



Webinar Handout Pack

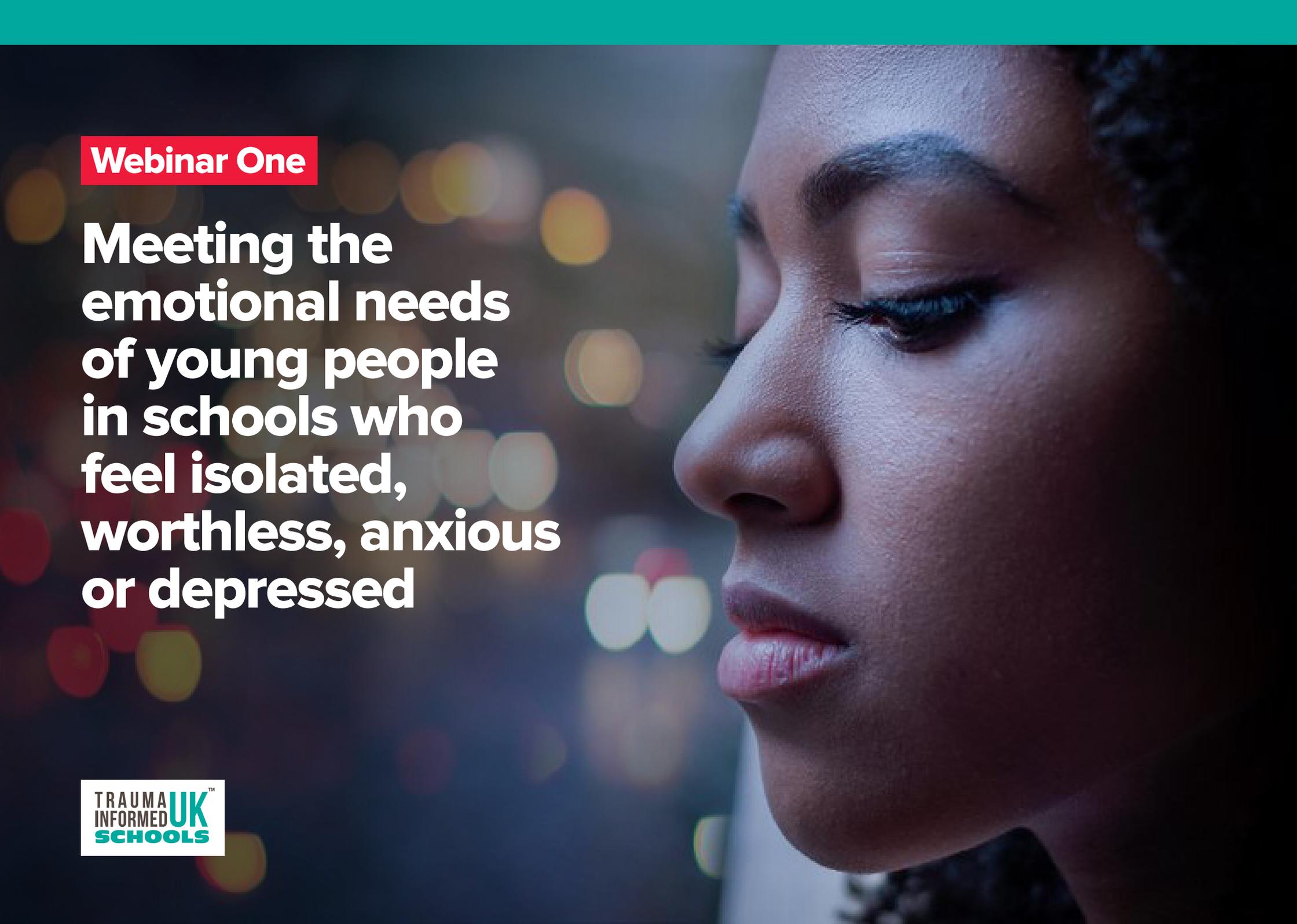
Supporting the mental health of vulnerable young people in secondary schools

