

childreninwales.org.uk



Welcome!

Welcome from the Chief Executive, riugh Russell	
Children and Young People and Mental Health (Children in Wales)	5
Social Media: It Takes a Whole Community to Raise a Digital Citizen (Coleg Sir Gar)	8
'Now we can see a light ahead' (Barnardo's Cymru)	10
Supporting parents to speak up for their unwell child – The ADVOCACY study (Cardiff University)	12
Supporting Young People to Shape Mental Health Support in Gwent (ProMo Cymru)	14
The YIMinds project – a European initiative for youth (information) workers minding young people's mental health (ERYICA)	18
From Awareness to Action: Supporting Children and Young People Struggling with Self-Harm (AFKA Cymru)	20
Impact of digital social interactions on adolescent well-being and brain (Cardiff University)	22
Supporting Children and Young People to Manage the Traumatic Impact of Bullying (Kidscape)	24
Power Up (Platfform)	26
Playing and being well (Play Wales)	28
Why we need to rethink our approach to children's mental health (Psychologists for Social Change Cymru)	30
Empowering Young Voices: Advancing Children's Rights and Access to Mental Health Services (Children in Wales)	32
Advocacy in Mental Health Support (NYAS Cymru)	34
How a Goblin-based crime created friendships within the Electively Home Educated population of Blaenau Gwent (Aneurin Bevan UHB)	36
Helping care experienced young people develop positive mental wellbeing (My Story Org)	38
Play in Out of School Childcare Clubs as a Catalyst for Mental Wellbeing (Clybiau Plant Cymru Kids Clubs)	40
Inclusive Mental Health Support for Ethnically Diverse Children and Young People (Rema A Begum MBACP)	42
The impact of poverty on the whole family's mental health and wellbeing (Children in Wales)	44





Sharron Mills sharron.mills@childreninwales.org.uk Louise O'Neill louise.oneill@childreninwales.org.uk

Cardiff University Social Science Research Park (SPARK), Cardiff, CF24 4HQ

029 2034 2434

info@childreninwales.org.uk

Bluesky: @childreninwales.org.uk Facebook: @childreninwales Instagram: @youngwalesciw LinkedIn: Children in Wales

Registered Charity No: 1020313 Company Reg No: 2805996

The views expressed in this publication are not necessarily those of Children In Wales and we reserve the right to edit for publication.



Welcome from Chief Executive, Hugh Russell

Croeso cynnes, a warm welcome to Children in Wales' Winter Magazine. We're launching this issue in Children's Mental Health Week, which provides an opportunity to draw focus and attention to the fundamentally important matter of the mental health of babies, children and young people across Wales.

As I write this a number of my colleagues at Children in Wales are gearing up to host a meeting between the Minister for Mental Health and Wellbeing, Sarah Murphy MS, and members of our Young Wales volunteer group as part of CIW's Big Conversation programme. The intention of the Big Conversation is to enable young people to come together directly with Welsh Government ministers and share their own experiences, and those of their peers, on topics that matter to them, in line with article 12 of the UNCRC. Young people from across the country have fed in their views on topics, including mental health, and these points have been refined by Young Wales volunteers at a residential we held earlier in the winter and then through a series of excellent, youth-led discussions at our Young Wales Festival last November. These discussions centred around topics such as the ongoing issues of stigma around mental health; young people's enduring concerns around access to services; and the role of schools in identifying and providing support for young people struggling with poor mental health. My thanks to all of the young people involved, as well as all of our members who have contributed to the Festival, to supporting young people involved and who have enabled young people to contribute to the wider Big Conversation programme. Providing opportunities like this for young people to speak directly to those in power is absolutely fundamental to our work at Children in Wales, and I look forward to hearing what comes from these discussions.

As to the content of this quarter's magazine, I am, as usual, bowled over by the variety and quality of work being delivered in Wales to promote children's wellbeing. Highlights for me in this

edition included a chance to learn about Dr Tom Purchase's work to develop mechanisms by which parents can be empowered to advocate for their children's wellbeing in primary care settings. Parents play a fundamental role in ensuring that children's rights are respected and the argument put forward by Dr Purchase suggests that there is a need for greater study and for intervention to ensure that parents feel able to do this when speaking up for their children in medical settings. From the contributions provided by our third sector members it's great to read about the fantastic work being done by Platfform's Power Up project, which has engaged with over 700 young people in South Wales, to help shape services which reflect young people's desires and demands. Elsewhere, readers will find practical tips on supporting young people with self-harm from AFKA Cymru, insights into research into links between youth mental health and social media from Dr Livia Tomova and Thaïs Marques at Cardiff University, and an update on the development of a network to bring together those in the third sector working to improve mental health outcomes for children from my colleague at Children in Wales, Rachel Beddoe.

As ever, I extend my sincere thanks to all of our members who have contributed articles to this edition of the magazine.

Wishing you all the best for the year ahead.

Hugh





What Does Mental Health Mean?

According to the World Health Organisation:

"Mental health is a state of mental well-being that enables people to cope with the stresses of life, realize their abilities, learn well and work well, and contribute to their community. It is an integral component of health and well-being... Mental health is a basic human right and it is crucial to personal, community and socioeconomic development.

At any one time, a diverse set of individual, family, community and structural factors may combine to protect or undermine mental health...people who are exposed to adverse circumstances – including poverty, violence, disability and inequality – are at higher risk of developing a mental health condition."

What is Mental Illness and How Does it Affect Children and Young People?

Mental illness includes a range of health conditions involving changes in emotion, thinking, behaviour or a combination of theseⁱⁱ.

Children and young people affected by mental illness may experience emotional distress, physical illness, problems developing and keeping relationships with peers and family, and difficulties engaging in education, social activities, and/ or work. As a result, they may become more vulnerable to risk-taking, abuse and exploitation which could lead to further mental health problems and physical illness.

Mental illness can include depression, general anxiety, post-traumatic stress disorder, eating disorders, addiction, self-harm and suicide.

Children and Young People with mental health conditions can be particularly vulnerable to social exclusion, discrimination, stigma and human rights violations which can make it harder for them to seek help when needediii.

Globally, it is estimated that 1 in 7 10-19-year-olds experience mental health conditions^{iv}. In the UK 1 in 6 5-16-year-olds were identified as having a probable mental health problem^v, and in Wales, SHRN's (School Health Research Network) SHW (Student Health and Wellbeing) survey found that 24% of young people reported very high levels of mental health symptoms, with girls (28%) being almost twice as likely as boys (16%) to report symptoms. This survey is the largest of its kind in the UK with more than 123,000 students in years 7-11 from 202 schools in Wales taking part in 2021/22^{vi}.

How Can We Support Children and Young People?

Recognising the signs that a child or young person is experiencing mental health problems is crucial in supporting them to access early intervention and support. Common indicators may include:

- Experiencing low mood, feeling sad for longer than 2 weeks
- Feeling withdrawn, avoiding friends, family members and social activities
- Severe mood swings that cause problems in relationships
- Displaying out-of-control and/or harmful behaviours
- · Changes in sleeping habits
- · Changes in diet and/or eating habits
- · Decline in personal care
- Decline in education performance and/or attendance
- · Experiencing physical symptoms with no medical cause
- · Self-harm and/or suicidal thoughts

Noticing these indicators and responding early can make a significant difference in managing mental health problems^{vii}.

Improving mental health outcomes for children and young people can be challenging as there is a gap between rising needs and available resourcesviii, but we can promote mental health by encouraging open conversations, providing safe and nurturing environments, and teaching coping skills^{ix}. The SHRN's SHW survey found that most students surveyed felt support was available to them. 66% agreed that there was a member of staff at school they could confide in, 70% said they felt accepted by their teachers, 65% agreed they get the help and emotional support they need from family, and 63% agreed they can count on their friends when things go wrong^x. The Welsh Government has also developed the All-Age Mental Health and Wellbeing Strategy 2024-2034. This strategy aims to ensure everyone in Wales has access to the right support at the right time, and emphasises the importance of community support, reducing stigma, and improving service integration^{xi}.

