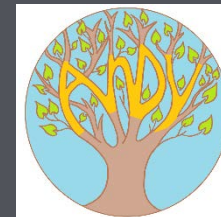


STARTING AS WE MEAN TO GO ON: IMPROVING MENTAL HEALTH & WELL-BEING IN SCHOOLS



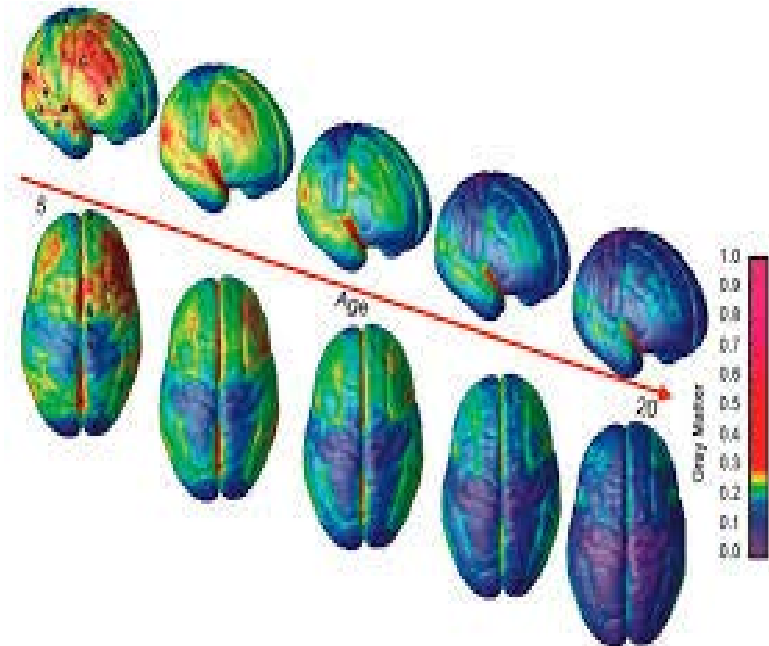
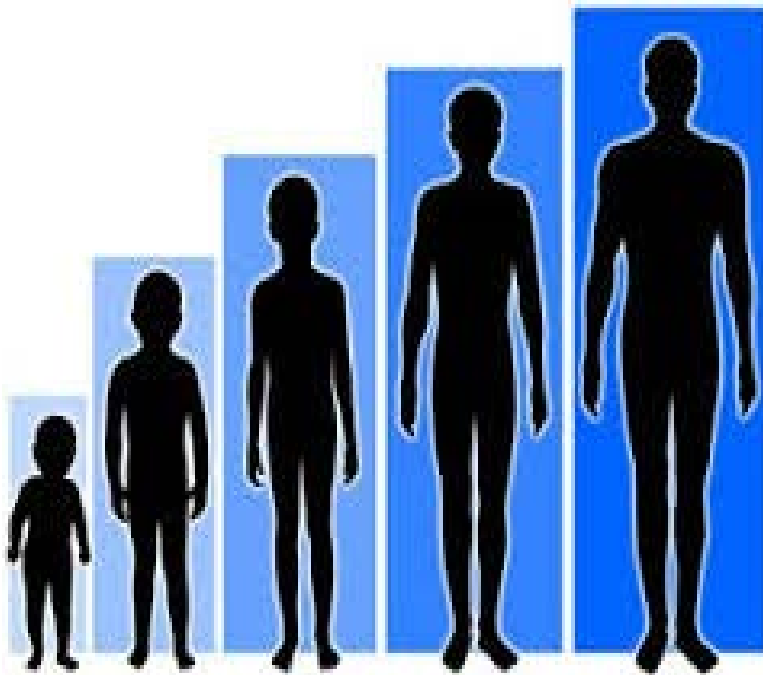
Professor Shirley Reynolds
Charlie Waller Institute



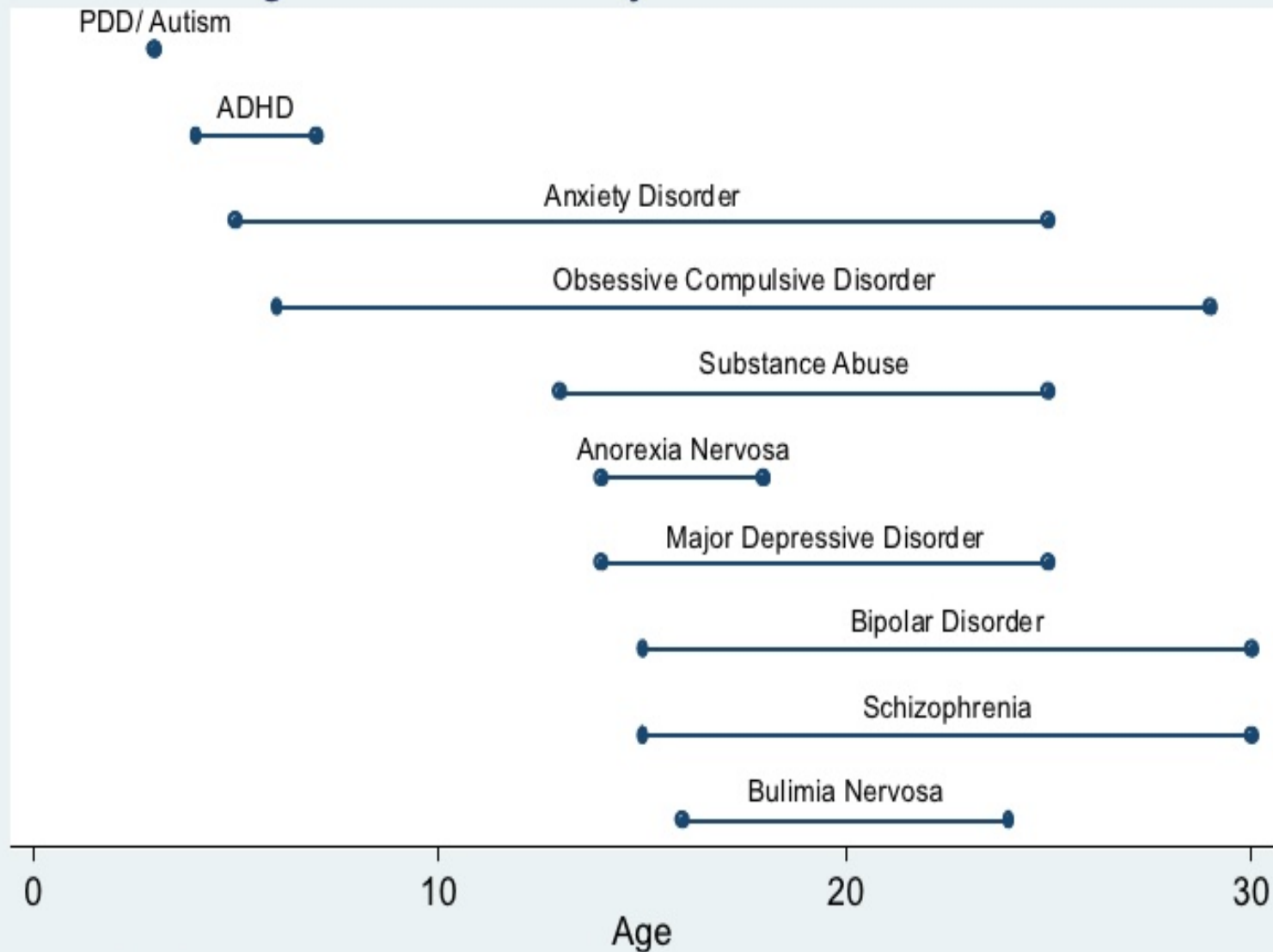
'THE HAPPIEST TIME OF YOUR LIFE'



DEVELOPMENT AND CHANGE



Age of Onset of Major Mental Disorders



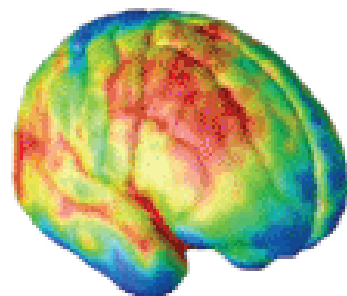
Source: DSM-IV, 2000

Growing a Grown-up Brain

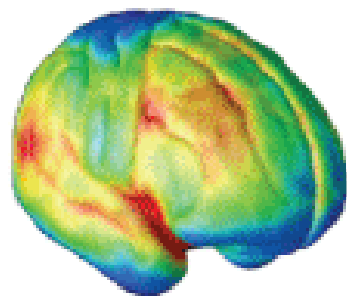
Scientists have long thought that the human brain was formed in early childhood. But by scanning children's brains with an MRI year after year, they discovered that the brain undergoes radical changes in adolescence. Excess gray matter is pruned out, making brain connections more specialized and efficient. The parts of the brain that control physical movement, vision, and the senses mature first, while the regions in the front that control higher thinking don't finish the pruning process until the early 20s.