(key relational interventions and strategies)

All based on up to date neuroscience research

**TRAUMA
INFORMED
SCHOOLS**

CCMH 
THE CENTRE FOR
CHILD MENTAL HEALTH



Webinar One

**Meeting the
emotional needs
of young people
in schools who
feel isolated,
worthless, anxious
or depressed**

MODEL TWO

The neuroscience of mental health and mental ill-health, with particular reference to Panksepp's emotional systems



RAGE
FEAR
PANIC/GRIEF

CARE (attachment)
SEEKING
PLAY

LUST



Professor Jaak Panksepp (Panksepp, J., and Biven, L. (2012). **The Archaeology of Mind: Neuroevolutionary Origins of Human Emotion.** New York: W. W. Norton & Company.

Jaak Panksepp

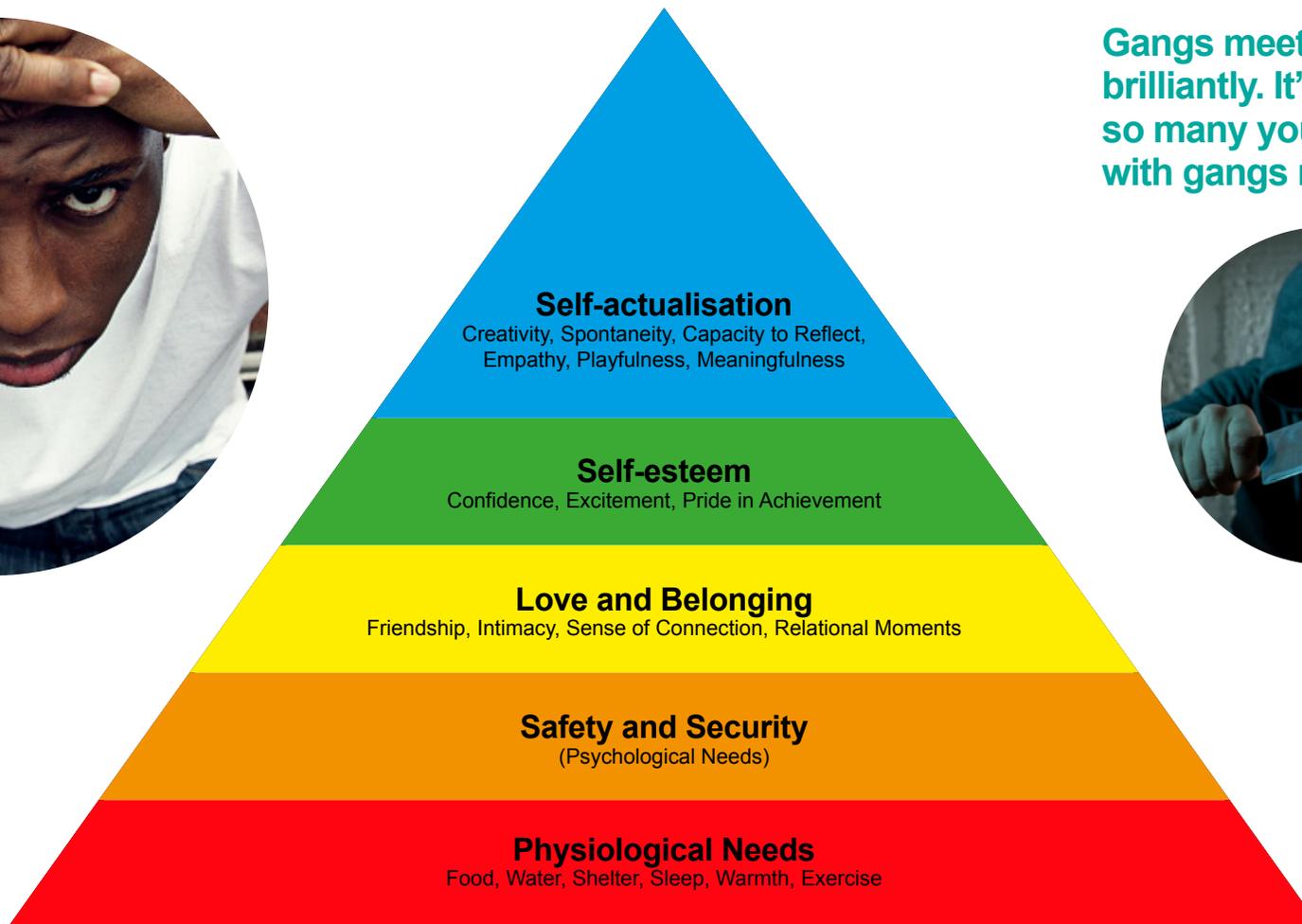
PACE: A way of communicating and being with teenagers that helps them to stay open and engaged with you