Five Steps to Wellbeingxii

- 1. Connect with other people
- 2. Be physically active
- 3. Learn new skills
- 4. Give to others
- 5. Pay attention to the present moment (mindfulness)

References

- i https://www.who.int/health-topics/mental-health#tab=tab_1
- ii https://www.psychiatry.org/patients-families/what-is-mental- illness
- iii https://www.who.int/news-room/fact-sheets/detail/ adolescent-mental-health
- iv https://www.who.int/news-room/fact-sheets/detail/ adolescent-mental-health
- v https://www.youngminds.org.uk/about-us/media-centre/ mental-health-statistics/
- vi School Health Research Network (SHRN) at Cardiff University
- vii https://www.nspcc.org.uk/keeping-children-safe/childrensmental-health/
- viii https://phw.nhs.wales/news/new-analysis-reveals-trendsin-children-and-young-peoples-mental-health-care-in-wales/
- ix https://www.cdc.gov/children-mental-health/about/index. <u>html</u>
- x School Health Research Network (SHRN) at Cardiff University
- xi https://www.gov.wales/sites/default/files/ consultations/2024-02/draft-mental-health-and-wellbeingstrategy-children-and-young-people-version.pdf
- xii https://www.nhs.uk/mental-health/self-help/guides-tools- and-activities/five-steps-to-mental-wellbeing/







Social media is now a significant feature in children and young peoples' lives across Wales. According to Ofcom (2024), a staggering 90% of children aged 8-17 are regular users of at least one social media platform. TikTok, Instagram and Snapchat are among the most popular and used either to access entertainment, or as an outlet for self-expression and creativity. Social media can forge connections among children and young people belonging to marginalised groups, such as the young carer community. In fact, Carers Trust (2024) recognises that social media can provide a space for young carers to share experiences and signpost others to useful resources, alleviating feelings of social isolation. For children and young people living in rural communities, social media can bridge geographical gaps between their

homes and the rest of the world, providing access to broader networks and resources.

While social media can promote well-being, this powerful and far-reaching tool is not without limitations. It is widely known that social media can also expose children to misinformation, cyberbullying and associated mental health challenges (Welsh Government, 2024). A report by Internet Matters (2024) shows that two thirds of children have encountered online risks, such as exposure to harmful content or contact from strangers. Despite these risks, 75% of children view social media as essential for their independence. Therefore, the need for guidance on promoting digital citizenship and to safeguard users is paramount.

On a national level, the Online Safety Act (2023) aims to make the UK the safest place in the world to be a child online. In Wales, promoting digital citizenship and the ethical, and responsible use of social media is high on the agenda within Governmental policies. The Digital Strategy for Wales promotes online safety through its emphasis on digital inclusion, skills and safeguarding. Initiatives such as 360 Degree Safe Cymru and Hwb complement this, offering resources for educators.

On a local level, Dyfed-Powys Police are working hard to build on these policies and initiatives, by actively promoting digital citizenship among children and young people, both in schools and the wider community. Dyfed-Powys Police and Crime Commissioner Dafydd Llewellyn is strongly committed to his pledge to prioritise the needs of children and young people by enhancing services for them. Dyfed-Powys Police Schools Service Manager Bethan James heads up a series of workshops delivered to children between the ages of 5 and 16. The workshops are designed to help children and young people understand online safety risks, such as exposure to cyberbullying, grooming and sextortion. On this invaluable service, Bethan says 'Trained police officers act as trusted figures, leading age appropriate discussions with young people. Workshops encourage young people to critically evaluate online content, avoid misinformation and seek support from trusted adults.'.

Social media usage among children is predominantly characterised by passive consumption rather than content creation. This trend exposes children and young people to the 'Influencer effect' which can be a challenge for impressionable and susceptible young people. Influencers may project harmful content and persuade others to act based on their recommendations and behaviours. The 'Influencer Effect' requires a multi agency approach to safeguard children and young people (online), where all parties are aware of the current harmful trends and associated risks.

Dyfed-Powys Police Schools Service aims to empower children to make safer choices online and understand the potential consequences of their digital behaviour. Between September 2024 and December 2024, 11 Dyfed-Powys Police officers have engaged with 268 schools. 1,028 crime prevention sessions have already been delivered in schools across Carmarthenshire, Ceredigion, Pembrokeshire and Powys. The Service extends beyond the classroom, providing tailored pastoral support for parents and carers, offering practical tips to monitor and support childrens' online activities. While the Dyfed-Powys Police Schools Service is undoubtedly proactive, the speed at which the new trends and subsequent threats evolve is challenging.

Although each generation's experiences of childhood differs, the pace of social media's evolution is shaping the experiences of today's youth at an extraordinary rate. Digital technology's rapid growth often outpaces the cognitive and emotional development of its young users. Dyfed-Powys Police play a crucial role by mitigating immediate online risks, and equipping young people with the skills needed to navigate social media responsibly. However, developing digital citizenship should be the collective responsibility of society as a whole. Parents/carers, educators, law enforcement and communities all play a vital role in promoting digital citizenship among children and young people - in the sentiment that it takes a whole community to raise a digital citizen.





Where can parents turn when anxiety, bereavement, conflict or another mental health problem affects the family?

Barnardo's Cardiff Family Wellbeing Service is providing whole family support to help them cope, recover and thrive.

Mum Nora started noticing a change in her daughter Chloe when she returned to work after seven years at home raising her and her younger siblings. Chloe's attitude to school worsened and she was angry a lot of the time.

Things escalated when Chloe started pulling out her eyebrows and eyelashes, but her GP dismissed it as something she would grow out of, and Nora felt there was no practical help from school.

Nora said: "We were desperate, I had an eight-yearold daughter who was self-harming. I had no idea why and nowhere to turn, I was at breaking point. I called therapists and counsellors as far away as Manchester and London, but they said they could not help such a young child.

I felt like a failure as a mother. It got so bad that I even felt like walking away from my family."

Then she saw a leaflet about Barnardo's, rang the number and got a call back straight away. "I had a consultation over the phone. They recognised that I needed help too and suggested counselling with Cardiff Family Wellbeing."

"I didn't think I needed it at the time, but I'm so glad Barnardo's recognised that I did. I can now see how my own childhood had affected me as a mother. I gave 100% and found it difficult to cope when things went wrong and that's when I became angry and snappy," said Nora.

The family work included an attachment-based intervention with both parents and their daughter that provided creative and enjoyable sessions aimed at strengthening relationships and nurturing connections between parents and child.

With Barnardo's support I've learnt to be a better parent. I shared what I learnt with my husband each week, and we've attended parenting sessions together, learning techniques to help us be more patient and more conscious of our words and actions.

We have learnt not to react in the moment and that has resulted in less squabbling among the children and 95% fewer outbursts from my daughter. Now we can see a light ahead.

The biggest lesson I've learnt is that parenting sessions are something all parents can benefit from."



When a child is referred to Barnardo's for mental health support in Cardiff it's not only the child who gets offered help, but their parents/carers and siblings too.

The charity which runs the Cardiff Family Wellbeing Service on behalf of Cardiff City Council recognises that if a child is struggling with life, it's often a reflection of challenges facing the whole family.

Liz Baker, Barnardo's Assistant Director, explained. "We look at the individual needs of each family member including parents and the family relationships and dynamics. That may involve us working with children and parents together or individually, but a systemic approach helps make sustainable change for the child."

She said that sometimes practitioners see the negative impact of anxiety on three generations of the same family which is only now being identified.

"Parental mental health impacts on children, many parents are trying to do their best but finding it difficult because of their own needs. They are putting on a mask to protect their children. We are often the



first people who say to them, 'But what about you, what do you need?'," said Liz.

Both parents and children are helped to develop skills so they can improve their emotional wellbeing. Each intervention is individually tailored and may include counselling, creative therapies or specific groups such as bereavement support.

The service also works jointly with Cardiff Parenting so that a family only has a single assessment and doesn't have the trauma of repeating their story multiple times. Interventions for both provisions are planned in a stepped care approach.

The service also follows the 'no wrong door' approach so that children get the right help at the right time, and those who need a different sort of help are supported to access it.

<u>cardifffamilywellbeing@barnardos.org.uk</u>, telephone 02920 577074



Supporting parents to speak up for their unwell child – The ADVOCACY study

Dr Tom Purchase, Cardiff University



When receiving medical care, either from a GP surgery or in hospital, children are considered a vulnerable patient group at risk of coming to harm from the care they receive. This is partly because children, especially younger children, are dependent on their parents, guardians and informal caregivers to recognise when they're ill and seek help on their behalf. Parents may therefore play an important role in detecting and preventing unsafe care from harming their children.

In the UK, 37% of child deaths involve factors that could be improved to help stop children in the future from dying. In GP surgeries, one third of safety incident reports relating to an unwell child then led to harm. How can we help parents, caregivers and guardians to have greater roles to protect children from coming to harm?

An on-going study at Cardiff University (the FRIEND study, funded by the Royal College of General Practitioner's Scientific Foundation Board) is looking at how parents stop their children from being harmed in healthcare settings, for example,

in a GP surgery. Early findings from this study show that when parents speak up for their child, for instance if they have a concern, they can prevent harm from occurring. Examples of harms could be an illness getting worse or death.

Healthcare teams should be making the most of this and think about how to make sure parent voices are listened to. However, healthcare is always changing and adapting. How we therefore include the parent voice to keep children safe will not be simple.

I work as a GP in South Wales and have recently started a PhD at Cardiff University looking into how to support parents and primary care (GP) staff to speak up for unwell children, to stop them from coming to harm whilst receiving care.

This study has three parts. The results from each part will help me to complete the next one.

