



Policy Hub Scotland

The Mental Health and Wellbeing of Scotland's Boys – Providing support, removing stigma, enhancing emotional literacy

Monday 03 June 2019
Edinburgh

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Policy Hub
Scotland

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SASW

The professional association for
social work and social workers

Improving Mental Health of Young Male Care Leavers

A highly at risk group

- **Care leavers 5 times* more likely to;**

- Have a MH diagnosis (all)

- Be admitted to psychiatric hospital including compulsorily (all)

- Be in prison (males)

- * House of Commons Education Committee, Mental health and well-being of looked-after children - Fourth Report of Session 2015–16

- **Effectiveness of established services**

- Birmingham's Therapeutic Emotional Support Service (TESS) delivered by the Birmingham Children's Trust

Mood and Affect Disturbances – NZ findings

- **Exposure to CSA**
 - rates of disorder 2.4 times higher than those not exposed to CSA
- **Exposure to physical abuse**
 - rates of disorder 1.5 times higher

Study included major depression, anxiety disorder, conduct/antisocial disorder, substance dependency, suicidal ideation, and suicide attempts

Other distress symptoms

- Read et al. (2003) conducted a study of 114 women and 86 men.
- Child abuse was a significant predictor of auditory and tactile hallucinations
- Compared with non-abused patients, CPA survivors were 2.5X, CSA survivors 3X, and those subjected to both CSA and CPA almost 4X, more likely to experience hallucinations

Post-Traumatic-Stress-Related Problems

- **Those who have been subjected to severe physical or sexual abuse during childhood suffer long-term stress related disorders**
- **About a third of abused or neglected children meet criteria for lifetime PTSD**

Sexual Maladjustment

- **History of maltreatment in males**
risk factor for
 - Alienation
 - social incompetence
 - Inappropriate sexual behaviours

Sexual Maladjustment

- **Adult survivors of CSA**
 - less capable of identifying risky situations, or knowing how to respond to unwanted attention
- **More likely to be subjected to further violence in adulthood**
- **Compared with adolescent mothers who not been abused, sexually victimised teenagers:**
 - Began intercourse a year earlier
 - Were more likely to have used drugs and alcohol
 - Were less likely to practice contraception

Criminal and Antisocial Behaviour

- **There is a significant connection between early maltreatment and subsequent arrest**
- **Especially true for males**
- **30% rate of intergenerational abuse**

Suicide Risk Considerations

- young males
- other ethnicities
- migrant status
- broken or no intimate relationships
- recently bereavement or suicide
- undiagnosed depression
 - Irritable presentation in young men
- **does the person over-use alcohol or any kind of drugs**
 - Other emergent psychiatric disorder?

Pilot – 2 yrs

- **Funding - 70% Alcohol and Drug Partnership**
 - Police, Local Authority and NHS
 - 30% Children and Families (Corporate Parenting)
- **Co-location**
 - In local authority TcAc hub
- **Governance**
 - Employees of NHS (band 6, senior nurse level)
 - Clinical Psychol supervision
 - Dual AHP/OT Line Manager & NHS SSW – Local Authority

Model

- **Staff**
 - Nurse replaced by Social Worker/MHO
 - Chartered Psychologist (masters BPS Accredited)
- **Delivery**
 - Assessment & Therapy
 - Consultation & