

Welcome to our October newsletter



Northamptonshire
Mental Health Gateway

Did you know that one in 10 children and young people aged 5 to 16 suffer from a diagnosable mental health disorder?

That's around three children in every class.

There is help available. Visit the Ask Normen website for support and advice.

www.asknormen.co.uk

After a successful social media campaign in September, Ask Normen had over 3100 page views on the site with an extra 1302 people viewing posts on Facebook.



It has been very busy in all things Mental Health in Northamptonshire over the last few months. We are beavering away in preparation of our refresh of our Children and Young People Local Transformation Plan (CYP LTP) to publish for November, and developing our plans for the next 4 years. In 2015/16, we had referrals for over 15,000 children and young people for our specialist health services, 44% of them were for Mental Health services. We have seen a 40% increase in demand for the last 3 years, and yet we have reduced waiting times by 25%. There is still more to do however, and our LTP will be the guide that helps us in our work ahead.

This issue looks at the taboo subject of suicide. We recently had Suicide Awareness Day and also World Mental Health day. Why do we look at these? Because so many people still try to take their lives and do so without always knowing how to ask for help. And when people do ask for help, those who are asked do not always know where to go. This issue of the Ask Normen newsletter highlights a number of options and the good news stories of how we can better help.

The first two stories discuss the level of prevalence of suicides, the attempts and the impact on surviving loved ones. However it does not have to be this way and we therefore offer some alternative mechanisms. Of course if ever anyone is concerned about an urgent situation, you can contact 111 for advice 24/7, and 999 in an emergency. If there seem to be pervasive thoughts of suicide, professionals may contact the Referral Management Centre (RMC) on 0300 1111 022 to seek further advice. Also the school nurse or GP are very useful resources. And at the lower end of the spectrum, our library services have a range of books and websites on offer in addition to Ask Normen.

Once again, our resident wellbeing writer John Fardon proffers the art of Kintsugi and how we can turn difficult scars into beautiful pieces of art. Speaking of art, Ashley Poulter introduces himself as the new lead for Young People engagement at Healthwatch. Ashley brings together his skills and experience of working with children and young people with special educational needs and a graphic enquiry method that always tells a vibrant story through pictures. He has already had a positive impact by creating an easy read guide on mental health and helps us extend our reach further into working with young people with additional needs. And our young volunteers recently impressed me with their wonderful master class on young people engagement showcasing their work on Eating Disorders, Special Educational Needs review, and their experience of a quality assurance “enter and view” experience of the Skylark Children’s Ward at Kettering General Hospital.

And again, the young people of our county showed how they contribute greatly to our communities through their work as library volunteers. We know that reading and volunteering are two activities that can improve one’s emotional wellbeing and our libraries are also a hub that support so many people in our county. The group we had this summer were a huge asset and there are opportunities for us to sign post our young people in the future too.

And lastly, in many cases of mental health need, bullying is a key contributor to poor emotional wellbeing outcomes. Our young people repeatedly tell us this is an issue, and children with special educational needs quite often are worried about such matters. We are therefore pleased that our colleagues at the Beehive in Northampton are offering training to parents of children with SEN in November. There is a lot of good work taking place and if you have any information you would like to share, please feel free to tell normen at asknormen@nhs.net

David Loyd-Hearn

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The World Health Organization estimates that over 800,000 people die by suicide each year – that's one person every 40 seconds. Up to 25 times as many again make a suicide attempt. The tragic ripple effect means that there are many, many more people who have been bereaved by suicide or have been close to someone who has tried to take his or her own life. And this is happening in spite of the fact that suicide is preventable. 'Connect, communicate, care' is the theme of the 2016 World Suicide Prevention Day. These three words are at the heart of suicide prevention.