First, I will look at what is already known from available research about parents and healthcare

staff speaking up (sometimes called 'advocacy') for children. I will examine how and where this is done, and what good advocacy looks like.

Second, I need to learn from the parents themselves. Parents whose children have come to harm or nearly came to harm will be interviewed. Their stories will help me understand what changes might help protect other children. Children's voices are often represented by the most privileged in society, and I will therefore be speaking with parents from a range of backgrounds, to ensure the parent voice from all walks of life are included.

Doctors, nurses and other staff will also be interviewed to give me a picture of the whole care pathway. During the interviews I will use a "Human Factors" research tool to help think about all the factors that might help improve child safety (e.g., thinking about the whole system).

Finally, I will develop a way to support parents and staff to advocate for children. I will talk with a group of parents and staff who can make real life changes about what would and wouldn't work (called the "Change Laboratory" method) to make caring for children safer. They will identify things that need to change, how to change them, and how to measure that these changes are making a difference to children.

During the study, I will bring together a panel of parents with relevant experience to talk regularly about how the study is going and get their opinions on all parts of the study. The panel will be vital for writing interview questions and information to give to participants. They will also look at the results and help share them with others.

If you would like to be involved or help support this research, please get in touch via the email below.

Email: Purchaset2@cardiff.ac.uk

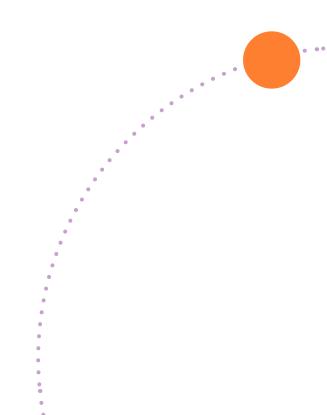
X: @T_Purchase_GP

Bluesky: @t-purchase-gp.bsky.social

This research is supported by the Health and Care Research Wales/NIHR Health Research Doctoral Fellowship Award.

Al tools provided by Copilot generated images used in this article.







Supporting Young People to Shape Mental Health Support in Gwent

Halyna Soltys, ProMo Cymru

Imagine a world where young people are not just recipients of mental health services, but active architects of their own support systems. In Gwent, this vision is becoming a reality through the Mind Our Future (MoFG) project.

The MoFG project was developed thanks to £999,888 in funding from the National Lottery Community Fund. Delivered by ProMo Cymru and Newport Mind, the MoFG project adopts a service design methodology - Discover, Develop, Define, Deliver. The project first researched the needs of young people (Discover), then defined the key problems (Define), developed potential solutions (Develop), and is now implementing and testing these solutions (Deliver). This process ensures that solutions to addressing concerns about mental health services are grounded in the lived experiences of young people in Gwent.

The project employs a group of 11 young people aged 16-24 from across Gwent as Peer Service Designers (formerly Peer Researchers). This youthled approach ensures that the project's direction and outcomes are truly reflective of the needs and priorities of young people in the region.



Discovering the Needs

The Discovery phase involved research with over 200 young people aged 11-27 across Gwent. The analysis of this data was shared in the MoFG Discovery Report. This research generated seven key insights, providing a comprehensive understanding of the existing support landscape and identifying critical gaps. This approach allows us to consider the root causes of the problems and develop solutions based on clear evidence.

The key insights were:

- · Staff need to be trustworthy, understanding and friendly whilst maintaining professionalism
- · Services need to be flexible and accessible to all
- Young people lack knowledge about the mental health services available to them in Gwent
- · Young people need consistency, especially when transitioning within and between services
- Negative experiences of services act as a barrier to young people seeking and accessing support
- Fear of stigma impacts a young person's willingness to reach out for support
- Young people need to get the right support at the right time

Co-Creating Solutions

Based on the Discovery Report, the Peer Service Designers defined key problems and co-created three core solutions:

- Campaigning and Social Media: Recognising the power of social media, MoFG is developing a dedicated Instagram account to raise awareness of support services available in Gwent. The solution aims to reach young people where they are and provide easy access to information and resources on the support landscape within Gwent, as well as reduce stigma surrounding accessing support.
- **Training:** MoFG is developing training programs for both professionals and young people, delivered by the Peer Service Designers. The professional training aims to support adults who work with young people to be adept and confident when communicating with young people about their mental health, in a way that makes them feel supported and listened to. The peer training focuses on equipping young people with essential skills like active listening and signposting, enabling them to provide appropriate support to their peers.

• Engagement: MoFG actively engages with stakeholders to improve existing systems, using service design principles. One example is their work with the SPACE panel to improve the young people's referral pathway. This collaboration ensures that young people's voices are heard within existing structures and that services are responsive to their needs. The Peer Service Designers' engagement with members of the Senedd, such as Sarah Murphy and Dawn Bowden, further highlights the project's impact and reach.

The Future of the Project

Mind Our Future Gwent is not just a project; it's a movement towards a more youth-centred and responsive mental health support system. By empowering young people to co-create solutions, MoFG is paving the way for a brighter future where every young person in Gwent has access to the support they need to thrive.

While MoFG has made significant strides, challenges remain. Sustaining engagement with the young people and stakeholders, securing longer-term funding, and measuring the impact of the interventions are key considerations. However, the project's commitment to youth empowerment and co-production provides a strong foundation for continued success.

Beyond developing skills in research, evaluation, advocacy, and campaigning, the project provides unique opportunities for personal and professional growth. Peer Service Designers are actively involved in the service design process, gaining valuable experience in teamwork and project leadership. Crucially, two residential opportunities over the past three years have provided a dedicated space for in-depth learning, connection, and peer support, fostering a strong sense of community within the team. These experiences have significantly increased the Peer Service Designer's confidence and helped them clarify their future aspirations, with many now in higher education and employment.











ERYICA (European Youth Information and Counselling Agency) and eight European partners* developed a European project in 2022-2024 to provide helpful resources for youth (information) workers about young people's mental health and some tips to guide young people living some mental health distress. The project responds to a need for support from young people experiencing isolation since the Covid-19 pandemic, insecurity after the start of the war in Ukraine, stress due to recent inflation and ecoanxiety amongst other stressful current situations.

We have provided different outcomes, targeting first youth professionals but also young people. Most of them are available in English, French, German, Spanish, Dutch, Greek and Estonian.

For youth professionals

- A guide for youth information workers. The guide equips youth (information) work professionals to identify mental health distress among young people, to provide first-hand support, and, when needed, to refer them to specialised services. The mental health professionals were an integral part of the project, as the consortium worked to explore ways of cooperation between them and youth information workers. Young people's point of view was also included.
- A podcast series. Through the four episodes of the podcast, young people had the opportunity to express themselves about

the importance of mental health and wellbeing. Testimonials of youth information workers dealing with the issues raised by young people are also shown in a sort of dialogue. The podcast primarily targets youth information workers. Most of the practical cases and good practices narrated in the podcast complements the guide. Available on Spotify and Amazon Music (audio only), and YouTube (video).

For young people

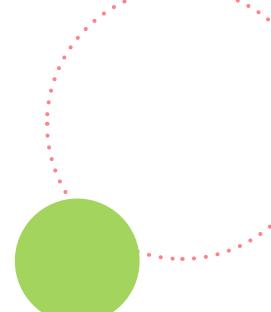
- Awareness raising campaign made by young people. Launched in November 2023, the campaign aimed to reverse the mental health stigma, which often prevents young people from talking about their problems; audiovisual material addressed to young people was created in the framework of the campaign (video testimonials, a mythbuster quiz and static tiles to raise awareness on mental health).
- The "Mind Matters Toolbox". This toolkit is designed to empower young people by providing resources that help them understand mental health better. It includes a Personality Test, a Mythbuster Quiz and Informative Articles to provide details on loneliness, pressure, self-discovery and stigma on mental health.

For young people

- Policy recommendations from the project research and outcomes (focus groups with young people, youth (info) workers, a survey report, national reports on the state of the art on mental health in partners' countries) for a better advocacy on the topic of young people's mental health. 9 recommendations that can be adapted at the local, regional, national and European level.
- A seminar in Brussels was also organised in September 2024 to share a survey report on youth (info) workers mental health literacy and to invite mental health experts and youth workers in a panel discussion. The day was also focused on the exchange of good practices and workshops.

*Partners: Harno (Estonia), Centro Regional De Información y Documentación Juvenil (Madrid, Spain), Bundesnetzwerk Österreichische Jugendinfos (Austria), DeAmbrassade (Belgium), Cyprus Youth Council (Cyprus), IASIS (Greece), YoungScot (Scotland) and Eurodesk.





