthy relationships who can act as mentors.

Learning: making school life work as well as possible. if your child is struggling at school ask the school if your child can be mentored. A mentor can help support your child with the struggles of school life, build your child's self-esteem and help your child smooth out any difficulties that they are facing.

Family support workers

Family support workers offer practical help and emotional support. The family support worker will help you as a parent to assess your situation and consider what resources your family and community have to address the issues and what additional support would be needed.

Most significantly family support workers can work with you as a parent to help reduce and tackle any inequalities you, your child and family are experiencing.

Contact your local authority to find out about family support services

Relevant Resilient Therapy toolkit themes

Core self: instilling a sense of hope. Working with a Family Support Worker you could plan for the future and feel a sense of hope.

Basics: getting good enough housing. Through advocacy and support a family worker could help you with problems such as fuel poverty, and poor living conditions – eg damp, overcrowding;

having enough money to live on. A family support worker could support and help you gain access to benefits, family tax credits, child care and back-to-work schemes;

being safe. If you are experiencing safety issues, for example with bullying or vandalism, a family support worker can help you overcome them with support and advice.



Medication

Medication can be controversial. Some people find it very helpful while others are not so keen. Resilient Therapy suggests it can be really useful to use tried and tested treatments for specific problems, especially in limiting negative chain reactions. It is useful to explore the possible benefits of medication and therapies that can directly, and often swiftly, change something fundamental.

There are a great many medications used to help with mental health issues. These can be broadly grouped by their chemical function in the brain. Many medications can be used to treat multiple issues and are generally not completely specific to one diagnosis.

Why use medication?

For a parent, taking medication or even just considering it can be a worrying idea. The most common concern is that your child will become like a 'zombie' emotionally and behaviourally. However medication can greatly increase your child's quality of life, alleviating symptoms that cause distress and offering a window of hope.

Alleviating symptoms that are causing distress or problems means the young person can cope better with what they are going through, and see light at the end of the tunnel. However, bear in mind that medication can only mask the causes and other treatment should be sought. It is important to note that medication is not a quick fix and the beneficial effects may not occur for several weeks. It is also possible that your child will appear to get worse before they get better. As a parent endurance and patience are needed, particularly within the first few weeks. Most anti-depressant medication, for instance, takes at least two weeks before taking effect.

It is also important to be aware that medication is often used with talking therapies which, although harder to get (there is often a waiting list, for example) can help your child considerably in coping with their mental health issues.

Although medication can provide great benefits it is important to remember that sometimes side effects can occur. Like all decisions, decisions about medication need to be taken balancing up the pros and cons, and in consultation with your doctor and other professionals. Side effects, if they do occur, may well be balanced out by significant health gains.

Getting medication for your child

The first port of call is to speak to your doctor. They will talk to you and your child about the appropriate medication and about further support within the NHS. They might refer you to a specialist, or for talking therapy.

Mental health charities such as MIND publish guides to medications and offer support and advocacy in the mental health system.

Types of medication

Anti-depressants

There are several categories of anti-depressants primarily used to improve persistent low mood.

They can help your child cope with their issues much better and help people avoid being stuck in negative cycles because of their low mood. A child's quality of life can be greatly improved through the use of anti-depressant medication and it does not need to be for life. Anti-depressant medication can be used as a helping hand during particular crises and as a stopgap until counselling or something similar can be provided.

Most medications prescribed today influence the brain's processing of the important chemical serotonin. Side-effects can include nausea, stomach problems and headaches.

St John's Wort is a herbal remedy that many people take for mild depression. Although this is available over the counter, you and/or your child should discuss it with your doctor first and it should not be taken at the same time as prescribed anti-depressants.

Mood-stabilising medications

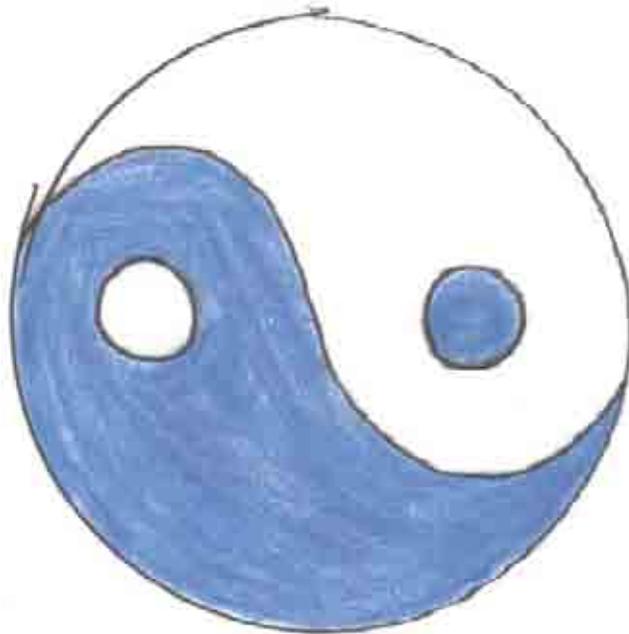
This medication helps to stabilise the mood of your child who is experiencing emotional instability. Mood stabilisers can greatly improve your child's quality of life by reducing the problems that are caused by both manic and depressive moods which can have a significant negative effect on your child's life. This allows your child to have greater stability in their life and relationships and less agitation. Mood stabilisers are often used for bipolar disorder.