Connect

Fostering connections with those who have lost a loved one to suicide or have been suicidal themselves is crucial to furthering suicide prevention efforts. Although every individual suicide is different, there are some common lessons to be learned. Those who have been on the brink of suicide themselves can help us understand the complex interplay of events and circumstances that led them to that point, and what saved them or helped them to choose a more life-affirming course of action. Those who have lost someone to suicide, or supported someone who was suicidal, can provide insights into how they moved forwards on their journey. The sheer numbers of people who have been affected by suicide would make this a formidable network. Of course, these connections should be two-way. There will often be times when those who have been bereaved by suicide, and those who might be feeling suicidal themselves, need support. Keeping an eye out for them and checking that they are okay could make all the difference. Social connectedness reduces the risk of suicide, so being there for someone who has become disconnected can be a life-saving act. Connecting them with formal and informal supports may also help to prevent suicide. Individuals, organisations and communities all have a responsibility here.

Communicate

Open communication is vital if we are to combat suicide. In many communities, suicide is shrouded in silence or spoken of only in hushed tones. We need to discuss suicide as we would any other public health issue if we are to dispel myths about it and reduce the stigma surrounding it. This is not to say that we shouldn't exercise necessary caution; we don't want to normalise suicide either. Careful, considered messages about suicide and its prevention are warranted, as is an awareness of how different groups of individuals may receive and interpret this information.

Equipping people to communicate effectively with those who might be vulnerable to suicide is an important part of any suicide prevention strategy. Broaching the subject of suicide is difficult, and these sorts of conversations are often avoided. There are some simple tips that can help, however. Most of these relate to showing compassion and empathy, and listening in a non-judgemental way. People who have come through an episode of extreme suicidal thinking often say that sensitively-managed conversations with others helped them on their course to recovery.

Please view the World Health Organisation Fact Sheet on suicide at: www.who.int/mediacentre/factsheets/fs398/en/



Boys, Men and suicide

Imagine a virus we don't fully understand is killing young men in record numbers. It kills three times as many British men as women, although nothing adequately explains why. The government confirms that while almost all other leading causes of death are being slowly eroded by medical and social progress, deaths caused by this virus are at their highest for decades. Yet the money we spend on researching and treating the problem stands at a fraction of what we spend on those other leading causes of death, as do charitable donations from the public.

The deaths this virus has caused have risen to the point that if you are a man between 20 and 49, you're more likely to die from it than cancer, road accidents or heart disease. It is the biggest threat we face, the number one killer. The figures are chilling, and yet still it is something we hardly discuss, in public or private — which is a significant part of the problem itself.

In February 2015, the Office for National Statistics published a report covering the years from 2001 to 2013, showing that suicide among men has reached its highest levels since the early Eighties, rising sharply in 2007 and hitting a peak in 2013. (In the same period, suicide among women declined, then remained constant.) Always a leading cause of death among the young — for the simple reason that death by natural causes is statistically less likely — suicide rates in men aged between 45 and 59 have also now begun to rise, increasing to their highest levels since 1981.

MP Nick Clegg described suicide as "a massive taboo", the last in mental health. The reasons for this are relatively easy to explain, if not to justify. Before the 1961 Suicide Act, taking your own life was illegal in Britain. It still carries with it a connotation of dishonour and shame, as if those who do it are deserters from the battlefield of life. "The easy way out" they used to call it, and perhaps some still do. It is still the case that the type of men we think die by suicide are the unwell, the disturbed, the unlucky; who stumble at life's biggest hurdles and are too weak to get back up. Most of us like to think we're made of sterner stuff. We don't know that 75 per cent of people who take their own lives have never been diagnosed with a mental health problem, or that only five per cent of people who do suffer from depression go on to take their own lives.

We think of high-profile examples of suicide, like fashion designer Alexander McQueen, who killed himself in 2010, Wales football manager Gary Speed (2011), or film star Robin Williams (2014), as anomalies. Men who had it all: money, fame, the adoration of the public, the respect of their peers, a glorious past and assured futures. We celebrate their memories as professionals, but we don't pause to consider what their deaths tell us about mental health, about the way that no amount of external glory can ameliorate an inner pain.