From Awareness
to Action: Supporting
Children and Young People
Struggling with Self-Harm

Natalia Osbourne Trainer Consultant, AFKA Cymru

The mental health of children and young people in Wales and the UK is worsening (Hatherley S 2022; Action for Children 2024), with a noticeable increase in mental health needs and high-risk behaviours like self-harm. It is estimated that the UK has the highest self-harm rate in Europe (Bond 2022; Brophy 2006), with 5,500 admissions per year in Wales alone (Public Health Network Cymru). Care-experienced young people leaving care are 4-5 times more likely to selfharm in adulthood compared to those not in care (Department of Health 2012). Many cases of self-harm go unreported, making it difficult to determine the actual figures. The Children's Commissioner for Wales has emphasised the need for greater awareness and support for children who self-harm.

For over 20 years, self-harm has been a highly emotive topic that has caused significant concern among parents and professionals regarding the safety of our children. Despite greater awareness of the prevalence of self-harm, the act itself is often shrouded in secrecy and shame. Many children keep their feelings and the reasons behind their self-harm to themselves, leading to increased anxiety about how to protect them.

The reasons behind self-harm among children are complex and vary from one child to another. However, there are common themes that may explain the high rates of self-harm. Factors such as high poverty rates—approximately 30% of children in Wales live in relative poverty (Children's Commissioner for Wales 2023)—along with inequality, the cost-of-living crisis, the impact of the global pandemic, adverse childhood experiences, and overstretched mental health services have all contributed to this issue. Additionally, the negative effects of social media on mental health are becoming increasingly clear. Despite some positive initiatives and national strategies, children and their families still face challenges in accessing the support they need.

Many of our most traumatised children who engage in self-harm require ongoing specialised mental health support. While there is no quick fix or simple solution to prevent self-harm, AFKA Cymru offer workshops for professionals and caregivers on how to assess the risks and support children and young people effectively. Here are some examples of how to provide meaningful support:

- Try not to panic. Encouraging a young person to talk about their self-harm is crucial for finding the right support. We can do this by expressing our concerns or creating a safe space for them to share. It's natural to worry about saying the wrong thing. When someone first reveals their self-harm, focus on listening rather than trying to solve it. Validating their feelings and holding the space helps them feel less alone and can be very powerful. Acknowledge how difficult it is for them to share and let them know you're glad they confided in you. They are not expecting you to have all the answers.
- Focus on the feelings that lead the child to self-harm rather than on the behaviour itself. While we need to make sure the child is not at risk of immediate harm, by focusing on what is causing the distress can help to reduce the self-harming behaviours.
- 3. Educate yourself and get specialist information for the child. There is a lot of self-harm and mental health information available. Most people will access support to self-harm services by themselves. There are online courses run by professionals that young people can self-refer such as Alumina. The Mix and Childline offer online support, and charities such as Harmless and Young Minds offer self-harm advice. There are some great Apps such as Distract and Calm Harm have distraction techniques when children have the urge to self-harm.
- 4. Supporting someone who self-harms can be distressing, whether you are a professional, a parent, or a caregiver. It's important to have someone to share your feelings with so that you don't become overwhelmed. Consider what would be most helpful for you during this time. For instance, a foster carer I knew would email the child's social worker and their supervising social worker right after an incident. This approach kept everyone informed and helped her feel less isolated in managing the situation.

For further information on the training provided by AFKA Cymru for Professionals and Care Givers please visit our website – www.afkacymru.org.uk

Sources

Action for children (2024) 'Is youth mental health getting better or worse?

Bond H (2021) Young People and Self-harm, London: CoramBAAF

Department of Health and Social Care. (2012).

Preventing Suicide in England: a crossgovernment outcomes strategy to save lives

Hatherley S, Senedd Research, Welsh Parliament, (2022) 'Children and young people: is there a mental health crisis?'

Public Health Network Cymru (n.d) Suicide and self-harm prevention

Self-Harm UK, The Mix and Young Minds (2018), Survey, London: Self-Harm UK

The Guardian (2016) 'NHS figures show a shocking rise in self-harm among young'



Cymdeithas ar gyfer Maethu, Gofal Perthynas a Mabwysiadu

Association for Fostering, Kinship and Adoption



Social media has become a concern for many parents of teenagers. Youth mental health has deteriorated over the last decade, and because this deterioration coincides with the rise of digital technology use, concerns have risen regarding the possible effects of digital technology, particularly social media, on teens' well-being.

Social media and teenagers' well-being

Contrary to what one might think, a clear effect of social media on teens' well-being and cognition has yet to be established. Although an increasing number of studies are being conducted in the field of social media research, persistent limitations lead to inconsistent results. For example, while

some studies show small negative effects of social media on teens' well-being, others show positive ones or even no effects at all.

Current limitations and new perspectives

One reason for the disparity in these results is the use of indirect measures of social media: researchers mostly rely on screen time as an indicator of social media use in their studies. However, screen time alone is not very informative as it does not say much about teens' social media habits and experiences. Such as two adolescents spending the same amount of time on their phones might have completely different experiences with social media.

However, one common feature of all social media platforms is the use of quantifiable social feedback. Posting content on social media means receiving a certain amount of likes and, more broadly, knowing exactly "how much we are liked." Because peers' opinions are so significant to teenagers, it is important to understand the effects of receiving quantifiable social feedback on these platforms. But the first step to understanding how digital social interactions impact teenagers' well-being is to look beyond screen time and get insight into teens' social media experiences.

Teens & Screens Project

It is the goal of the Teens & Screens project to give teens a voice in social media and well-being discussions, and to understand better how and why they use social media. We wish to organize events in several secondary schools in the Cardiff area to initiate discussions with secondary school teenagers (aged 13-17) about social media. We hope that what we will learn from teens during these interventions will help us inform research designs to better capture social media effects on teens, and eventually, develop a thorough understanding of the possible effects social media might have on their well-being.



Going further

Building upon the knowledge provided by young people during the Teens & Screens project, we wish to develop studies to help us understand how social media could impact teenagers' behaviours and how their brains function. This research project will be conducted at Cardiff University Brain Imaging Center and will combine



behavioural and brain imaging techniques. The main goal of this project is to understand how the social interactions teenagers have on social media might influence the way they seek social approval online and in real life, and how their brains react to it.

Dr. Livia Tomova, Principal Investigator, **Cardiff University**

Thaïs Marques, PhD Student, Cardiff University





Approximately 25% of children are frequently bullied in school, and according to the recent Good Childhood Report, the UK currently has the second highest level of bullying in Europe. Research also shows how being bullied is associated with a range of poor mental health outcomes, including symptoms of trauma. It means that currently, in the UK, we have a large proportion of children and young people being bullied in school and vulnerable to developing poor mental health symptoms because of their

experiences. Kidscape and Dr Nathalie Noret from the University of York have been working together to better understand the traumatic impact of bullying and to evaluate whether a traumainformed therapeutic intervention may support children and young people who are chronically bullied in school.

In the study, 20 parents who contacted Kidscape's Parent Advice Line were offered the 12-week Trauma-Informed Therapeutic Intervention for

their child. The therapy was provided free of charge and offered in person or online. As part of the project, parents were asked to complete a questionnaire before and after their child had completed their therapy. Our analysis highlighted the impact being bullied can have on young people, including poor mental health, suicidal thoughts and self-harm, and a fear of and lack of engagement in school. As one parent reported: "It has been devastating to my child's wellbeing, confidence and academic progress."



Fortunately, our data analysis also showed how the trauma-informed therapeutic intervention can help chronically bullied young people, reducing symptoms of trauma, including symptoms of hyperarousal and re-experiencing the trauma. Parents also reported that the therapy had been incredibly beneficial for their child. For example, one parent said: "His counselling sessions really helped him to understand what had happened to him, and the process of healing started straight away as he had a safe space to talk about it all. His teachers let him down badly, so being able to trust another adult was the start of him rebuilding trust in others."

The research suggests that an intensive, traumainformed approach can help support young people to re-engage with school and reduce their trauma symptoms. It offers another avenue of support for children and young people being chronically bullied in school.

As a result, we are calling for:

- Bullying to be recognised as a traumatic experience
- · Schools to get help managing disclosures of bullying from a trauma-informed perspective
- · Parents and carers of bullied children to get more support
- An extension of the therapeutic intervention, so that it can support more young people
- Further evaluation to see if the approach is beneficial to all children

To find out more about our work, and to access the reports from this study, please visit the Kidscape and University of York websites.





Over the past year, Power Up has been delivering a wellbeing service for people ages 10-25 in Cardiff and the Vale of Glamorgan. The service – a mixture of social action, group wellbeing sessions and one-to-one coaching with trauma informed wellbeing practitioners – spent a year engaging with over 700 young people to learn what they'd change in the world, what support they needed, what was lacking, and what they liked. The research, as well as the opinions of the project's advisory board of young people, informed how our delivery was undertaken.

Social media cast a shadow over our findings. Though rarely mentioned by name, children and young people listed their concerns about the world by citing body image, war, intolerance and discrimination; the youngest children we engaged with said that they'd like to change the world by 'stopping the war' and, in the same breath, by putting a trampoline in their back garden. In our current climate, children know far more about the

world at increasingly younger ages, and perhaps as a result many we meet self-report increasing anxiety about the future. Both online and offline, there are fewer places for children and young people to escape from – or healthily process – things they do not have the tools to understand.