	Play P	<p>A playful, warm and spontaneous way of interacting with the teenager to support them to feel safe with you and to promote trust.</p> <p>When you connect with teenagers in this way, they are freer to open up, reflect, laugh, play, share their true feelings with you. Use of a warm light tone of voice is key (storytelling voice).</p>
	Acceptance A	<p>At all times accepting the teenager's intentions, thoughts, feelings and inner life, without any judgment or criticism. As a result, the teenager builds trust that you will never be shaming or critical.</p> <p>Accepting and acknowledging the feelings fuelling the teenager's presenting behaviour. (You can be firm on behaviour while at the same time truly accepting the feelings that triggered the behaviour).</p>
	Curiosity C	<p>Active interest, totally non-judgemental, in how the teenager is experiencing an emotionally charged event (past or present). 'Will you help me understand...?' 'I wonder if...?'</p> <p>Curiosity lets the teenager know that you really want to understand <i>their</i> meaning of an important life event and then help them with their understanding.</p> <p>Curiosity helps the teenager to become aware of their inner life, to start to reflect and come to understand themselves.</p>
	Empathy E	<p>Feeling into the emotional pain of the teenager (without getting lost in it) not just experiencing their pain cognitively or defending against it in other ways. Finding the words to convey your empathy.</p> <p>Having understanding of and compassion for your own traumatised inner child or teenager, so that you can be with the teenager's pain in a profoundly connecting way, resulting in the teenager truly 'feeling felt by you' (Dan Siegel). Empathy conveys to the teenager that s/he is no longer alone with their painful feelings and stories of distress.</p>

PACE was originated by Dr Dan Hughes. Full explanation can be found in his books and on website <https://ddpnetwork.org>

Maslow's hierarchy of needs

If we are to truly support the mental health of vulnerable teenagers, schools need to actively address all these Maslowian emotional needs, with specific relational interventions.



Gangs meet all these needs brilliantly. It's a key reason why so many young people bond with gangs not schools.



School bonding questionnaire

(Secondary schools)



Feeling connected with peers at school		Score	
1	At school I feel liked by some students	Yes=0	No=1
2	At school I have friends I can trust	Yes=0	No=1
3	At school I feel valued by my friends	Yes=0	No=1
4	I feel I am a valued member of my class (or tutor group)	Yes=0	No=1

Feeling connected with teachers and other adults at school		Score	
5	I know I am liked by one or more of my teachers	Yes=0	No=1
6	I feel special and important to one/some adults in my school	Yes=0	No=1
7	Adult/s at my school are really interested in me as a person	Yes=0	No=1
8	Adult/s in my school are curious about my interests/hobbies/things I like doing	Yes=0	No=1
9	Adult/s in my school care about me and how I am feeling	Yes=0	No=1
10	Adult/s in my school have time to talk to me and are interested in what I have to say	Yes=0	No=1
11	When I am unhappy I know which adult to talk to and where and when to find that person	Yes=0	No=1
12	Some teachers are too strict	Yes=1	No=0
13	I am frightened of a teacher	Yes=1	No=0
14	I am frightened of more than one teacher	Yes=1	No=0
15	At school I often feel lonely	Yes=1	No=0
16	At school there are students who are mean to me/bully me	Yes=1	No=0

