What can professionals do to help children and families affected by mental health difficulties?

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Super-specialist to bigger picture...my epiphany!
What we can do now across services

• Family work (for people experiencing psychosis for example) can be enormously beneficial either as one family or in multiple family groups

• Supporting families to understand the nature and course of mental health problems is crucial – creating helpful expectations and positive strategies for coping

• Helping families communicate openly and express feelings in a constructive way is helpful

• Helping families to problem solve together is beneficial to everyone

• This is all within the remit of community mental health workers and both formal evidence based Family Interventions work and informal family work needs to be made an explicit part of mental health job roles
## Having some resilience resources more than halved risks of current mental illness in those with 4+ ACEs

<table>
<thead>
<tr>
<th>Childhood resilience resources</th>
<th>Percent with current mental illness</th>
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<tbody>
<tr>
<td>Childhood resilience</td>
<td>Low: 29%  High: 14%</td>
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<tr>
<td>Trusted adult relationship</td>
<td>Never: 28%  Always: 19%</td>
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<tr>
<td>Regular sports participation</td>
<td>No: 25%  Yes: 19%</td>
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<tr>
<th>Adult resilience resources</th>
<th>Percent with current mental illness</th>
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<tbody>
<tr>
<td>Adult resilience</td>
<td>Low: 37%  High: 13%</td>
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<tr>
<td>Perceived financial security</td>
<td>&lt;1 month: 35%  5+ years: 11%</td>
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<tr>
<td>Community engagement</td>
<td>No: 23%  Yes: 11%</td>
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*Note: ACEs = Adverse Childhood Experiences*
Resilience building

- Resilience & emotional competence can be acquired at any stage & are protective
- Trauma-focused therapies, E.g., TF-CBT, EMDR, bereavement counselling etc, effective and provide good return on investment
- Universal and targeted family support – parenting interventions
- Exercise – especially with others
- Expressive writing
- Mindfulness meditation
- Dietary advice and education about nutrition
- Group/ peer activities – connectedness & relationship building
- Advice and education about the benefits of good quality sleep
The power of relationships have been largely forgotten by modern science (Ross Buck Phd)

- We now over-rely on medical technology and modern pharmacology
- Previously, healers had to rely on “placebo” effects
- i.e. They had to inspire the patient’s confidence in their own ability to get better.
- To be effective this relied on building a trusting relationship, listening intently and developing confidence in his/her instincts
- Instead we now focus on illness and rarely ever gain insight into a patient’s life, thinking and subjective experience.
Conclusions

• We must educate the current & next generation of care professionals from a whole family perspective

• Fight for evidence-based approaches to be equitable to access, timely & delivered with fidelity – CBT & Family Interventions

• Educate and raise awareness across societies & communities – positive messaging – show animations and short videos in GP waiting rooms!

• “Waiting to be told doesn’t work!”…make sensitive enquiry about ACEs routine practice (do this with planning, training and organisational commitment) and ask about their children and home life

• Every professional can utilise their relationships to heal – but only if we provide permission, time, training and supervision.

• Bring together mental health professionals, social care professionals and universal services regularly for shared learning events on working together with families.
Thank you

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