We still live in an era where, if a female toddler falls down, her mum picks her up, dusts her down, says 'awww' and gives her a cuddle. A little boy falls down and it's 'you don't cry'. That's what we expect from a man — we want them to 'man up'. The expectations are that boys will be physically strong, physically well. Boys and men need to know that it is ok to talk and it does not make them less of a man. We need to a deeper societal shift that we all participate in. We need to re-evaluate our attitude not just towards mental health, but masculinity itself.

The reasons behind every individual suicide are unique and complex, but we know common factors and experiences that contribute: relationship breakdowns, bereavement, socioeconomic factors and mental health problems. These factors affect

both sexes and have done since the dawn of time, but in almost every country in the world, for as long as records have existed, suicide rates have been significantly higher among men than women, despite the fact that women make a higher number of suicide attempts. Anecdotal evidence from suicide helpline staff also suggests a huge rise in callers citing unemployment, job insecurity and benefit cuts as the cause of suicidal thoughts in that period. Women, of course, are victims of economic pressures, too. But research suggests that even today, men attach greater importance to job status and income.

This "gender paradox" is most commonly explained by method. While women are more likely to opt for means such as a drug overdose, which are less immediately lethal, men are more likely to use more violent methods with greater success rates, such as hanging or shooting themselves. Men are also believed to be more naturally impulsive than women, meaning they are more likely to act rashly on suicidal feelings.

The simple message is that 'suicide prevention is everyone's business' and that talking about it is a good thing. There is this perception among people that goes: 'if I ask somebody if they are suicidal, that will plant the idea in their head.' There is no evidence for that at all. It does quite the opposite."

The Self Esteem Team, led by ex-Government mental health advisor Natasha Devon, produced the film called 'Switch on the light' for mental health day. It was produced following the very sudden death of one of her friends from suicide – he was 25. You can watch it here:

<https://www.youtube.com/watch?v=c79fvvItKQU>

Other information can be accessed from:

ifucareshare.co.uk

thecalmzone.net

mind.org.uk

consolecounselling.co.uk

samaritans.org

This item is based on a piece from Esquire Magazine, December 2015.



The Art Of Kintsugi

Kintsugi Art Metaphor: "Mending Broken Pottery With Gold"

What Can We Learn From a Broken Pot?

Something to think about when working with children and for ourselves.

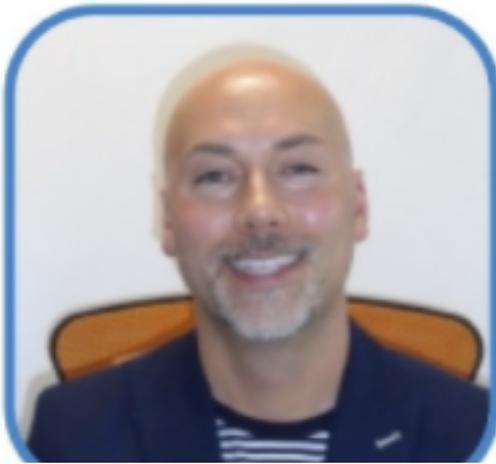
Kintsugi, as the practice is known, gives new life or rebirth to damaged or aging ceramic objects by celebrating their flaws and history. One can consider how we might live a Kintsugi life, finding value in the missing pieces, cracks and chips – bringing to light the scars that have come from life experiences, finding new purpose through aging and loss, seeing the beauty of 'imperfection' and loving ourselves, family and friends even with flaws.

“There are cracks in everything, that’s how the light gets in.” ~ Leonard Cohen.

To read about the origins of Kintsugi visit – it is fascinating! <http://lakesidepottery.com/Pages/kintsugi-repairing-ceramic-with-gold-and-lacquer-better-than-new.htm> (link is external) and then think about your own story, the colleagues you work with and the children you work with. What constitutes the gold where you have influence?