During our development year Power Up introduced a pitch-based competition wherein young people could create their own wellbeing service for the chance to have their ideas adopted upon delivery. Two of the finalist groups organically came up with online communities, a safe place for young people to meet others of similar age to learn and bond. This harkened back to the 2010s boom of mass multiplayer games, a surge that occurred in tandem with funding cuts for 'third spaces' like youth clubs and community centres. Child-focused websites aimed to introduce secure environments for young people to interact with the internet and one another. As these websites' player bases dwindled

and their software became archaic, these highly moderated sections of a less homogenised internet were shut down – and in their absence, children flocked to less regulated websites, filled with hateful rhetoric and disinformation, that filled the void but not the need.

In delivery, Power Up has worked with young people by providing these safe spaces to connect and process together. In schools and community groups we deliver tailored wellbeing sessions that promote mindfulness and relationship building; in one-to-ones our practitioners give a platform for young people to discuss all their worries, big or small, and coach them through these feelings. Young people have fed back that they were glad to be able to 'talk about things without being embarrassed' and say the things that they have 'hold inside [sic] for so long'.

Our delivery stands in line with our research, co-produced with our advisory board, which found that young people wanted to see support that allowed them the autonomy to make their own decisions about support, validation in their individual feelings and experiences, and accessibility in services. Few young people we asked were able to name organisations they could (or would) seek support from; many in the Vale of Glamorgan particularly mentioned the lack of services close to them. Some young people reported being turned away from an overstretched CAMHS and other mental health services in absence of crisis, and we see the impact of this as an early help service that increasingly receives referrals for young people who need intensive, long-form support that is not possible or appropriate for us to provide. Young people in vulnerable groups specifically reported wanting to see support from people who looked like them or had lived experience similar to their own, as they wanted to feel understood.

Our greatest successes can be attributed to the fostering of connection, in our project and beyond. The Hangout – a partnership between Platfform and CAVUHB that provides wellbeing support and connection opportunities to 11-18 year olds – has seen success for its integrative approach to relational wellbeing support, and informs our understanding as a project that the best way to overcome barriers is by working

together, with young people, local politicians and organisations, to assist in creating supportive environments to seek help for wellbeing at any place, stage or age.

For more information about Power Up, contact powerup@platfform.org



For mental health and social change Dros iechyd meddwl a newid cymdeithasol

Playing and being well

Marianne Mannello, Play Wales

How playing contributes to children's mental health, resilience and wellbeing

It is well known and accepted that playing matters to babies, children and teenagers. The recent publication from Play Wales, *Playing and being well*, emphasises that unstructured play opportunities give children a chance to support their immediate wellbeing whilst naturally building life skills which contribute to long-term development outcomes. Qualities such as problem-solving, teamwork and emotional regulation are being refined when children play. Research also shows that time, space and freedom to play can greatly benefit children's mental health and resilience, relieving stress and reducing the harmful impact of trauma.

Playing and being well reflects on research that demonstrates that the pleasure of playing underpins many of its benefits, motivating children to play more. Playing more can reduce anxiety and protect against depression. Playing with strong emotions like fear, shock, disgust or anger gives a sense of vitality and exhilaration. Deliberately creating uncertainty can prepare neural networks to respond flexibly and creatively to new situations without over-reacting. Moving and engaging all the senses helps children to build physical health, strength, agility and sensory integration.

Playing both requires and helps to develop social skills, balance, attention, memory, spatial awareness and more. Through playing children develop attachments to caregivers, friends, animals, places and objects, giving a sense of belonging and security.

Supporting play

To support children's play needs these conditions need to be present:

- **Time**, that's free from other demands, including therapy, treatment and rehabilitation
- Freedom from stress
- Space in a diverse and challenging outdoor environment with access to supportive adults, when necessary
- Opportunities to invest in their own space and time to create and transform their world, using their imagination.

In the publication, the authors introduce a 'relational capability' approach to wellbeing. Relational capability emphasises the dynamic and reciprocal relations between children and the various aspects of their lives. Drawing on research, *Playing and being well* places playing

as a capability. This allows for a strengths-based approach to playing and being well. In essence, when conditions are right for children to play, they can create their own wellbeing.

Advocating for play

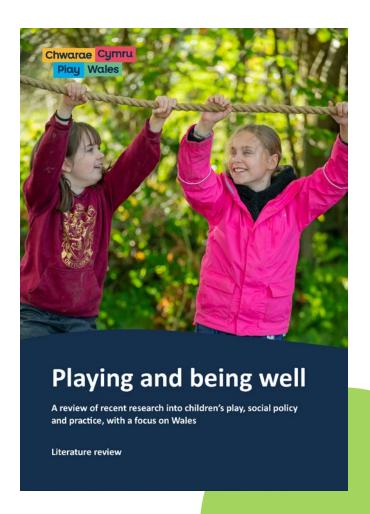
As adults we need to help children by raising play on the agenda at every appropriate opportunity. We need to support the provision of sufficient time and space for children to play every day. Playing generates concrete and first-hand experiences that underpin much of a child's development. It is widely agreed that early experiences influence how children learn, cope with stress, form friendships and adult relationships, and how they view themselves and their world.

Whilst playing comes instinctively to children, the support of parents, practitioners, policy makers and the wider community is necessary to ensure children have the freedom, space and time to themselves to act on their natural instincts. This requires:

- · Responsive practitioners and caregivers who understand the need for play
- Supportive communities where playing is tolerated and celebrated
- · Policy programmes which provide play spaces and opportunities.

For more information about *Playing and being well*, please visit: www.play.wales/playingandbeingwell







As Psychologists we work with babies, children, young people and grown-ups experiencing distress and right now, kids in the UK are the unhappiest they've been for over 10 years. Our children have become some of the most anxious in the world. In 2011 an estimated one in eight 10 to 15 -year-olds has a probable mental health problem. More recently, that's grown to one in five. But this is not an individual problem. It is a societal one. We know the gap in UK income equality continues to grow and none of us exist in a vacuum. So, rather than locating these needs within individuals, we need to focus on relocating intervention within the contexts we are living in.

Lots of grown-ups are reaching out to people like us to try and understand what's going on and get help. There are now so many people reaching out for support that waiting lists for things like child neurodevelopmental assessments are years. Services typically take a medical approach to organising this support. This gets locked in as the dominant solution because support is largely gatekept by the DSM diagnosis (diagnostic and statistical manual of mental disorders) rather than need. Once you get a diagnosis, support isn't guaranteed. It also takes a lot of resources to provide a diagnosis in the first instance.

It's helpful here to understand that psychiatric diagnosis is primarily a classification system. It is not based on identifiable bio-makers, chemical imbalances or specific genes identified with medical tests. The lack of specificity in the definitions means that there is a lot of overlap between categories and two people within one category can have very different presenting problems. Human emotions and behaviours are far too complex, socially situated, and changeable according to the context.

It's important to recognise that chronic stress can look like neurodevelopmental or other mental health difficulties. That's things like the diagnosis

of ADHD or autism. It can be hard for parents, schools and clinicians to tell the difference between them. Over the past few decades rates of diagnosis have increased significantly. Evidence shows this is about how stressful and disconnected our society is today. We are not getting our relational needs met in the way we need.

It's also important to know that there is growing evidence that a DSM disorder diagnosis may not be having a completely positive impact. The 2020 National longitudinal study of Irish children found by age 13, those who had held an ADHD diagnosis at 9 years showed more emotional and peer relationship problems, worse prosocial behaviour, and poorer self-concept, than those who did not receive a diagnosis despite similar levels of symptoms. A similar study, the Longitudinal Study of Australian Children, included a comparison of 400 children diagnosed with ADHD, matched to a group with similar presentations but no diagnosis. By 15 years old those with the diagnosis were doing worse on a number of variables including self-harm, feeling that they could succeed academically, sense of selfefficacy, and had negative social behaviours.

Labelling children as 'abnormal' or 'disordered' helps services gatekeep resources but the benefit to children's health is questionable. Instead, we need an approach that recognises needs through a strengths-based lens, takes a contextual 'sense making' approach and celebrates difference and inclusion by creating the conditions for us to thrive.

What can individuals and grown-ups do?

- 1. Don't overlook the power of connection and relationships. Make some time daily to help your child connect with people and things that matter to them and support opportunities for this (especially offline).
- 2. Learn how to soothe your nervous system. This helps us feel safe and calm. Although the way to do this will be individualised, there is always something that can be done to help, even if we cannot completely remove someone's distress or change their circumstances. Feeling someone is present and alongside you is key.
- 3. Accept, embrace and celebrate your child but yourself too. Collaborate with your child to discover what is meaningful to them.