Gray matter density

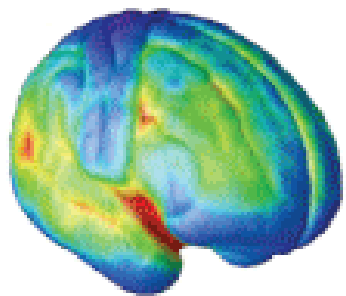
Gray matter becomes less dense as the brain matures.



Age: 5



Adolescence



20

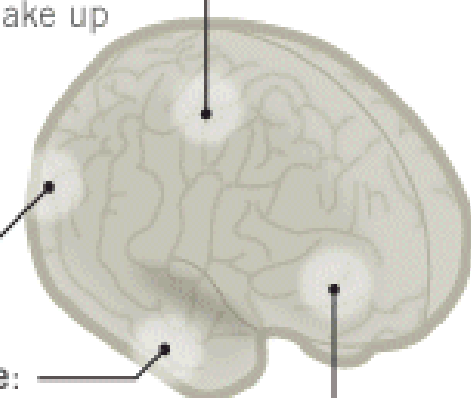
Gray matter: Nerve cell bodies and fibers that make up the bulk of the brain's computing power.

Parietal lobe: Spatial perception

Occipital lobe: Vision

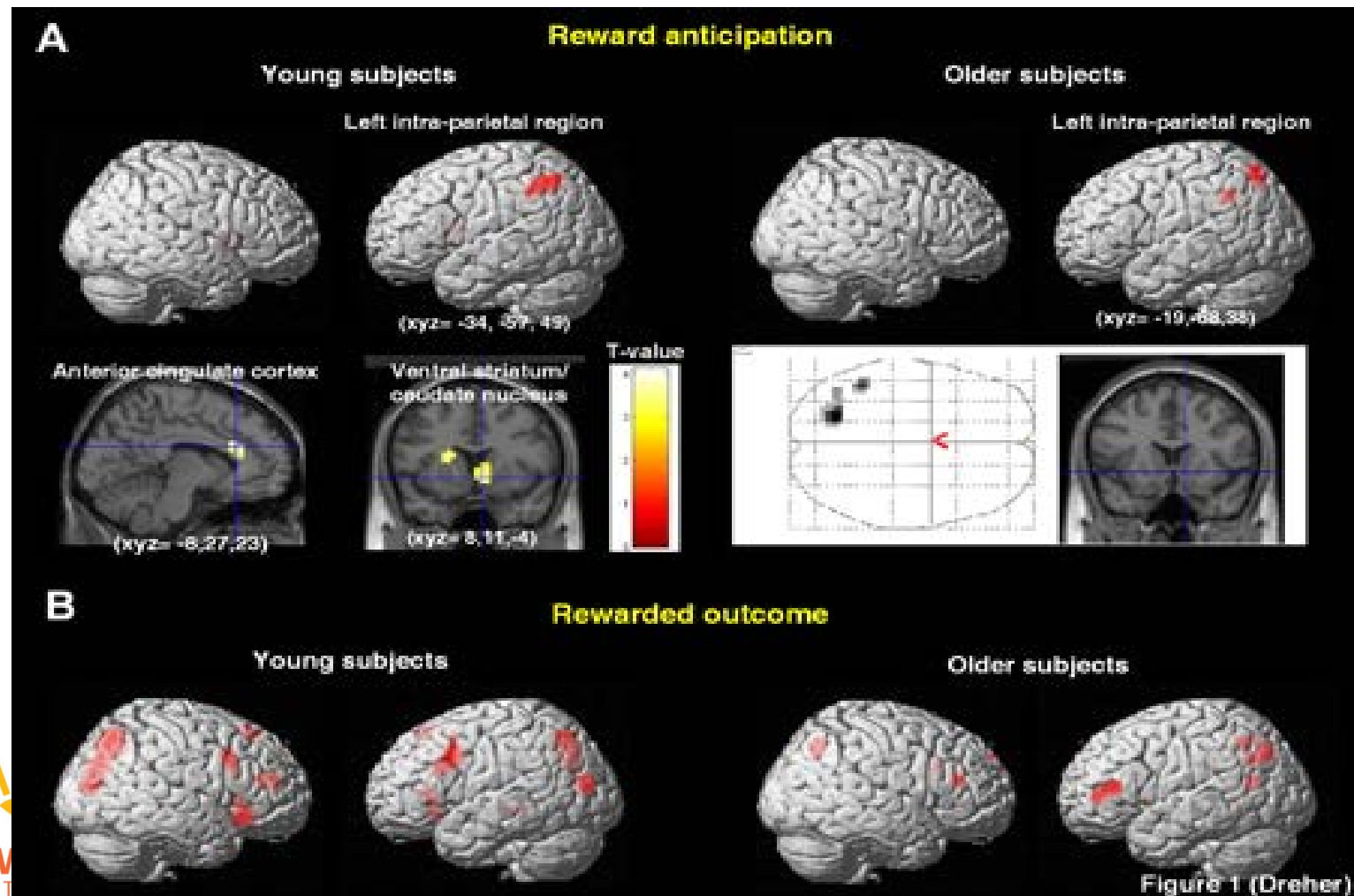
Temporal lobe: Memory, hearing, language

Frontal lobe: Planning, emotional control, problem solving



Source: "Dynamic mapping of human cortical development during childhood through early adulthood," Nitin Gogtay et al., *Proceedings of the National Academy of Sciences*, May 25, 2004; California Institute of Technology