Sense of belonging and feeling safe in the school		Score	
17	I like being part of this school	Yes=0	No=1
18	I feel safe in this school	Yes=0	No=1
19	I get frightened to come to school in the morning	Yes=1	No=0
20	I worry about school when I am not at school	Yes=1	No=0

Please fill in the following:

I feel really good about myself in the school when teachers...

I would feel more known by my teachers if they...

I really like lessons in my school when we...

I would feel more helped by the teachers in my school if...

I would feel more cared for by my teachers if they...

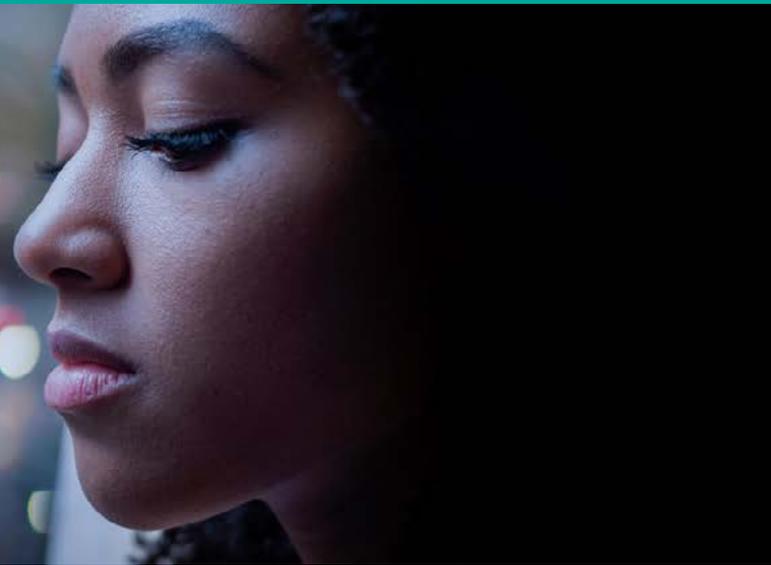
Depressed Children and Teenagers

Key Reasons



		Yes	No
Reason One	Loneliness/isolation/loss of human connection	<input type="checkbox"/>	<input type="checkbox"/>
Reason Two	Social defeat/worthlessness/shame/rejection	<input type="checkbox"/>	<input type="checkbox"/>
Reason Three	Hopelessness	<input type="checkbox"/>	<input type="checkbox"/>
Reason Four	Traumatic loss	<input type="checkbox"/>	<input type="checkbox"/>

Suicide Prevention Policy TISUK



Suicide is the biggest killer of young people, male and female, under the age of 35 in the UK.

Many suicide prevention policies focus on 'spot the signs'. We have listed common signs below because it's important that all child professionals and parents know what these signs are. That said, often there are no signs.

In our view, any endeavour to prevent the terrible tragedy of a child or young person taking their own life, must do far more than just 'spot the signs'. Schools/settings need to put in place many interventions to support the emotional needs of vulnerable children and young people. Abraham Maslow identified those needs in 1943 but he didn't have the neuroscience to back up his research. We do have that research now.

If one or more of these emotional needs remain unmet, the child or young person will not flourish and will experience considerable suffering and emotional distress. When this happens for a duration, thoughts of ending one's life can all too easily ensue. We believe that schools/settings owe it to children and young people to implement specific evidence-based interventions (not generalised policies or empty words) to meet all of these needs. All staff need to be very clear what these interventions are for each need, in their school or setting.