I wonder what this might mean to adults coming alongside children who have been ‘scarred’ by life experiences. What might the application of gold to the cracks, flaws and damage inflicted by adults on children actually look like? What is it that we can do in our schools and communities that will help these children and young people recover and become even stronger because of their journey through pain, rejection, abuse and neglect?

Having been trained as an ‘Attachment Lead’ in schools by Louise Bomber, www.theyellowkite.co.uk I am convinced that it is our relationships that are the essential ingredients for these children, accompanied by simple tools for connection and fully supportive nurturing and attachment aware schools. Watch this space in Northamptonshire as we know that there are already workers out there working with children and using powdered gold to do it.



Hello

My name is Ashley Poulton and I am the new Officer in post at Healthwatch Northamptonshire leading work around children and young people's involvement. Some of the things I'll be developing will be a range of training options for young people, parent carers and professionals, particularly around developing accessible information, Person-Centred approaches and Graphic Recording.

One of the things I have already done is create some useful Easy Read information for children and young people around mental health, where to find support and how to recognise how well you feel.

This work was created after attending the Young Healthwatch Conference in 2015 and it includes feedback from young people I was working with at the time.

I'm also looking forward to developing Young Healthwatch Northamptonshire and I will be making sure their voice is recognised at a strategic level and used to influence the design of new and existing services. One of their first tasks will be creating a short film explaining Young Healthwatch, their role and also celebrating work they have achieved so far.

If you would like to become a member of Young Healthwatch please contact our office for further details.

Healthwatch Northamptonshire

03000 020010

Voice/ text 07951 419331 www.healthwatchnorthamptonshire.co.uk

Follow us on Twitter - <https://twitter.com/HWatchNorthants>

Another of our Children and Young People projects is award winning and our Young Healthwatch volunteers hosted an East Midlands Masterclass regarding engagement. The East Midlands Academic Health Science Network recognised Young Healthwatch with an Innovation in engagement award for the work of Young Healthwatch (co-commissioned with Future in Mind funding to ensure an independent voice of young people are included in our commissioning processes) and we were asked to present a regional Masterclass to other agencies.

Delegates comprising of commissioners, providers and other health watch agencies from across the region congregated at Stanwick Lakes for a 3 hour masterclass. Kate Holt of Healthwatch opened the proceedings with the key lessons learned from working with Children and Young People including our work on the Youth Conference in 20015 and the work that we have completed ever since. The new children's lead Ashley Poulton highlighted the work on an Easy Read guide for CYP mental health http://www.healthwatchnorthamptonshire.co.uk/sites/default/files/healthwatch_northamptonshire_understanding_mental_health_easy_read_guide_2016_0.pdf as well as using graphic mapping for capturing the views of all young people and 10 Top Tips for engagement with Children and Young People <http://www.healthwatchnorthamptonshire.co.uk/resources/10-top-tips-when-engaging-children-and-young-people>

But the real stars were the young people.

Kizzy (the former chair of NCC's CYP Shadow board and apprentice in the 3rd sector) presented our work on children and young people's eating disorders with the report being published on the 5th October 2016 http://www.healthwatchnorthamptonshire.co.uk/sites/default/files/eating_disorders_report_final_041016.pdf. Young Healthwatch were the first project to deliver results on our Future in Mind Local Transformation Plan with a workshop 9 days into the programme! There were over 2000 responses across the county including from children with special educational needs and disabilities as well as from our Lesbian Gay Bisexual Transgender and Questioning (LGBTQ) youth groups http://www.healthwatchnorthamptonshire.co.uk/sites/default/files/lgbtq_report_final_oct_2016.pdf. The findings are being used to shape our training programme across the workforce.

Maddie (Young Healthwatch chair, Talk Out Loud Mental Health Ambassador and college student) gave an overview of Young Healthwatch, the work they do and what

it means in terms of really obtaining the voice of young people and getting young people to talk about health issues more.