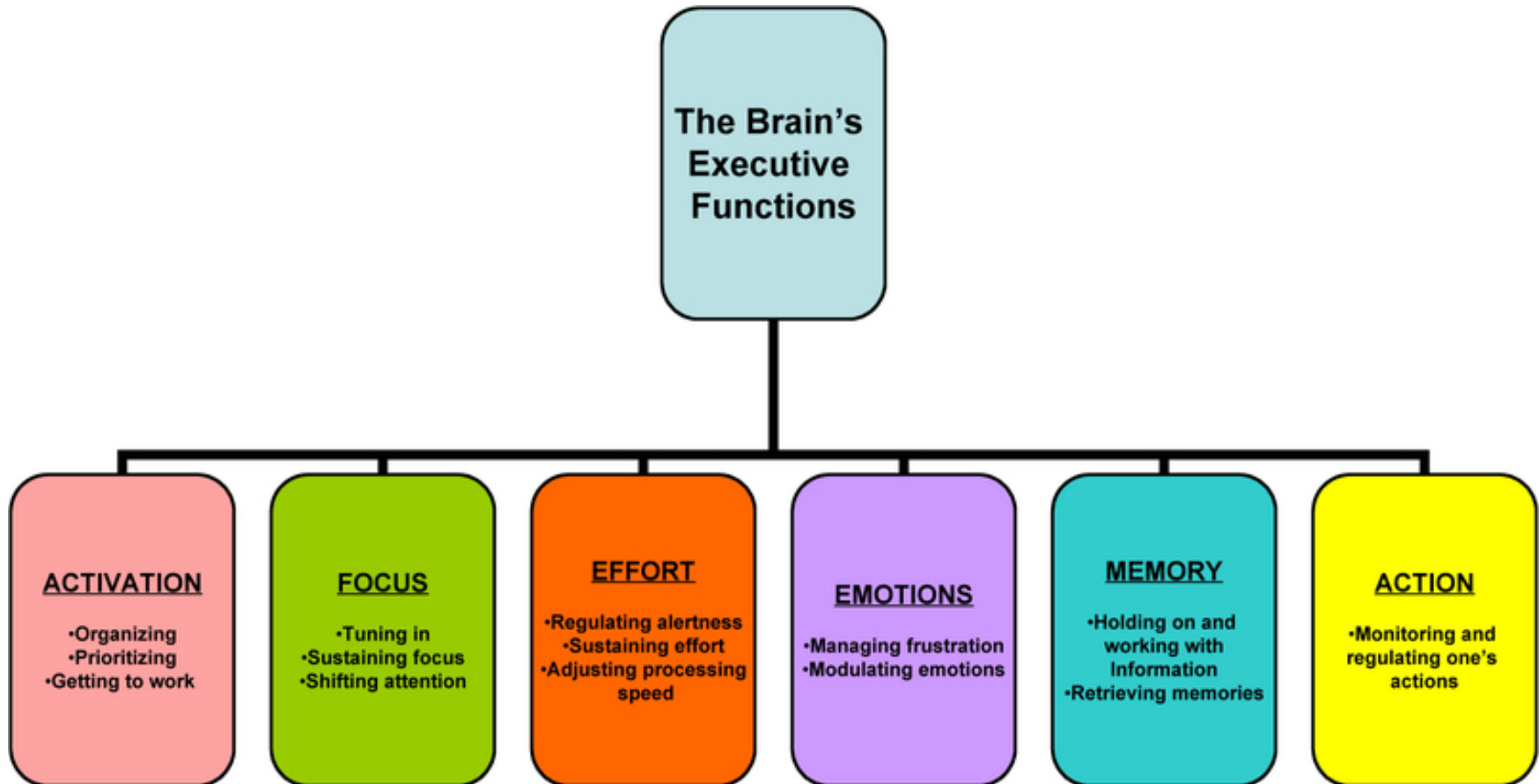
YOUNGER AND OLDER PEOPLE RESPOND DIFFERENTLY TO REWARDS



WHAT IS REWARDING?



Development of Executive Functioning



DEPRESSION AND EXECUTIVE FUNCTIONING

Jeni Fisk

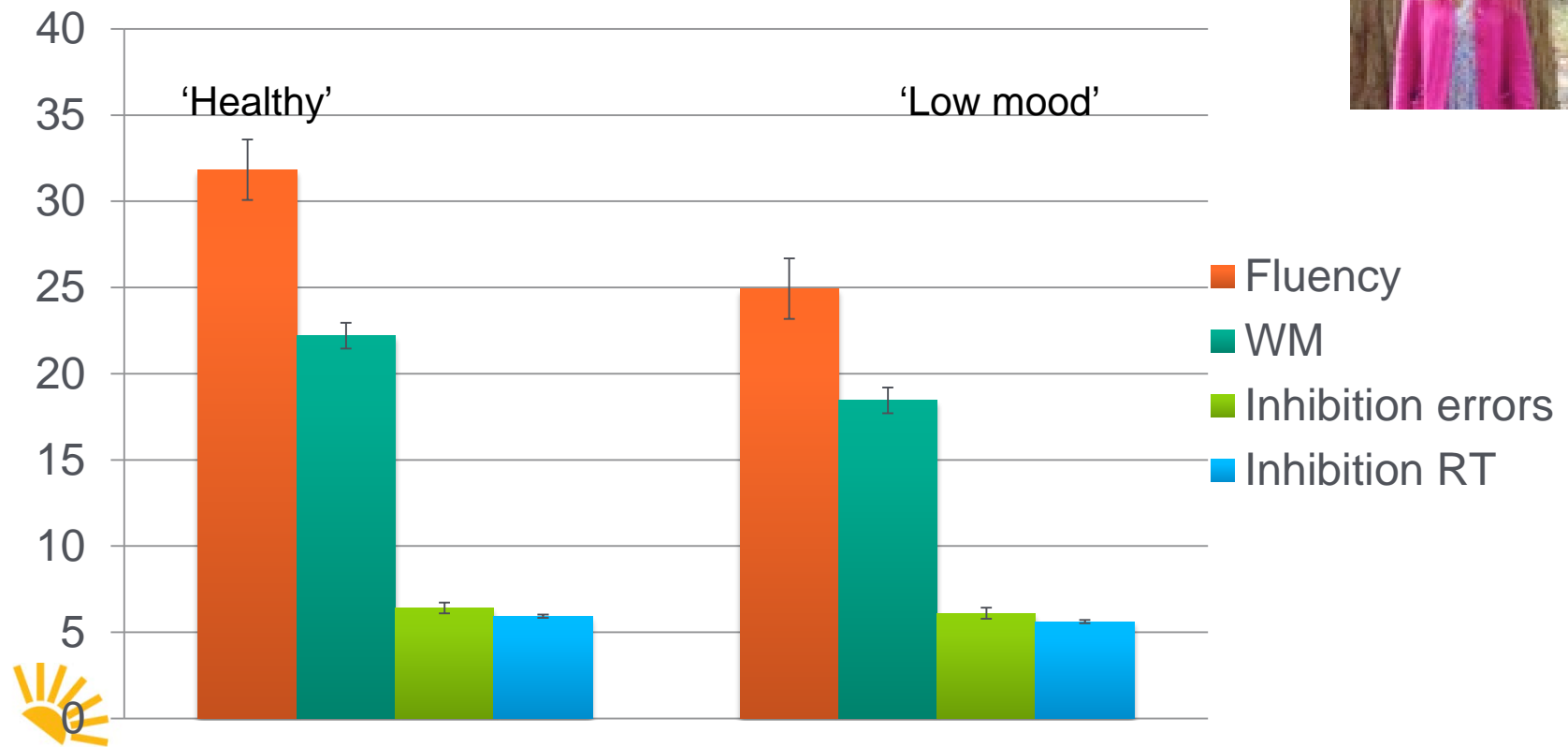
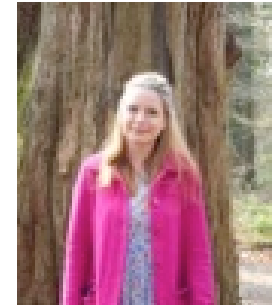
2 groups of young people

- a) 'low mood' (high symptoms of depression)
- b) 'heathy' (very low symptoms)

Mean IQ = 93 (high), 92 (low)