The tsunami of evidence-based research in psychology, medicine, public health, education and neuroscience has shown us four key categories of reasons why children, young people and adults take their own lives:

Reason One: Loneliness/isolation/loss of human connection

Reason Two: Social defeat/worthlessness/shame/rejection

Reason Three: Hopelessness

Reason Four: Traumatic Loss

Self-actualisation

Creativity, Spontaneity, Capacity to Reflect, Empathy, Playfulness, Meaningfulness

Self-esteem

Confidence, Excitement, Pride in Achievement

Love and Belonging

Friendship, Intimacy, Sense of Connection, Relational Moments

Safety and Security

(Psychological Needs)

Physiological Needs

Food, Water, Shelter, Sleep, Warmth, Exercise

So a prevention policy must include a range of specific interventions to ensure that children and young people don't feel:

1. Lonely, isolated
2. Worthless, shamed, rejected, suffering from low self-esteem
3. Hopeless
4. Left to cope on their own (without an EAA) with the pain of a traumatic loss (e.g. rejection from a girl/ boyfriend/ loss of a person, place (home/school), hope, opportunity, self-esteem, loved activity.)

For TISUK webinar on key interventions for suicide prevention and how to address unmet emotional needs see:

TISUK webinar: Supporting the mental health of vulnerable young people in secondary schools



Signs (although often there are no signs)

- Change in usual behaviour
- Giving away possessions
- Withdrawing socially, avoiding friends or family
- Acting impulsively/increased risk taking
- Self-harming
- Increased drug or alcohol use
- Uncharacteristically angry a lot of the time
- Physical changes, sleeping too little, sleeping too much, self-neglect
- Not eating, a change of appetite, weight gain or loss
- Seeing no way to resolve fears, anxieties or problems
- Exhaustion, not being able to cope with routine everyday events
- Comments about feeling worthless, or e.g. "It would be better for everyone if I wasn't here." "I'd be better off dead."

- Very down all the time. Comments such as "I just can't take it any more." "I want to die." "They'd be better off without me."
- Changes happening after a painful event (e.g. being rejected/parents separating)
- Struggling to communicate
- (Adapted from sources: NHS, Mind, Samaritans, Sane, CALM, Young Minds, Papyrus)

Asking about suicide saves lives

If you have an uneasy feeling something is not ok, trust your intuition and ask (see below).

"Evidence shows that [you] talking about suicide does not make it more likely to happen – it reduces the stigma and is often the first step in a person's recovery. By using the word suicide, you are reassuring the young person that it's OK to talk openly about their thoughts of suicide with you. They may feel real relief that someone is willing to hear their darkest thoughts."
(Papyrus)

Conversation starters if you suspect suicidal ideation (remember PACE)

"Are you thinking about suicide?"

"Sometimes, when people are in pain like you, they think about suicide. I wonder if you have ever thought about it?"

"I wonder if you are saying that you want to end your life/ you want to die?"

"It sounds like you're thinking about suicide, is that right?"

"It sounds like life feels so so hard for you right now. I wonder if it's so bad sometimes, that you think of wanting to die?"

If they say yes, empathise and help them to talk more

"So hard and so painful for you at the moment ... can you say more?"

"Can you help me understand how you came to this point?"

"Things must be so painful for you to feel like there is no way out. That things won't get better. Will you help me to understand more about your thinking and feeling about that?"

"I am so sorry you're feeling this way. Can you say more about what's making you want to die?"

"How can I help? I'm here for you now."

Action points

Always remember the disclaimer you told to the child / young person at the beginning of your work together, i.e. that anything they tell you is normally confidential. But if you have concerns that they or someone else is at risk, you have to tell someone. This includes if you think they are in danger of suicide.

Where a child/teenager makes a statement about wanting to kill themselves, it should always be taken seriously - even if there are repeated, previous occurrences of such statements.