Darcie (Young Healthwatch Volunteer and Year 8 student) presented her experience of enter and View training, the Nolan principals and her experience of doing an Enter and View assurance trip to the Skylark Children's Ward at Kettering General Hospital.

Mike (Talk Out Loud Mental Health Ambassador, Bullying Stops Now lead and an SEN year 9 student) present the work relating to the Special Educational Needs

Health Review Young Healthwatch undertook http://www.healthwatchnorthamptonshire.co.uk/sites/default/files/send_report_final_020816.pdf

There was also the debut of a new film about Young Healthwatch which will go on-line next week and shows the methods Young Healthwatch use in action.

The event was closed by David Loyd-Hearn (CCG Commissioning Manager of Children and Young People's Emotional Wellbeing and Mental Health Services) who spoke about how important an independent voice is in commissioning of services throughout the entire commissioning cycle. Many of the successes in the Children's Community Health Transformation Programme and the Future in Mind Local Transformation Programme can be attributed to the co-production with young people and their families. This has meant waiting times reducing by 25% in spite of a 40% increase in demand.

There were numerous questions and compliments from the audience who were inspired by our approach here in Northamptonshire and the Young People show there is a bright future ahead.



Summer Reading Volunteers at Burton Latimer Library

Another Successful Summer for Young Library Volunteers

Northamptonshire Libraries welcome young adults, aged 14 and over, to volunteer in their libraries all year round but in the summer we offer a bespoke role for 14-17 year olds to assist with the delivery of the Summer Reading Challenge.

Children aged 4-12 are challenged to read 6 books over the school summer holidays and libraries rely on their young volunteers to facilitate this. The role involves promoting the challenge, signing up children, helping with events and handing out rewards.

This year we had over 150 young adults volunteering in libraries and they have given us fantastic feedback on their experience.

Olivia and Abbie both volunteered at Burton Latimer library. Olivia said about her experience: “At first I was very nervous as I am quite shy and struggle to start conversations but the kindness of the staff, children and parents made it so much easier and really enjoyable. I feel like volunteering has definitely helped my confidence and I would happily do it again.”

Abbie found volunteering very beneficial: “I believe it has helped with my organisation, punctuality and confidence specifically. I would certainly recommend this to other people as I think it is very beneficial to have on your CV to stand out from other people as well as giving you many personal development skills such as teamwork and leadership that you can use both in and out of school.”

Agatha volunteered at Kingsthorpe Library and said: “I have thoroughly enjoyed volunteering for the library. The staff and other volunteers have been very friendly and always there to help. I have found that volunteering has given me a boost in confidence in talking to new people, I would strongly suggest to anyone who wants to raise their confidence to take part in volunteering because it is fun and a good experience.”

The volunteers help is invaluable to library staff. Henderson Downing, Manager of Brackley Library, really appreciated his volunteers: “There have been three particularly outstanding young volunteers who have consistently provided key support to the library staff. They are always happy to greet the children and engage with them to discuss the books that they’ve read. Their presence has had a massive impact on our ability to maintain the quality of our customer service in the library during this period.”

All Summer Reading Challenge volunteers receive a goody bag including a badge and t shirt, and this year they also received a notepad and pen from ASPIRE.

Volunteers can use volunteering hours towards Duke of Edinburgh awards and UCAS applications, and library staff are happy to provide volunteers with references for future employers.



Free ANTI-BULLYING workshop for parent carers of disabled children and those with special educational needs (SEN)

When: Tuesday 22nd November 2016, 10am – 2pm

Where: The Bee Hive, Harborough Road, Kingsthorpe, Northampton, NN2 8LR

Topics covered on the day include:

- § Recognising signs of bullying
- § Tips for talking to your child about bullying and how to support them
- § Working with school to address bullying

Parents/Carers attending the workshops will get:

- § a free parent guide to dealing with bullying
- § free resources including bullying logs, guidance and template letters
- § access to free online training
- § an opportunity to meet other parents and share experience

How to book:

Email emharrison@northamptonshire.gov.uk

please provide your full name, address and telephone number.