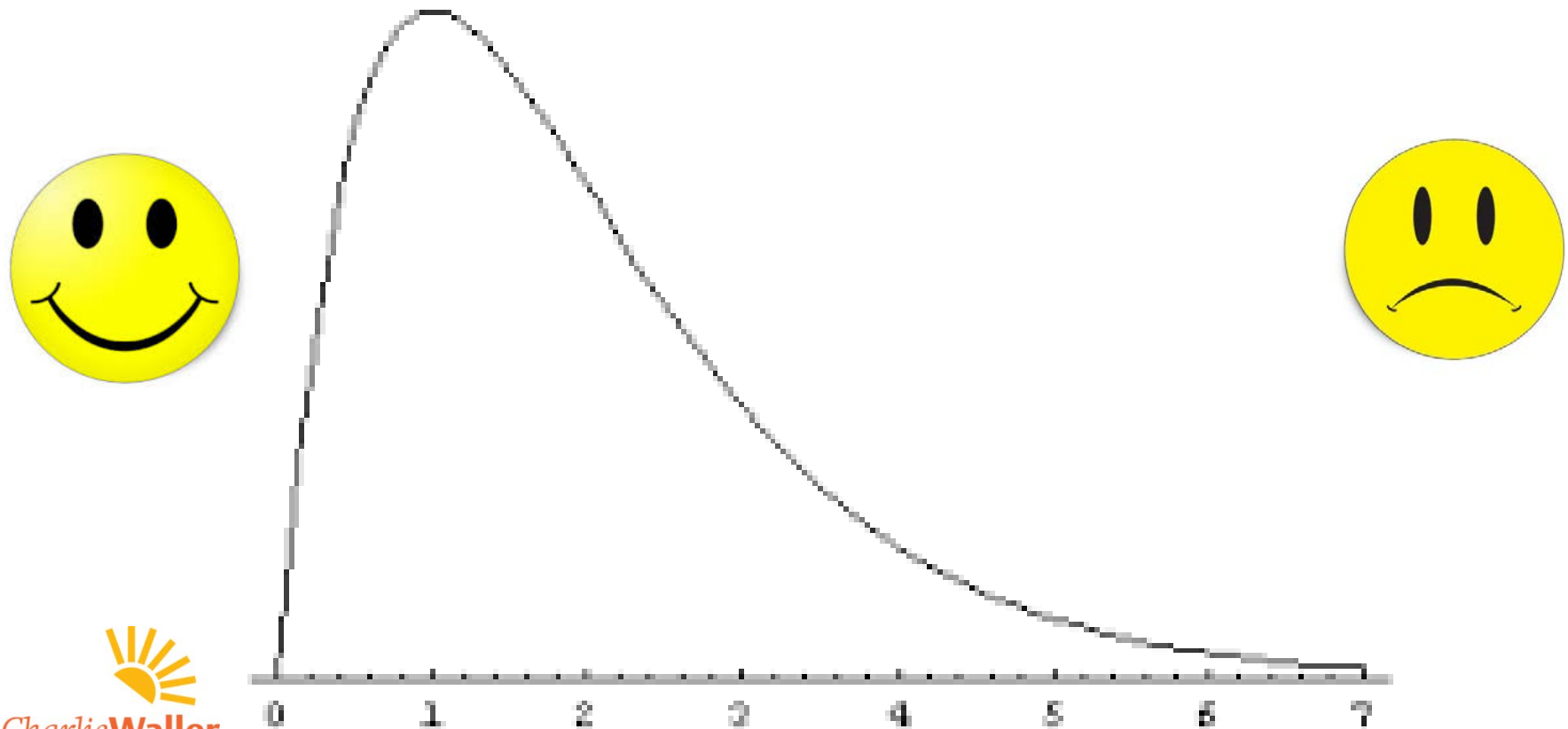
EXECUTIVE FUNCTIONING IN ADOLESCENTS



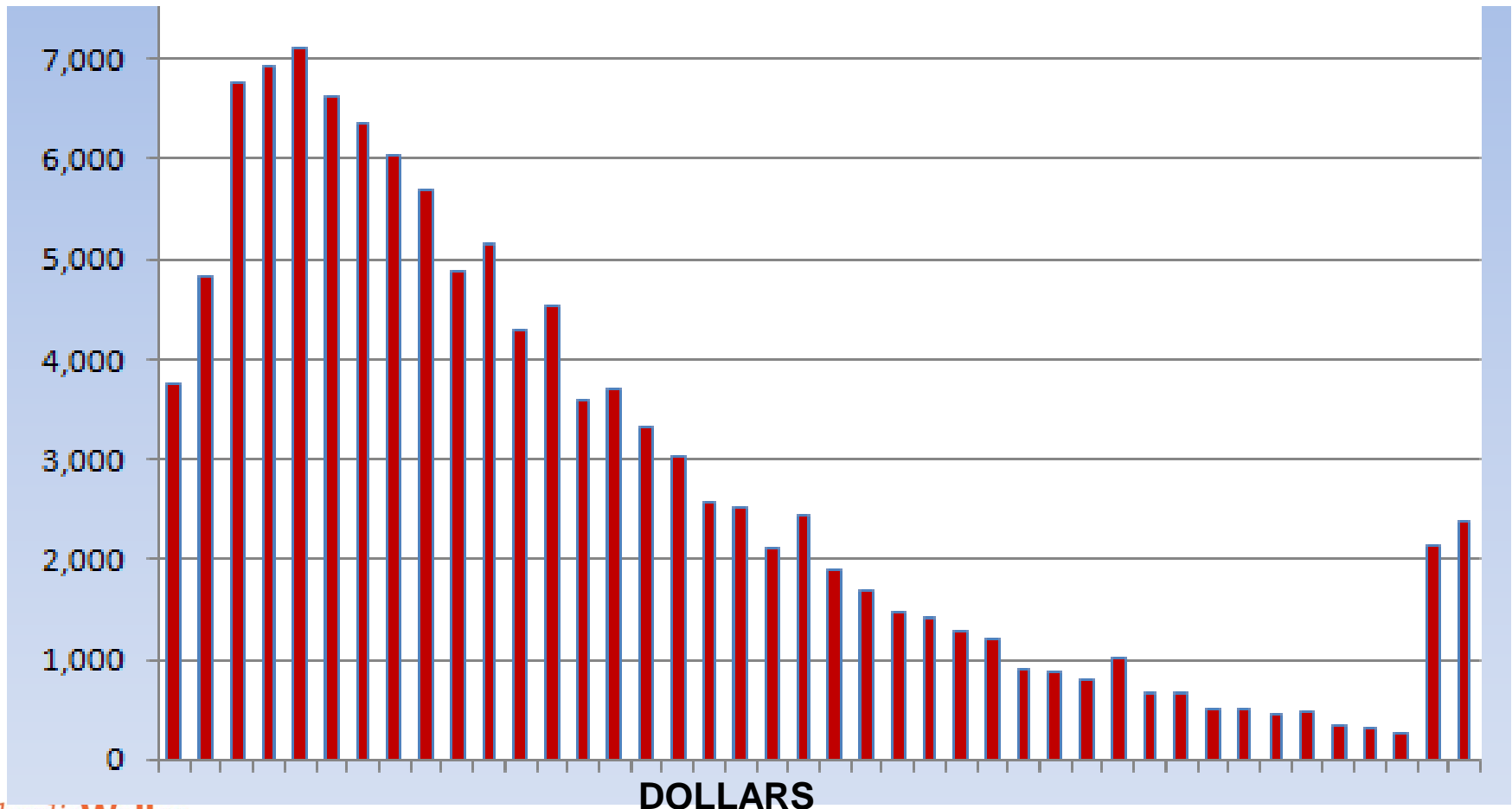
WELL-BEING & MENTAL HEALTH: TWO SIDES OF THE SAME COIN?



SYMPTOMS OF MENTAL (ILL-) HEALTH



US HOUSEHOLD INCOME



HEALTH AND WELL-BEING



WELL BEING

- Joy
- Excitement
- Contentment
- Purpose
- Satisfaction

Aim to increase, develop,
maximise

Who or what can do this better
than schools?