All such incidents should be logged on the school's safeguarding platform, e.g. Arbor, My Concern.

The Designated Safeguarding Lead in the school/setting must be informed. This ensures not only that there is a 'team around the child' (vital safeguarding of your wellbeing too) but also that there is evidence of increased incidence or severity and evidence for referral to CAMHS of increased risk to the child.

Wherever possible, the school must share information with parents or, if this is not possible, that the protocol to involve health and social care is followed and escalated to 'Safeguarding' (through the Multi Agency Referral Unit or similar in the locality).

Reference

Maslow, A.H. (1943) A theory of human motivation. *Psychological Review*.50(4): 370–96.

Vital contacts

PAPYRUS (Prevention of Young Suicide)

<https://www.papyrus-uk.org>

Hopeline UK (0800 068 4141)

is a confidential support and advice service for:

- Children and Young People under the age of 35 who are experiencing thoughts of suicide
- Anyone concerned that a young person could be thinking about suicide

The Samaritans

<https://www.samaritans.org>

Who I am



Inventor
Good at thinking
of things to
make/change

**Great
friend**

Good
creative/
imaginative
thinking

**Great
business
ideas**



Musician

**Good
team
player**

**School
work**


Good at
• surfing
• netball
• ice skating

Artist

**People
skills**
kind



An important message from your school

Dear student,

Soon you will be sitting your exams. You may be feeling worried about them and wondering whether you'll be 'good enough'. We want you to know something: your exams will give you marks for skills and knowledge you have been learning at school, but that's all they do. They don't measure things you are good at outside of school and they can't measure you as a person or test all the amazing ways in which you shine.

You may be really good at thinking about the suffering in the world and saving the planet and wanting to do something about that. You may be good at acting, drawing or helping your family. You may be good at making people laugh. You are probably a really good friend, caring when your friend is unhappy, or listening to them when they're down. You may have amazing ideas and passions about something outside of school. Exams can't measure these things.

We also know that there are a lot of brilliant people out there who didn't do so well in their school exams but who went on to turn their good ideas into amazing things in the world. So never forget that your dreams about how you want to use your life are far, far bigger than these exams. Some of you will be having those dreams already; for others, dreams of living your life, than all the grains of sand in the Sahara desert. So dream about what you want for your life and how you want to use this gift.

For those of you who want to go college or university or are not sure about it, you don't feel you have to rush if the time is not right now. Remember, there are lots of routes to loving your work life not just the college or university route. For a lot of people, 'Work is more fun than fun' (Noel Coward). Aim to get work like that!

Don't let a failure in something tell you who you are. Most people who are very successful at running their own business have failed lots of times. As Winston Churchill said, 'Failure is not fatal, it is the courage to continue that counts.'

And if you're worried about not being good enough, remember – the qualities that make you so special aren't and can't be measured by these exams. In these qualities you will always be *more than* 'good enough'.

So of course, do your best in your exams, but always remember that exams are looking at a set of skills and knowledge that *you can do*; they don't test you on who *you are*. You are much, much more than your exam results, and you have a special place in the school and in the world.

We are proud to have you in our school.

Warmest best wishes,

From all the staff at your school



Anxious Children and Teenagers

Key Reasons



		Yes	No
Reason One	Something very frightening in the child's past (never properly processed and worked through) utterly rocked belief in a safe world.	<input type="checkbox"/>	<input type="checkbox"/>
Reason Two	Anxious attachment to a parent or carer.	<input type="checkbox"/>	<input type="checkbox"/>
Reason Three	Parent with anxiety/mental health problems.	<input type="checkbox"/>	<input type="checkbox"/>
Reason Four	Intense feelings (e.g. anger) never properly regulated/acknowledged/normalised by parent figures/s. So stress regulating systems not set up in the brain / emotions perceived as too dangerous to feel.	<input type="checkbox"/>	<input type="checkbox"/>



Traumatic experience



Overwhelming feelings

Feelings displaced: the body, other people, objects

Drugs, drink, self-harm to manage the pain



No one helped you make sense of what happened, so your feelings remained overwhelming (raw affect / horrible sensations / the 'unthought known' (Bollas))



Generalised from the specific



So not just the bullying in the toilets felt utterly terrifying but...