What can services and government do?

- 1. Keep a focus on equality, social justice, inclusion, living conditions and so on means fewer people will need to rely on mental health services.
- 2. Prioritise primary prevention strategies that take a whole family and whole system community embedded approach.
- 3. Take a relational rather than a behavioural approach. Specialised support is important but without a strong foundation of connections and relationships we are at risk of mental health problems.

The views represented in this article are of the authors in their capacity as professional practitioners.



Psychologists for Social Change Cymru

Dros Newid Cymdeithasol Cymru



Mental health issues among children and young people in Wales have become an increasing concern. According to the latest report from the School Health Research Network (SHRN), data from the school-based survey, delivered by Cardiff University in partnership with Public Health Wales and Welsh Government, shows 24% of young people have experienced high levels of mental health symptoms¹. With mental health affecting a growing number of children and young people, early intervention and a holistic approach are critical to providing timely support. With children and young people telling us that prevention, early intervention and interventions at different stages is important to them, a focus on prevention and a holistic approach is crucial to supporting their needs.

As mental health challenges for babies, children and young people continue to rise, the need for a comprehensive, proactive and accessible strategy is more urgent than ever. The Welsh Government's draft Mental Health Strategy marks a pivotal moment in how Wales approaches mental health care, especially for the youngest and more vulnerable citizens. The strategy aims to create a system that is proactive, comprehensive and inclusive. With an emphasis on collective responsibility, the Welsh Government recognises that improving mental health of babies, children and young people cannot be achieved in isolation and requires the collaboration between government, local authorities, schools, healthcare providers, third sector organisations, and

communities. Integrating mental health support into every aspect of a child's life can offer a comprehensive approach to addressing mental health challenges.

Actively involving babies, children and young people in shaping the development of services can ensure their rights are upheld and services meet their unique and evolving needs. Establishing youth advisory boards or consultation forums could help to ensure babies, children and young people have a direct say in how mental health services are delivered. It is also important to children and young people that they have a clear route, or pathway, to voice their concerns about the care they receive. By normalising discussions around mental health and providing children and young people with the tools to better understand their emotions and mental health needs, the strategy could strengthen their participation in decisions about their health. The needs of vulnerable groups are acknowledged within the strategy, which aims to ensure support is accessible to children from diverse backgrounds, including children in care, children with disabilities, children from ethnic-minorities, and low-income families. Addressing the barriers that some babies, children and young people face is vital to ensure they have access to the support services they require. Ensuring that these services are not just available but also culturally competent, appropriate, and fully inclusive to meet the needs of a diverse young population in Wales. Children growing up in poverty, or in unstable environments, face a greater risk of developing mental health issues. Addressing the broader socio-economic factors that contribute to mental health inequalities could work to reduce these disparities through targeted support and outreach.

The Welsh Government's draft Mental Health Strategy, 2024, provides a strong foundation for improving mental health support for children and young people. Ensuring we can make a real difference in the lives of children and young people more work is needed. Expanding access to services, focusing on prevention, ensuring equitable care, and involving families and communities can help create a more inclusive and supportive mental health system that meets the evolving needs of babies, children and young people in Wales. With continued investment,

collaboration, and a commitment to addressing the root causes of mental health challenges. Wales can build a future where all young people have the tools they need to thrive emotionally and mentally. Empowering children and young people to participate in the development of mental health services and addressing socio-economic barriers to accessing services can work towards creating a mental health system that reflects and promotes the rights of every child in Wales, ensuring that their wellbeing is supported now and in the future.

With the onset of the Welsh Government's Mental Health Strategy, Children in Wales alongside colleagues in the Third Sector have explored the potential of establishing a network to promote the rights of children and young people. Ensuring their voice, and lived experience, is at the heart of decisions on service provision for mental health support. This network will bring together Third Sector Organisations, who have a focus on Children and Young People's Mental Health, to establish a collective voice to motivate and activate change, while aligning work to enable a consistent and collaborative approach. If you would like more information about the children and young people's mental health network, please contact Rachel Beddoe, Research and Policy Information Officer,

rachel.beddoe@childreninwales.org.uk.

References

1 Nearly a quarter of young people in Wales are reporting very high levels of mental health symptoms following the pandemic - News - Cardiff University (cited 08.01.25)





As we enter a new year, the discussion of mental health remains as important as ever before. Mental health, whether deemed to be 'good' or 'bad', underpins an individual's overall health, wellbeing and day-to-day lived experiences. Unfortunately, more and more children and young people are increasingly facing mental health challenges, with around 60% of young people in Wales experiencing difficulties with their emotional and mental health at least once a week. Children and young people tell us at NYAS Cymru that the Welsh Government must make improving mental health services and support their top priority, and in their own words, mental health matters to children and young people.

The mental health challenges faced by care-experienced children and young people, and the effectiveness of the support systems available to, cannot be ignored in wider discussions of mental health. Children and young people with care experience are four times more likely to experience mental health struggles in comparison to their peers.² Whilst mental health issues can arise for a variety of reasons, mental health problems among care-experienced children and young people are often attributed to the traumatic experiences which led them to entering care. This can be exacerbated by the experience of living in care itself and increased feelings of isolation,

loneliness and instability. As a result, making sure there is high quality, person centred, and trauma informed mental health support available is critical for the wellbeing of children and young people living in care and helping them to thrive throughout their childhood.

Making sure every child and young person has opportunities for their voices to be heard is one of their most important rights. Listening to children and young people is key to improving their selfesteem, confidence, and helping them to feel safe and secure and in Wales, this is primarily facilitated through the active offer of advocacy for eligible children and young people. For children and young people accessing mental health services, it becomes even more imperative for their views, wishes and feelings to be heard by professionals to make sure that the best decisions are being made regarding their treatment. Though Independent Mental Health Advocacy (IMHA) is central to this, the offer is only accessible for qualifying patients rather than anyone accessing any type of mental health support.

In Wales, NYAS Cymru provides advocacy services to eligible children and young people, and this can sometimes involve supporting them with their mental health. In one story, Jack* had begun working with a NYAS advocate for an issue not initially relating to his mental health. However, Jack soon started speaking about some of the mental health challenges he was facing, which was leading to him not attending school, feeling lonely and struggling to form friendships. The advocate was able to connect Jack with a regular counsellor, support him in building friendships and ensure there was additional mental health support available for him at school. Quickly after this, Jack's mental health started to improve, and he was feeling much happier; Jack told his advocate he felt less isolated, had been able to make new friends and was finding school much easier.

The power of advocacy in the context of mental health cannot be underestimated and now is as important of a time as ever for the Welsh Government to truly transform advocacy services. As we eagerly await and look forward to the next steps of the proposed Mental Health and Wellbeing Strategy, we believe there are opportunities for Welsh Government to improve

how children and young people have their voices heard when facing mental health challenges through possible reforms such as:

- Establishing an active offer of advocacy for all children and young people accessing or wishing to access mental health services in Wales.
- Improving access to the existing active offer of advocacy through reviewing and reforming the National Approach to Statutory Advocacy.
- Ensuring consistent and sustained funding of advocacy services across the health sector.
- · Introducing a specific children and young people's Mental Health and Wellbeing Strategy.

To find out more about NYAS Cymru advocacy services in Wales, please refer to our website or contact sharon.lovell@nyas.net

Authors: Eve Cullum and Phoebe White. policy@nyas.net

References

- 1 Senedd, 2024. Three out of five children and young people coping with emotional and mental health issues every week in Wales
- 2 NYAS, 2023. Mental Health Across the Border Summer 2023



gwasanaeth eiriolaeth ieuenctid cenedlaethol national youth advocacy service

How a Goblin-based crime created friendships within the Electively Home Educated population of Blaenau Gwent

Dion O'Shea, Aneurin Bevan UHB

Within Child and Family Community Psychology (CFCP) we work across communities to support children's wellbeing and resilience. We collaborate with different sectors to foster a 'hold on' culture, promoting psychosocial understanding of distress and driving systemic cultural change. As a team, we offer a variety of activities to achieve our goals, one of which is project work. One example of this is the recent Dungeons and Dragons project we ran with the Education Welfare Service (EWS).

Dungeons and Dragons (DnD) involves a gathering of individuals, either in person or virtually, collaborating to craft an interactive tale. Ahead of the gathering, one person assumes the role of Games Master (GM), who serves as a storyteller, judge, and facilitator of the imaginary world created. The rest of the participants engage with one another and interact with the GM's fantasy realm. Each participant creates a character, an ingame persona designed with a specific playstyle in mind. Dice are used to help make decisions and create a sense of luck within the game.

Playing DnD helps create an environment that encourages young people to develop social skills such as; building relationships, teamwork, empathy, problem solving and planning. We decided to reach out to our partners to assess if there was any energy for a project that uses DnD as a therapeutic intervention, which led us to the EWS.