MENTAL (ILL)-HEALTH

- Distress
- Worry
- Anxiety
- Sadness

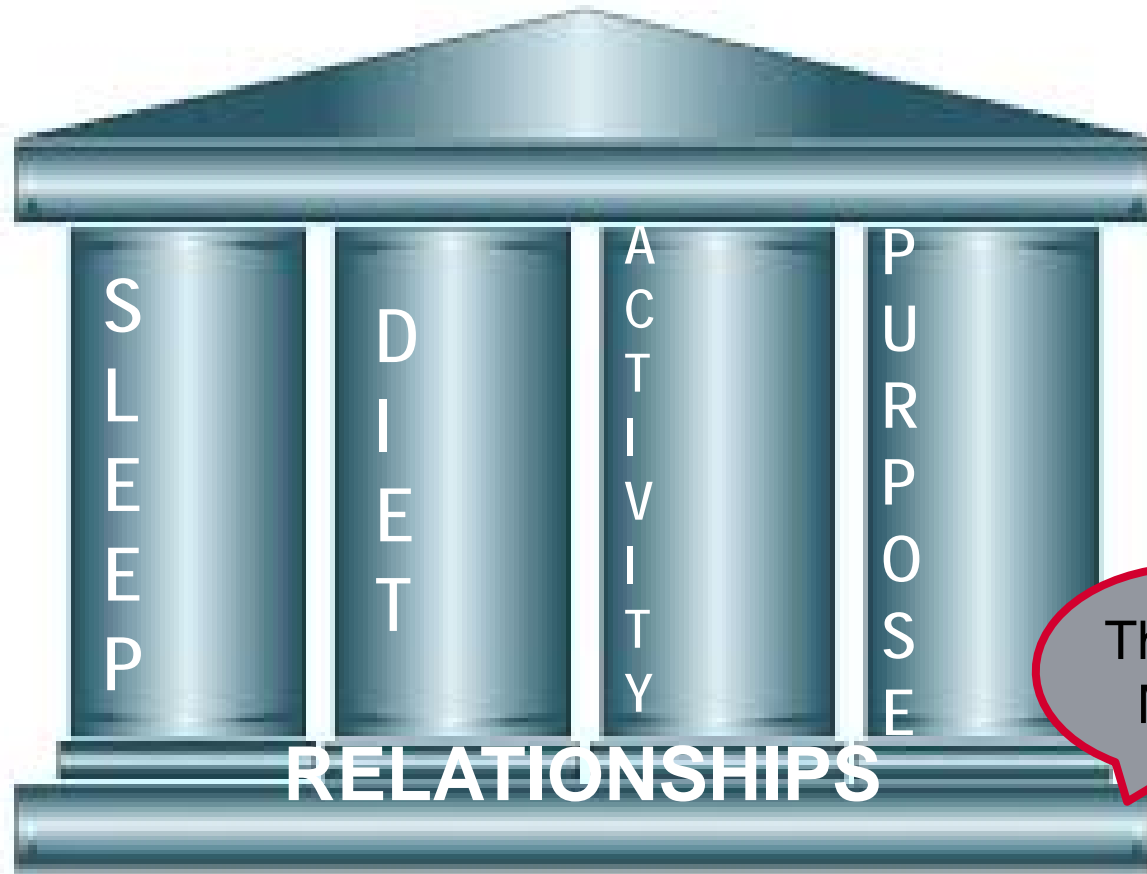
Aim to reduce, remove
'symptoms' – what is the role for
schools?





IMPROVING WELL-BEING IN SCHOOLS

PILLARS OF WELL-BEING



Thanks
Mick

THE NEED FOR SLEEP



FREQUENCY OF SYMPTOMS DEPRESSED TEENAGERS (N= 467)

Symptoms	%
Sleep problems	91.8
Low Mood	83.9
Concentration	75.1
Fatigue	73.3
Worthlessness	67.5
Anhedonia	65.2
Suicidal ideation	60.9
Appetite	47.3

'I AM' TASK

Emily Green

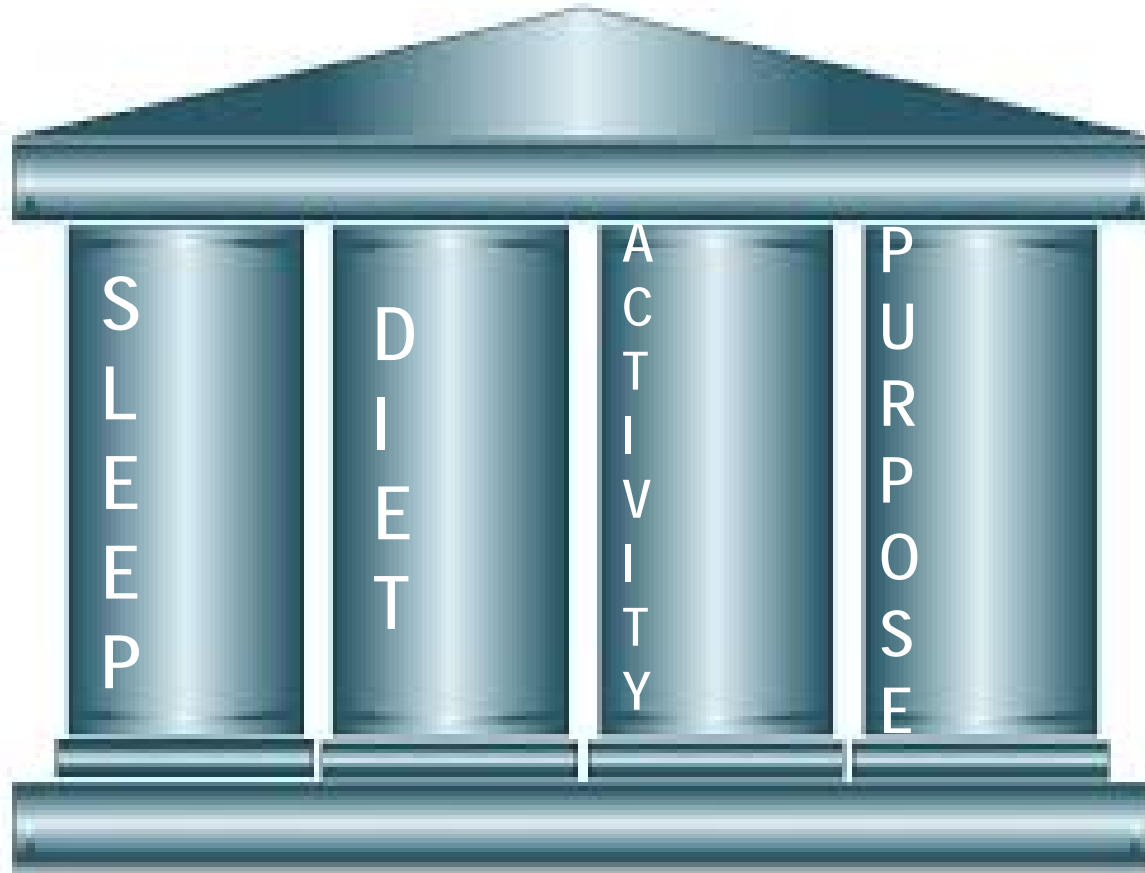
Most common negative adjectives

Low	Freq	%	Moderate	Freq	%	Elevated	Freq	%
								14
anxious	4	9%	tired	11	13%	tired	18	%
annoying	3	7%	weird	5	6%	stressed	8	6%
tired	3	7%	emotional	3	4%	sad	8	6%
unorganised	3	7%	sad	2	2%	worried	6	5%
stressed out	2	5%	restless	2	2%	anxious	4	3%

CAUSAL PATHWAY? CAUSE, CONSEQUENCE OR CIRCLE



PILLARS OF WELL-BEING



FOOD AND MOOD



DIET AND DEPRESSION

Sundus Khalid



Systematic review of diet and depression

Association between 'healthy' 'mixed' diet and well-being

Cross cultural and cross national

Sundus, Williams & Reynolds (2016)