Alternatively, call 01604 636111

Please make us aware of any special or dietary requirements you may have when booking. Lunch and refreshments will be included.

Please note:

- § This workshop is only for parents/carers of disabled children and/or those with special educational needs (SEN)
- § If you can't attend on this date but are interested in attending a future workshop, perhaps in another area of the county please let us know so that we can plan future workshops



Lottery win for local mums, dads and babies.

A specialised programme to support new parents and their babies in Northampton and Daventry is to be launched thanks to an award of nearly £500,000 from the Big Lottery Fund it was announced last week.

The programme, 'Flourishing Babies', will be run in partnership by local family therapy charity NorPIP; family support charity, Family Action and Before Baby which is run by social enterprise Engage Antenatal C.I.C. and aims is to generate better outcomes for 300 vulnerable babies and families across the area over the next three years.

Being a parent should be a happy time, but the reality is that around 40% of parents struggle to form a loving bond with their child. Sometimes this is because your own childhood experiences can come flooding back and cause symptoms similar to post traumatic stress, like withdrawal from the world, not feeling like you love your baby or feeling like the baby doesn't belong to you. 'Flourishing Babies' will aid families to recover from these common issues and a key message to all parents is you're not alone, and you can get help to feel better again.

The programme will offer a free antenatal programme for new parents across Northampton and Daventry, targeting new mums and dads who might need a bit of extra support with the emotional transition to parenting as a result of mental health issues or other complicated risk factors. Parents experiencing postnatal depression often feel isolated, so the programme will also offer a perinatal peer support home visiting service where volunteer Befrienders will provide families with support and advice. Additionally, intensive therapeutic support will be provided to parents when they are finding it difficult to bond with their babies or are finding parenting particularly tough.

NorPIPS's Executive Director, Anna Day said

"We are tremendously grateful to the Big Lottery Fund for their award under the Reaching Communities grant stream. We are delighted to be able to increase our scope to support vulnerable families and are very committed to helping parents and children get the most out of their lives together from the outset. We are delighted that the Big Lottery Fund has been able to share this vision with us".

Lucy Dolly, Director at Engage Antenatal C.I.C. and Before Baby programme lead said

“We are very excited and thankful to the Lottery for providing us with the opportunity to educate and support pregnant vulnerable families alongside NorPIP and Family Action.”

Julie Smith, National Perinatal Lead at Family Action added

“The first 1001 days of a baby’s life is a critical time for his or her development and we are very grateful to the Big Lottery for funding this important programme. It will enable us to help families at this very crucial time and give parents and their babies the support they need to flourish and thrive. This will include peer support through our positively evaluated volunteer befrienders’ model. We are very much looking forward to working with our partners to help ensure parents and their babies get the best start possible to their new lives as a family “

Being a parent isn’t always easy, and sometimes parents can go through a range of involuntary emotions about their babies. Many parents feel like its taboo to admit they are finding it hard to care for their babies, but we want them to know that not only is help at hand, but the help is the right support for them to stop feeling like this. This new service will help a hundred families a year with that specialist support to get their families off to the best start possible.

Parents to be or those with a child up to the age of two can self-refer to the programme by visiting www.norpip.org.uk or by calling 01604 924735.



What's on the web?

Useful links

NHS Choices links

- [Carers and mental health](#)
- [Clinical depression](#)
- [Depression self-assessment](#)

- [Low mood and depression](#)
- [Mental health services](#)
- [Mental wellbeing](#)

External links

- [Mind: suicidal feelings](#)
- [PAPYRUS](#)
- [Samaritans: about suicide](#)
- [Stamp Out Suicide!](#)
- [Survivors of Bereavement by Suicide](#)
- [Maytree - A Sanctuary For The Suicidal](#)

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