...now all social situations feel terrifying

Traumatic experience Change process



Overwhelming feelings

Help from an emotionally available adult (EAA)

EAA hears your story about the traumatic experience: how you made sense of what happened: the threat, the meaning you gave to the unbearable abuse of power and your responses to the threat (how you protected yourself afterwards, often referred to as 'symptoms'). S/he also helps you grieve and find empowered anger.

- Mental state talk (EAA)
- Affect labelling (child/young person)
- Secure attachment with EAA
- Incoherent narrative addressed

- Changing emotion with emotion (e.g. shame and fear to healthy protest)
- Psychoeducation

Feelings no longer generalised from the specific.
So confident again in social situations and regains quality of life.

Sentence Stems for Reflective Conversations with Teenagers



WINE

- **I wonder if...** (e.g. it felt like no one understood you).
- **I imagine...**(e.g. that was horrible when that happened).
- **I notice...** (e.g. how you perked up when you said you felt close to your brother).
- **I felt moved when you said...** (e.g. you felt you were to blame for the abuse). [empathy]
- **That sounds...** (e.g. painful because you were all on your own). [empathy]
- **This is my drawing about what you said** (show drawing).
- **I respect you for...** (e.g. your courage).
- **Will you help me understand x?...** (e.g. what it was like for you when your mum went to hospital?).

After voicing your curiosity, e.g. 'Will you help me understand' always follow up with empathy e.g. 'So when you Mum went to hospital you say you felt terribly lost and alone. I can understand that.' (this should not be simply a parroting of what they said but showing that you have understood the main emotional themes in their response).



Webinar Two

**Meeting the
emotional needs
of young people in
schools who feel
angry, unmotivated
and alienated from
schoolwork**

**What do teenagers
feel passionate
about?**

**Ask each one again
and again and again.**

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**Help keep that fire alive...
Ignite their ability to achieve.**

Key Reasons

Children with behaviours that challenge



		Yes	No
Reason One	Violence due to violent home environments	<input type="checkbox"/>	<input type="checkbox"/>
Reason Two	High ACE score and Hyperarousal resulting from trauma	<input type="checkbox"/>	<input type="checkbox"/>
Reason Three	Traumatic Loss	<input type="checkbox"/>	<input type="checkbox"/>
Reason Four	Developmental Deficit resulting in frontal lobe developmental delay	<input type="checkbox"/>	<input type="checkbox"/>
Reason Five	Oppositional defiance (home to school transfer)	<input type="checkbox"/>	<input type="checkbox"/>
Reason Six	Neurodiversity (e.g. accurate Fetal Alcohol Syndrome diagnosis)	<input type="checkbox"/>	<input type="checkbox"/>
Reason Seven	Unmet psychological hungers: Stimulation Hunger, Recognition Hunger, Structure Hunger, Incident Hunger	<input type="checkbox"/>	<input type="checkbox"/>
Reason Eight	Unmet attachment needs	<input type="checkbox"/>	<input type="checkbox"/>

Angry/Violent Children and Teenagers

Key reasons



		Yes	No
Reason One	Trauma/traumatic loss	<input type="checkbox"/>	<input type="checkbox"/>
Reason Two	Angry/violent family cultures	<input type="checkbox"/>	<input type="checkbox"/>
Reason Three	Defence against shame, hurt, grief, feelings of vulnerability	<input type="checkbox"/>	<input type="checkbox"/>
Reason Four	Adult role models of 'power over' not 'power with'	<input type="checkbox"/>	<input type="checkbox"/>
Reason Five	Absence of an emotionally available adult helping you develop CARE, SEEKING and PLAY brain systems	<input type="checkbox"/>	<input type="checkbox"/>

Characteristics of trauma-triggered anger (anger fuelled by pain from the past)



Intensity and volume (i.e. the event has triggered hurt, rage, shame, feelings of betrayal, fantasies (from your past))

A wish for vindictive triumph over the other. Preoccupation with revenge – e.g. a wish to hurt, smash, damage, spoil, destroy.