EFFECTS OF BLUEBERRIES ON MOOD

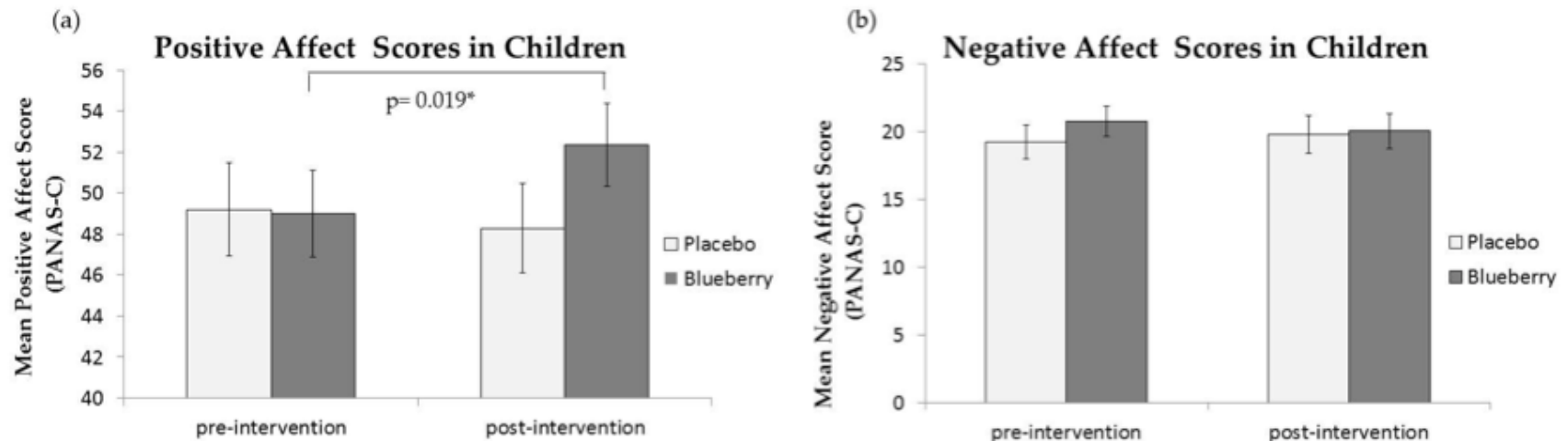
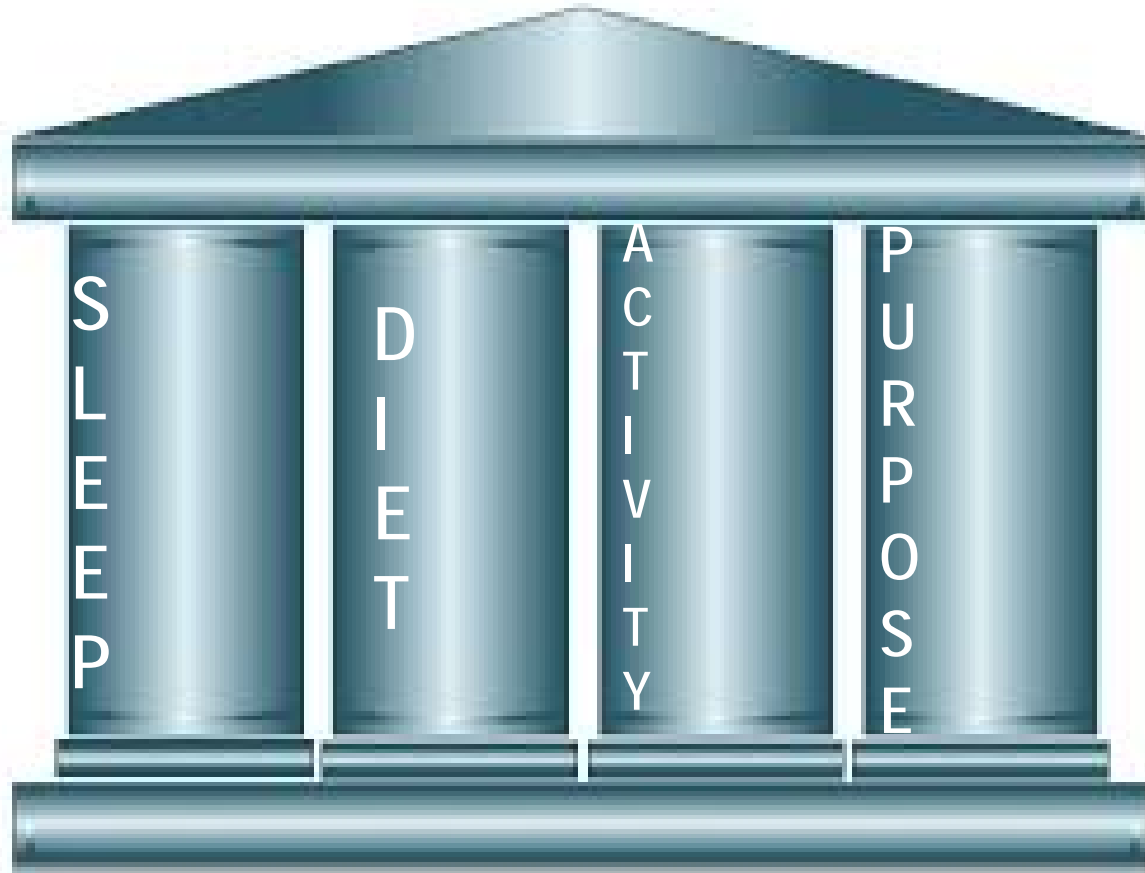


Figure 2. Mean PANAS-C Mood scores in children aged 7-10 years: (a) Mean PA scores pre-and post-consumption of placebo and intervention drinks (b) Mean NA scores pre-and post-consumption of placebo and intervention drinks.

* Significant at <0.05 . Attained from post hoc paired samples t-test.

PILLARS OF WELL-BEING



ACTIVITY AND WELL-BEING

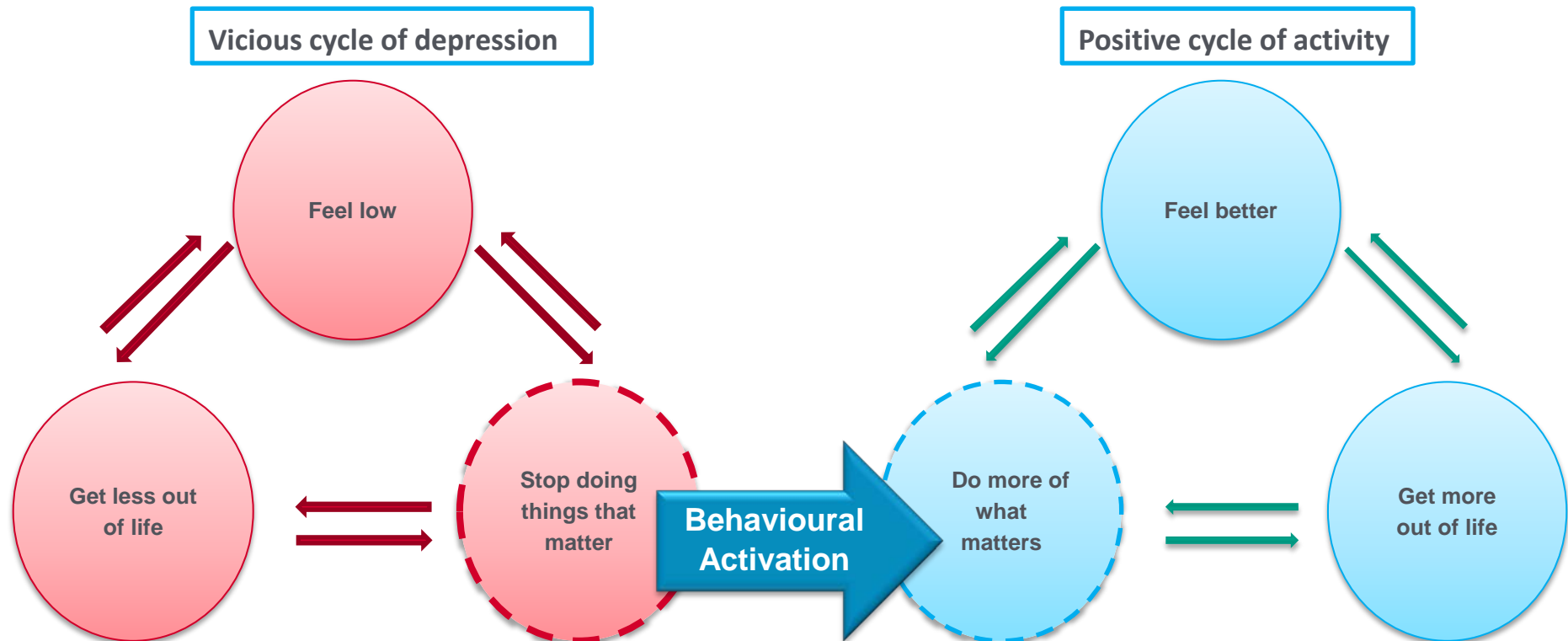
Physical activity associated with better physical and mental well-being **and** lower symptoms (Biddle & Asare)