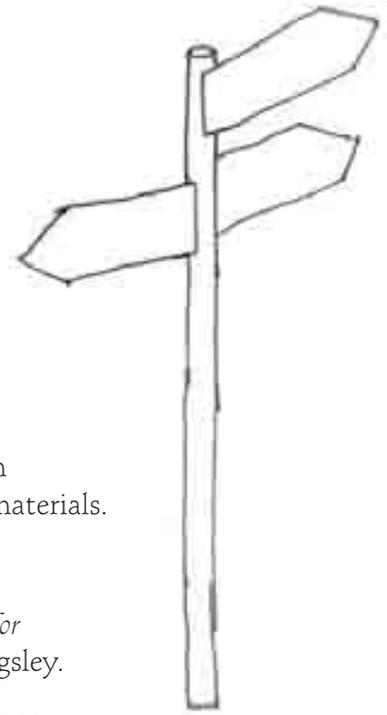


Anti-psychotics

The name 'anti-psychotic' may sound scary, particularly as mental health terms such as psychotic are often (incorrectly) used with negative connotations in the media. Anti-psychotic medication is used for a wide range of diagnoses such as schizophrenia and mania and psychotic episodes linked to bipolar disorder.

Anti-psychotics are used to alleviate hearing (auditory) and visual hallucinations –hearing voices and seeing things. This medication can play a positive role and can greatly enhance your child's functioning. Many of the newer anti-psychotics can be used as mood-stabilising medication either on their own or with other mood-stabilising or anti-depressant medication.





Further help and support

The Resilient Therapy website www.boingboing.org.uk defines resilience, gives more information about research and resilience in practice, and tells you where to find resilience publications and materials.

Books you might find useful are:

Helping Children with Complex Need Bounce Back: Resilient Therapy for Parents and Professionals. K Aumann and A Hart, 2009, Jessica Kingsley.

Resilient Therapy, Working with Children and Families. A Hart, D Blincow and H Thomas, 2007, Routledge.

The Young Mind: An Essential Guide to Mental Health for Young Adults, Parents and Teachers. S Bailey and M Shooter, 2009, Bantam Press.

Problems with the NHS

Know your rights

You and your child have rights covering:

- the right to confidentiality within the child protection laws
- the right to have an advocate to represent your case on your behalf
- the right to complain about any part of the service you are not happy with.

Patient Advice and Liaison Services (PALS) is the best starting point for problems with treatment from local NHS mental health services. You can also contact them to get an advocate for most issues regarding the care you have received. www.pals.nhs.uk

For advocacy see:

Action for Advocacy www.actionforadvocacy.org.uk

Citizens Advice Bureaux www.citizensadvice.org.uk

Together www.together-uk.org

The Independent Complaints Advocacy Service www.carersfederation.co.uk/what-we-do/icas

www.headspacetoolkit.org is a website for young people who are psychiatric unit inpatients concerned about the support they are getting.

Support services

Anxiety UK

08444 775 774

www.anxietyuk.org.uk

- Information on how to support someone who has anxiety
- Information on specific phobias
- Information on different therapies

Amaze (parent line plus)

01273 772289

Info.amazebrighton.org.uk

- Support for parents with children living with high levels of needs or disabilities
- 24-hour helpline for parents and carers

Allsorts

01273 721211

info@allsortsyouth.org.uk

- Support for young people who are lesbian/gay/bisexual/transgender/ unsure
- Allsorts offer one to one support on the internet, telephone and face-to-face. There is an opportunity for your child to talk about any practical or emotional issue

BEAT

Helpline 0845 634 1414

Beat Youthline 0845 634 7650

www.b-eat.co.uk

- Provides helpline, online support and self help groups for those with eating disorders and their families

Bristol Crisis Service for Women

0117 925 1119

www.selfinjurysupport.org.uk

- A national organisation that supports girls and women in emotional distress who self harm
- Provides helpline, information and training.
- Telephone, email and text support, leaflets, publications

Brighton Lesbian, Gay Bisexual, Transgender and Unsure Switchboard

01273 204050

www.switchboard.org.uk

Info@switchboard.org.uk

- A service that supports anyone who is affected by issues of sexual or gender identity
- This service offers support and information through phone, email and website
- Offer subsidized counselling service