The EWS were interested in a DnD based project for the Electively Home Educated population of Blaenau Gwent. This population was chosen due to its vulnerability to social isolation and the associated long-term effects on mental health. The EWS also explained that there had been some interest in a DnD group from this population in the past. As a team, we decided to pilot a group to create a safe space for Electively Home Educated young people to belong.

DnD is complex and the reading and maths can be intimidating so we began by editing the character sheets to help ease the process for the young people invited to play. An outline for the story

was created for the first session, with several goals in mind: to encourage the young people to plan together, to interact with various characters in the world, and to have as much fun as possible. These aims were chosen to create the most opportunities for our young people to engage with the social positives of DnD.

On the day of the session, six young people arrived to play and there was an anxious energy in the room. This quickly dissipated once the formalities of gameplay had been explained and everyone had their favourite colour dice. Over two hours, a group of six strangers began to create a story about the town of Riverrun, which was plagued by goblin raids and saved by five adventurers. We watched as young people began to plan together, chat with in-world people with empathy and create relationships.

During the session parents who had remained to watch spoke with members of CFCP to express their delight. A parent shared their surprise at seeing a different side of their child. They noted that their child is usually quite shy and would not have expected them to take on a leadership role in a game like DnD.

Evaluation forms were collected from the group of young people where we found a popular phrase 'DnD can help create friendships'. Having experienced first-hand the positive impact that DnD has had, we have decided to run the group again to provide another opportunity to enjoy the social nature of DnD. This second session ended with one of our young people asking 'So when is the next session?'.

abb.childfamilycommunitypsychology@wales.nhs.uk





Research demonstrates that 'low intensity life story activity' improves the mental wellbeing of care experienced young people. This practice does not replace Therapeutic Life Story work but is activity that can benefit all children and young people from the moment they enter care. Low-intensity approaches, which for example can be delivered by foster carers, can be available to all.

Murray Davies, My Story Org

Frequently changing circumstances can make life for care experienced young people feel distressing and chaotic. A digital life story record can provide some consistency. It helps ensure that they have an accurate record and understanding of their life journey: a coherent story of their experiences which is available to them to refer to and reflect on into the future. It can assemble a young person's caring network - people that care about a young person, and that the young person cares about.

To provide a suitable digital resource we have worked with young people, foster carers and residential care staff to develop an inexpensive app, My Story app, to record and help children understand their journey. Digital stories cannot be lost, are always accessible wherever a young person is living – even after they have left care.

Helping care experienced young people to develop positive mental health is a priority. In a Senedd briefing the Children, Young People and Education Committee reported in 2023 'Care experienced children and young people may be four times more likely to have mental health support needs than other children... and their support needs are not being met.'

In addition, in the 12 months to March 2023 26% of care experienced young people in Wales had two or more placements...and more commonly a change of allocated social worker. To add to this instability, the Fostering Network reports 29% of foster carers had two changes of supervising social workers. (18% had more)

In these circumstances, the importance of trauma-informed care and resources to support this practice is clear.

Low intensity life story activity aligns with the principles of trauma informed care, particularly the importance of establishing trusting relationships. Foster carers and young people can engage together in using the My Story app.

In a recent British Medical Journal article Hammond et al (2023) describe how foster carers can help young people build their narrative by recording potentially valuable parts of a child's every day present circumstances. The carer and child discuss these, generating positive future expectations, aspirations and developing trust in caring

adult(s) and relationships. The process supports other Trauma Informed Care principles: choice, collaboration and empowerment.

Social workers can contribute to specific areas. Missing information can have an enduring impact on identity and self-esteem throughout a person's life.

Digital resources ensure that life story activity is easy to maintain and contribute to. The My Story app offers secure, unlimited and easy-access opportunities for young people (and those caring for them) to build a unique digital record which is theirs for life. The activity becomes a partnership with information openly shared and communicated

My Story app captures a young person's 'everyday magic' - their mannerisms, characteristics, their idiosyncrasies, humour and history of relationships, helping them feel more positive about themselves and their relationships. It supports the development of self-esteem, identity and belonging which are essential for positive mental health and wellbeing.

Ensuring that all care experienced children and young people have a life story resource can promote positive wellbeing. Digital resources ensure security and permanence. Not necessarily the panacea but the practice of life story activity can make a significant contribution.







Clybiau Plant Cymru Kids' Clubs has been representing, promoting, and supporting Out of School Childcare Clubs since 2001. **Our vision** is a Wales where children play, and communities prosper. **Our mission** is to be the voice of Out of School Childcare Clubs in Wales, supporting children's right to play and quality childcare that is sustainable/affordable and meets the needs of children, their families and communities.

Since our establishment in 2001, we have worked to develop a professional Playwork workforce that recognises and values the importance of children's self-directed play. In partnership with the Welsh Government, we advocate for the role of play in supporting children's physical, cognitive, and mental well-being. Playworker and Play Theorist Bob Hughes' identification of 16 types of play demonstrates how a variety of play experiences contribute to children's overall development, mental health and resilience.

The Growing Challenge of Mental Health

In recent years, concerns about children's mental health have grown significantly. The Health and Care research Wales (2022-23) report states one in six children and young people have a diagnosable mental health problem. This concerning statistic emphasises the need for greater support, particularly in addressing emotional, social, and physical challenges that impact wellbeing.

Out of School Childcare Clubs are uniquely placed to support children's mental health and resilience. However, in our recent national club survey (April 2024), many reported that staff often feel underprepared to support children facing mental health challenges, also stating a need for specialised training and guidance to equip them to provide meaningful and effective support.

Play is fundamental to children's emotional, social and mental wellbeing. Through play, children learn about themselves and the world around them, gaining real-life experiences that builds confidence and self-awareness. Social play, whether through group interaction, imaginative scenarios, or independent activities, fosters communication skills and social development. Crucially, these opportunities contribute significantly to mental health and emotional resilience.

At Clybiau Plant Cymru Kids' Clubs, we work with Out of School Childcare Clubs and Playworkers across Wales to emphasise the importance of play and its connection to children's rights. Through funding we provide training and resources to help Playworkers understand how play supports children's confidence. holistic development, and emotional wellbeing.

As advocates for Play we encourage those who work in Out of School Childcare Clubs to recognise the vital role they play in promoting each child's wellbeing. Welsh Government legislation has Children's rights at the heart, and it is our shared responsibility as professionals to ensure children are listened to, have a voice, a choice, are safeguarded and provided for.

Clybiau Plant Cymru Kids' Clubs provide training programmes and members resources which include,

- Stepping Out
- Anti Racism Toolkit
- · Safeguarding Health Checks
- Y Bont Quarterly Newsletter
- Clwb Hwbs
- Weekly Bulletins

Also, guest speakers in our monthly Clwb Hwbs and Y Bont articles enhances this support where clubs are given the opportunity to discuss, ask questions and learn from different perspectives.

Children thrive when their voices are heard and respected. By fostering a culture of child participation, we empower Playworkers to observe, listen, respond, and reflect on each child's needs. This approach not only improves the quality of

care and play opportunities but also enhances children's resilience, self-esteem, and overall happiness.

The impact of our work is evident in the growing number of Playworkers and settings seeking to improve their practice. Through our advocacy and resources, we are building a sector that values mental health and wellbeing as essential components of high-quality Out of School Childcare Clubs.

As we continue to advocate for children's right to play, we must ensure that policies and practices reflect the intrinsic value of play and leisure of childhood. Out of School Childcare Clubs play a vital role in supporting children's mental health, wellbeing and resilience. By equipping Playworkers with the skills and knowledge they need, we can create environments where every child feels safe, supported and ready to thrive.

References

- 1 Welsh Government (2014) Wales: a country where there is a chance to play. Cardiff: Welsh Government (Crown Copyright)
- 2 https://healthandcareresearchwales.org/about/news/ research-wales-making-difference-mental-health-welshchildren-and-young-people
- 3 Edition-91-Autumn-2024-English.pdf
- 4 Children's Commissioner for Wales (2018): spotlight report: Article 31. Swansea: Children's Commissioner for Wales
- 5 <u>Children's Commissioner for Wales (2016) What Next?</u> What Next? Swansea: Children's Commissioner for Wales
- 6 Adroddiad yr Arolwg Clybiau Cenedlaethol Clybiau Plant Cymru (CY)





Rema A Begum is a counsellor and lead counsellor for the University of South Wales (USW) TalkingZone, a school-based and community-based service in Newport that supports children and young people. Alongside this role, she runs her private practice, Belonging Counselling, which offers tailored therapeutic services for adults and young people. Her work focuses on creating safe, inclusive spaces where individuals can explore their emotions, address mental health concerns and achieve personal goals.

As a second-generation Bangladeshi Muslim, Rema combines lived experience with professional expertise. She has witnessed the challenges faced by many young people in Wales, often amplified by societal pressures and a lack of culturally informed mental health support. Issues such as anxiety, depression, eating disorders, self harm and stress are frequently exacerbated by family difficulties, adverse childhood experiences, social media pressures, and delays in accessing appropriate services.