Physical activity may reduce symptoms of depression

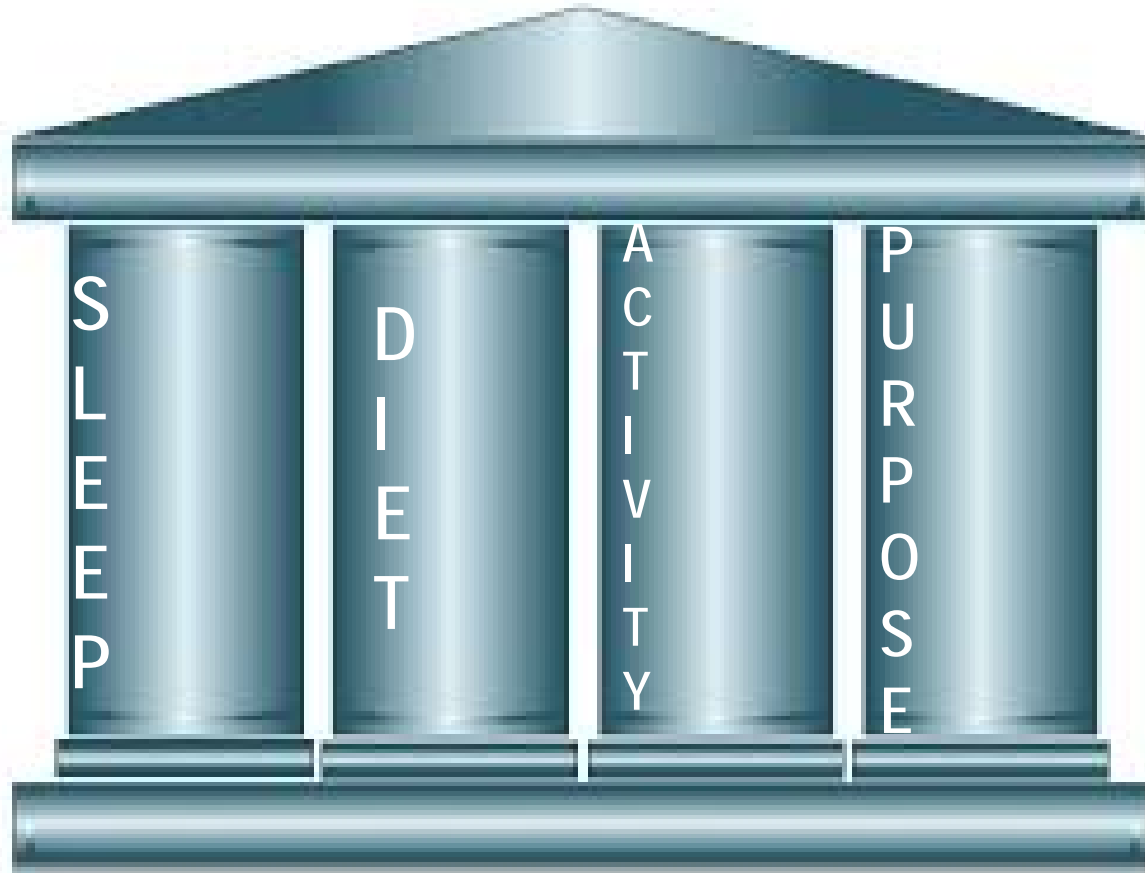
Decreased activity levels (time use) associated with onset of mental health difficulties (Hodgekins & Fowler)



BRIEF BA MAINTENANCE CYCLE

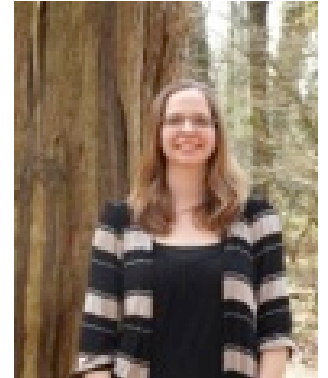


PILLARS OF WELL-BEING



WHAT MATTERS TO YOU?

- Who am I?
- What is the point of it all?
- Where am I going with my life?



Me

**The things that
matter**

**The people
that matter**

Hobbies/fun

*How would you like
to spend your free
time? What is fun for
you?*

Education/work

*What do you want to
achieve? What do you
want to learn about?*

Family

*What kind of
relationships do you
want with your
family?*

Physical health

*How do you want to
look after your body?*

Everyday Stuff

*What do I need to
do?*

Friends

*What kind of friend
do you want to be?
Who with?*

Looking after myself

*What do you do for
you? What relaxes
you? What helps you?*

The bigger picture

*Are you religious? Do
you care about
environmental issues?*

Boyfriend/girlfriend

*What kind of a
relationship do you
want? What
qualities?*



VALUES: NOT JUST DOING MORE, DOING MORE OF WHAT IS IMPORTANT TO YOU



Dan doesn't do much with his time except sleep and play computer games. He stopped playing basketball when he broke his ankle, and can't be bothered to go back to his local club even though his ankle's better now. He hasn't turned up to his Saturday job twice in a row, as it just feels like too much effort.

Ellie does a lot each week- she has school every day, then homework and revision, plus dance classes, babysitting her brother, and piano lessons. Ellie feels like she is always busy, but she's not really connecting with the things she does. She feels pushed to do things that her parents want her to do, not what she wants.



SO - HOW CAN SCHOOLS HELP?

- Leadership – “whole school” approach
- Promote teacher well-being
- Development of ‘healthy habits’- integrated into school activities
 - Curriculum (e.g. PHSE, biology)
 - Non-curricular (clubs, peer support, parents, transitions)
- School library – ‘Books on Prescription’
- Make it easy to ask for help – screening, listening, hearing
 - Q “What’s the worst thing to say to a young person in distress?”
 - A “Nothing, saying nothing is the worst thing”
- Access to mental health expertise in schools – e.g. Brief BA project, CAMHS outreach, counselling

HOW CAN TEACHERS HELP?

- Relationships * (with students, between students, home & school etc)
- Recognition – listening, asking, hearing
- Rewards (praise, encouragement, attention, warmth, new experiences)
- Reinforce healthy habits in the classroom e.g. Biology, PE, Food Tech, English, Maths, Geography
- Role models –i.e. look after self (as well as others)

HELP YOURSELF FIRST

Being the parent of any
teenager is tough
Autonomy vs dependence
– it's a struggle

Time to redress and
develop balance for you
Look after your own needs



BUYING IN SERVICES?

This is a sellers market – so buyers beware!

Be not afraid to ask for evidence, and don't be shy of pressing

What data do they collect?

Symptoms – do these improve

Functioning – in school, socially, at home?

Satisfaction – with the therapist/service?

How do they evaluate their service?

How have they changed their practice/service on the basis of evaluation?

RESOURCES

Online	information training ongoing peer support (e.g. twitter)
Face to face	training for teachers, students and parents (CWMT) PePPCare 'Mental health first aid'
Tangibles	for young people, parents and professionals books, (book clubs) posters, stickers, beer mats coasters, pens, mugs etc

CHARLIE WALLER MEMORIAL TRUST

- RAISING AWARENESS



THE MENTAL ELF

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SEP 7 2017

Mental health apps for young people: an evidence-free zone?

No Responses »

Posted by Natalie Nelissen



Natalie Nelissen from mHabitat publishes her debut elf blog on a recent systematic review of mental health apps for young people, which highlights the current dearth of reliable research to support the efficacy and safety of mobile apps.


[read the full story...]

Share this post: [f](#) [t](#) [in](#) [g+](#) [e](#) [Like 17](#)

Tagged with: apps, child and adolescent, computerised cognitive behavioural therapy, coping, digital health, digital innovation, digital interventions, digital mental health, Journal of Medical Internet Research, placebo, self-monitoring, smartphone, youth mental health

SEP 6

Novel Psychoactive Substances: bridging



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being and me....p... ^

Show

THE MENTAL ELF

New ways to treat child anxiety

Effects of cyber-bullying in adolescents on well-being

(Spoiler – may not be as worrying as we fear!)