Childline

0800 1111

www.childline.org.uk

- Accessible and used confidentially by children
- Can also be a good resource to parents
- Gives children advice to wide range of issues, can talk to an online counsellor or send an email or post on message

Depression Alliance

www.depressionalliance.org

- Provides help and information about depression and self help groups
- Gives advice on how to live with depression
- Support for family and friends and how to get help

Fathers Direct

www.fathersdirect.com

- Gives information and support to fathers; lobbies and challenges government policies

Frank

0800 77 6600

Text 82111

www.talktofrank.com

- Provides A–Z list of substances, explains their appearance and use, effects, health risks, possibility of addiction and the UK law
- Resource for young people and parents. Includes information about drug taking and how to deal with peer pressure
- Provides confidential advice through helpline, email, texting service and publications

Mumsnet

www.mumsnet.com

- Information and support around parenting a teenagers
- Information around living with teenagers, school, health, the law and how to better engage with teenager

Mind

0845 767 8000

www.mind.org.uk

- A–Z Mental Health, diagnoses, conditions, treatments, rights and legislation.
- Information on what to do in a crisis
- List of helplines and publications

National Self Harm Network

0800 622 6000 (7pm–11pm)

www.nshn.co.uk

info@nshn.co.uk

- Support and information for people who self-harm.
- Information about what is self harm, misconceptions about self harm, how family and friends can support someone who is self harming
- Helpline and online support

Relate

0300 100 1234

info@relate.org.uk

www.relateforparents.org.uk

- Advice, relationship counselling, consultation and gives support by face to face, by phone or online counselling
- Can provide specific support to young people who need to talk as well as family counselling and relationship counselling
- Mediation to help families deal positively with the practicalities of separation and relationship breakup providing support with finance, property and parenting issues

Samaritans

08457 909090

jo@samaritians.org

Chris PO Box 9090 Stirling, FK8 25A

- Confidential, non-judgmental, emotional support twenty four hours a day to those experiencing despair, distress or suicidal feelings
- Can telephone, email, write a letter or (in some areas) meet face to face to talk about distress
- Website provides information about emotional health, managing stress and suicide

Sane

0845 767 8000 (6pm–11pm daily)

SANE.org.uk

- Help with understanding current mental health treatments, law and the mental health system
- A national out-of-hours telephone helpline offering emotional support and information for people affected by mental health problems
- On-line service that offers support, information and options

Young Minds

0808 802 5544

parents@youngminds.org.uk

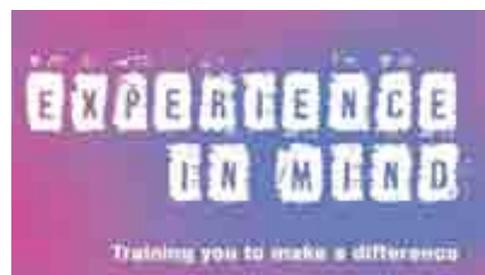
- A resource for parents and young people. Website section called My Head Hurts provides advice on mental health treatments and where to get help for children and young people
- Parents can learn more about the different treatments that are available, their effects and where to find the right one for your child
- This site has a check list to help you if you unsure whether to ask your doctor about a treatment or mental health concern

Other support

Student advice centres in your child's school or college will have up-to-date information on services such as counselling.

Information drop-in centres such as youth advice centres and Connexions, a national service for young people aged 13–25, can put you in touch with a personal advisor who can help you with appropriate support. See www.connexions-direct.com.

Youth Access (www.youthaccess.org.uk) provides advisors and counselling nationwide.



Appendix: Resilient Therapy Toolkit

Basics	Belonging	Learning	Coping	Core Self
Good enough housing	Find somewhere for the child to belong	Make school life work as well as possible	Understanding boundaries and keeping within them	Instil a sense of hope
Enough money to live	Help child understand their place in the world	Engage mentors for children	Being brave	Teach the child to understand other people's feelings
Being safe	Tap into good influences	Map out career or life plan	Solving problems	Help the child to know her/himself
Access & transport	Keep relationships going	Help the child to organise her/himself	Putting on rose-tinted glasses	Help the child take responsibility for her/himself
Healthy diet	The more healthy relationships the better	Highlight achievements	Fostering their interests	Foster their talents
Exercise and fresh air	Take what you can relationships where there is some hope	Develop life skills	Calming down & self-soothing	There are tried and tested treatments for specific problems, use them
Enough sleep	Get together people the child can count on		Remember tomorrow is another day	
Play & leisure	Responsibilities & obligations		Lean on others when necessary	
Being free from prejudice and discrimination	Focus on good times and places		Have a laugh	
	Make sense of where child has come from			
	Predict a good experience of someone or something new			
	Make friends and mix with other children			
	Help child make friends and mix with other children			