For children and young people from ethnically diverse backgrounds and other vulnerable groups, these challenges can be even more daunting. Cultural stigma around mental health, experiences of discrimination and unequal access to services often leave them feeling isolated and

misunderstood. Many young people share how mainstream mental health services fail to reflect their lived experiences and cultural understanding. which discourages them from seeking help even in moments of crisis.

Rema's work seeks to address these gaps by providing empathetic support that aligns with the cultural identities of the children and young people she serves. By creating spaces where they feel safe, respected, and heard, she helps them to navigate their challenges, express themselves and recognise their strengths.

In 2023, Rema partnered with Gwent Ethnic Minority Support Service to deliver counselling to Ukrainian young people displaced by the war. These young people faced significant trauma and anxiety after separation from loved ones and upheaval in their lives. Through trauma informed approaches, she helped them process grief and build a sense of stability and safety. Witnessing their resilience in such difficult circumstances was both humbling and inspiring.

Beyond counselling, Rema manages workshops and projects for third sector organisations. Recently, she collaborated with Black and Minority Ethnic Muslim women and children in spaces like mosques and youth clubs, tailoring workshops to respect faith sensitivities and cultural values. Mindfulness exercises were adapted to include faith based practices, and discussions about mental health were conducted in ways that acknowledged the groups lived realities.

Rema shares the importance of self compassion and embracing one's identity, particularly for ethnic minority young people. Many face pressure to conform to societal expectations or struggle with balancing cultural and personal identities. She encourages them to see their heritage as a source of acceptance rather than a barrier. By practicing kindness toward themselves and finding spaces where they feel valued - young people can rebuild their confidence and thrive, not just cope.

While these efforts are impactful, significant barriers remain. Long waiting times for mental health services often leave children and young people without the timely support they need. The transition from children's to adult mental health

services frequently disrupts the continuity of care, which is critical to wellbeing. Vulnerable groups including care experienced children, those with special educational or additional learning needs, neurodivergent individuals and young people from refugee or asylum seeker backgrounds face persistent inequalities in accessing mental health support.

The mental health field must look at inclusive, culturally responsive practices that involve young people in shaping the support they receive. Co-production is essential to ensuring that their voices guide services. The sector also needs to move beyond its Eurocentric foundations, adopting approaches that reflect the diverse experiences of the communities it serves.

There have been positive developments, such as increased funding for some services, and across Wales, there are dedicated people and organisations working toward a future where all young people feel supported and valued. However, improving mental health for children and young people requires collective effort and collaboration from policy to those seeing people day to day including community led initiatives with culturally responsive practice require greater investment.

Her message is that every person has the right to be heard, valued and supported in their journey towards their wellbeing. info@belongingcounselling.com **Belonging Counselling**



Each year, Children in Wales, in partnership with the End Child Poverty Network Cymru (ECPN), conduct the Child & Family Poverty Surveys. In 2024, we launched a third survey, aimed specifically at parents.

The three surveys aim to better understand the current issues facing babies, children, young people, and families in Wales. The results have allowed us to assess the broader impact of these challenges and, more importantly, to hear directly from children, young people, and parents themselves.

Released during **Children's Mental Health Week** (3–9 February 2025), the findings from all three surveys highlight the negative impact of poverty on the whole family unit.

The findings are clear: poverty significantly increases stress and anxiety for both children and young people, as well as their parents and carers. Living with poverty-related issues such as debt and hunger has a detrimental impact on emotional and mental health. Over **60**% of practitioners reported that the mental health of both children and parents has worsened over the past year.

One practitioner stated, "People are losing hope and being pushed further and further into poverty."

95% of parents/carers feel that their financial situation is negatively impacting their mental health. Many families shared that financial pressures have reduced 'family time' due to additional working hours, affecting their relationships.

Parents/carers shared how overwhelmed, stressed and isolated they felt. This comment from a parent sums up how many are feeling:

"I manage every single penny. It's exhausting, it's hard to remain positive and I feel guilty that my children are missing out on opportunities because I can't afford them."

Children and young people overwhelmingly highlighted the mental and emotional impact of poverty. This most commonly included feeling anxious about not having enough money, being unhappy and isolated, being in debt and feeling left out. They also frequently referred to feeling ashamed and trying to hide their circumstances from peers and adults.

For #ChildrensMentalHealthWeek, we're focusing on how poverty impacts the whole family unit and denies babies, children and young people many of their rights. It is essential to listen to their experiences and act on simple measures that can make a difference.

Whatever your role or background, there's always more we can do to help. Children and young people have called for lower school uniform costs, free transport, better support to tackle bullying, and free school meals for all. Parents are asking for more opportunities to develop skills, easier access to support services, and free family activities. Sometimes, what parents need most is empathy and understanding. Every action, no matter how small, can make a difference. Let's work together to create a brighter future for babies, children, young people, and families.

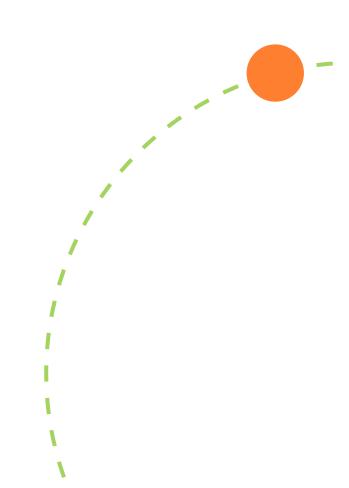
"Support the people who are going through it, so they know they are not alone." (10-13yr old)

About the Author: Karen McFarlane was a Senior Policy Officer at Children in Wales. Sadly, Karen

passed away shortly after completing the report last year. The publication of this report was delayed as a result. We are publishing this report today in recognition of Karen's contribution to our annual reports since 2021. Children in Wales With deep sadness, we share the loss of Karen McFarlane

To read the full reports visit the Children in Wales website here.





Organisation links

Coleg Sir Gar

Clybiau Plant Cymru Kids' Clubs

NYAS

Platfform

Barnardo's Cymru

Cardiff University, Psychology Dept

Children in Wales

Play Wales

European Youth Information and Counselling Agency

ProMo Cymru

AFKA Cymru

Kidscape

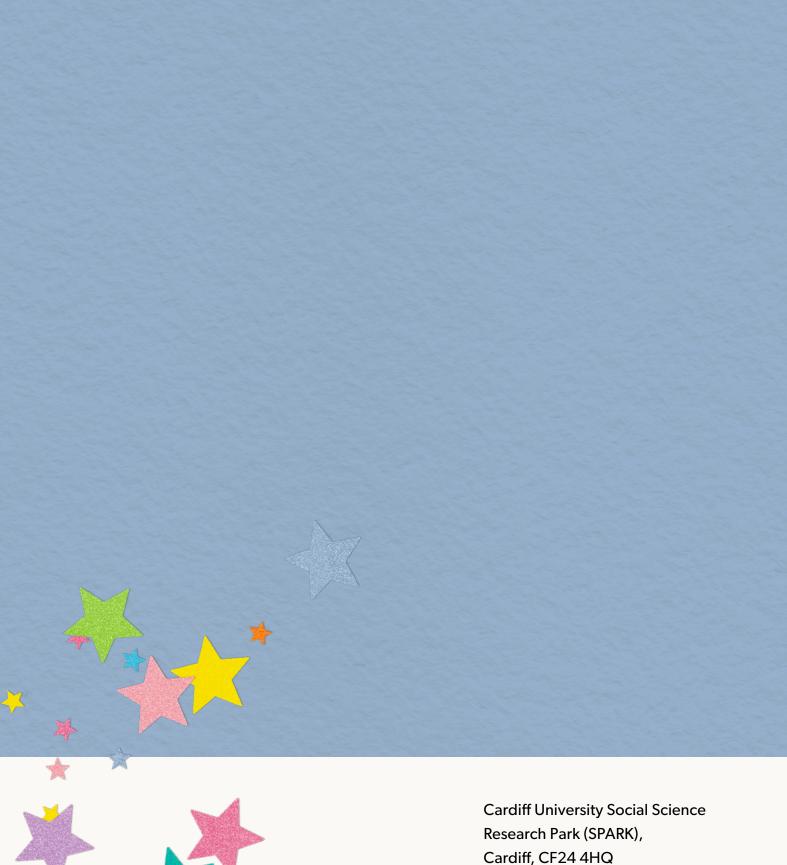
Cardiff University

My Story Organisation

Rema Begam

Aneurin Bevan UHB

Psychologists for Social Change Cymru







Cardiff, CF24 4HQ

****029 2034 2434

 \bowtie info@childreninwales.org.uk

₩ @childreninwales.org.uk

♠ @childreninwales

② @youngwalesciw

in Children in Wales

childreninwales.org.uk