Mental health apps for young people

Suicide related internet searches following '13 reasons ways'

Physical activity and depression

Mindfulness in schools

E-LEARNING



Minded

e-learning to support young healthy minds

Free Session 10 18:17 futurelearn.com

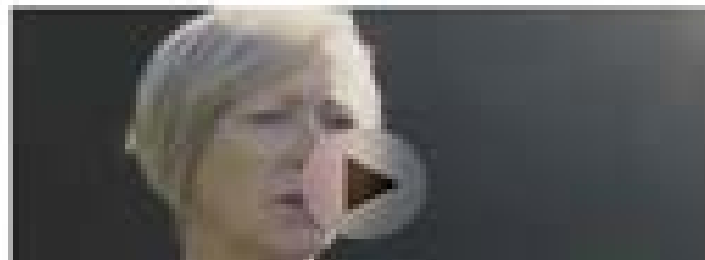
Course Programs About

FREE ONLINE COURSE

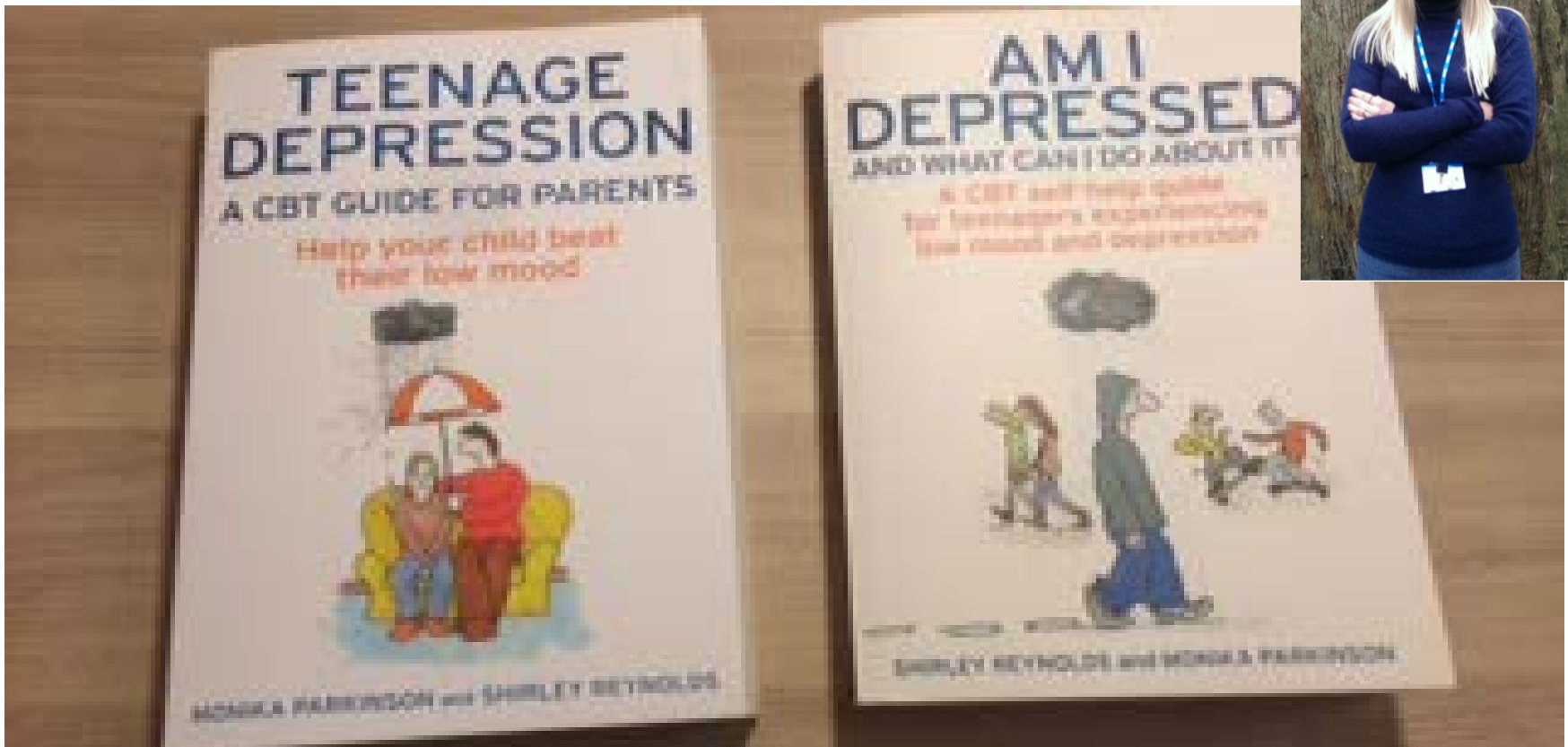
Understanding Anxiety, Depression and CBT

Improve your understanding of depression and anxiety and find out more about an effective and evidence-based treatment: CBT

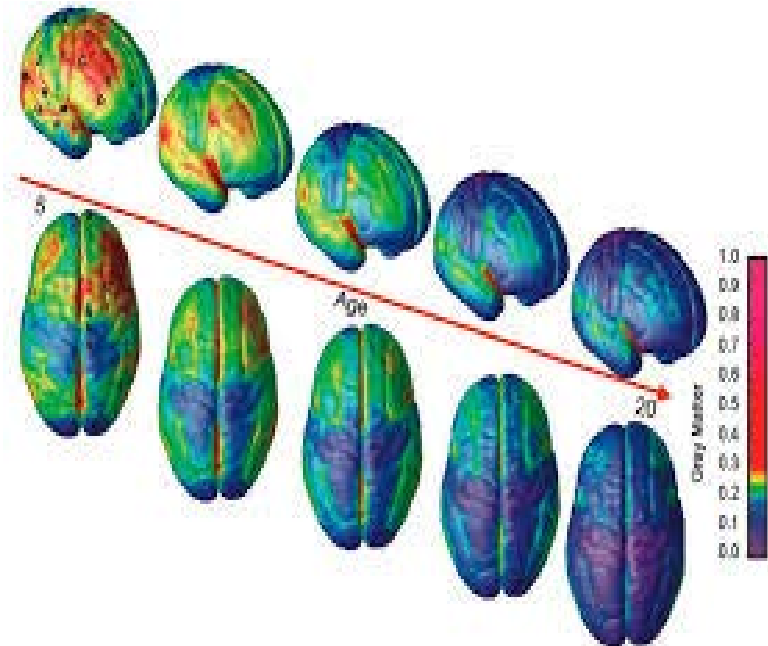
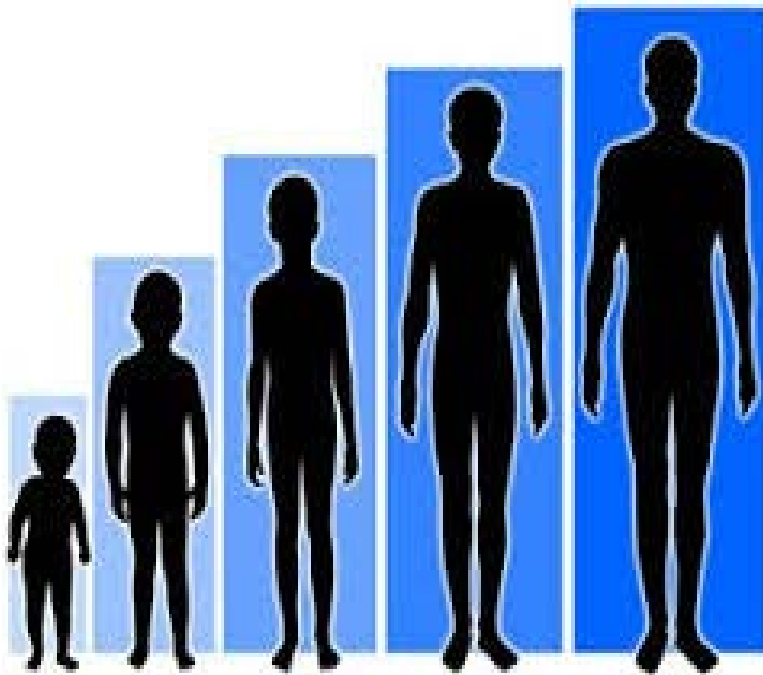
Go to course - started 9 May



SELF HELP FOR DEPRESSED TEENAGERS (AND PARENTS)



DEVELOPMENT AND CHANGE



'THE HAPPIEST TIME OF YOUR LIFE'



THANK YOU

Shirley Reynolds: s.a.reynolds@reading.ac.uk

@DrS_Reynolds
@CharlieWallerIn