A desire to find the words/ actions that will really hurt.

The same angry, indignant or hating thoughts going round and round in your head, like a stuck record.

In-depth post-mortem in your head of the anger-inducing events, going over and over what happened, and what you could have done/ said but didn't

Lingering angry feelings. You still feel angry even if what made you angry has stopped.

Feeling really bad for hours after the row/ confrontation/ negative exchange.

Apologies or attempts to make amends from the other person can count for nothing. You go on hating and attacking as if nothing had been said.

On some level you know you are over-reacting and that the row has triggered pain from the past e.g. not being responded to, rejection, abandonment, submission, shame, jealousy, not being understood

You experience some relief at having a core belief about self or others, confirmed. e.g. 'See this proves how unlovable I am.'
'See, this proves that you can't ever really trust anyone.'
'See this proves that everyone is really out to get you.'

You have difficulty remembering what you were angry about after the period of anger is over.

Characteristics of healthy here-and-now anger

Healthy anger is focused on the resolution of the problem as opposed to wanting to hurt the other person: *'We have a problem, a difference of opinion here – so how can we resolve it?'* This is completely different in tone and energy to: *'You are to blame because.....'* You are x/y/z and I am furious with you about it. *'It's all your fault.'*

Healthy anger is often vibrant, active and soon over. Some people call it 'warm anger' There is a 'clean' feel to it. Although it can still be loud and passionate.

Ordinary language about the offending other. Rather than the very bad/wicked language of extremes of archaic anger (e.g. You are evil/ an abuser/ a psychopath in the expression of anger)

Little or no evidence of vindictiveness, sadism or vengeful purpose

Healthy anger is finite; it will not go on and on. When communicated and understood, it's over

The rows or arguments do not feel like a catastrophic or dangerous event. It just feels like part of life.

You don't carry on thinking about the incident afterwards.

Healthy anger leaves you feeling OK about yourself and the other person.



What every teenager needs to know about the different kinds of sex

Me Sex

- Relief of my sexual tension is key
- Each sexual conquest is a trophy/status symbol
- My performance matters to me
- My sexual prowess makes me feel good about myself
- The relationship is not so important, my body sensations/strength of my orgasm are
- If the other person has an orgasm it makes me feel good about myself
- Little or no communication of what the other likes
- My needs, not the other person's, are key
- With boys/men, little/no understanding that 80 percent of females need clitoral stimulation for orgasm
- It's like surfing: fundamentally a physical not relational activity
- Fake orgasms frequent

Effect on the other person

- Pleasure and relief of sexual tension if the other person also engaging in **Me Sex** but often empty feeling for one or both afterwards
- If the other person is expecting **Me and You Sex**, then often feeling used, contempt, regret, like an object not a person, replaceable, lonely, unsafe

Me and You Sex

- Fundamentally a relational as well as physical/sensual/erotic activity
- Doesn't need to be long term committed loving relationship but mutual respect, fondness, caring for the other
- Wish to please the other, taking time to find out about this and practice/trial and error to get it right
- Both parties communicate verbally about what feels good for the other person rather than just banging away
- Awareness that 80 percent of females don't orgasm through vaginal sex
- Not just one person's pleasure
- No pressure
- Fake orgasms far rarer as not about boosting self-esteem through performance for either party
- This sex brings the two people closer together

Effect on the other person

- Feel attractive, desirable, respected, cared for, psychologically and physically safe.
- Feel like a person not an object



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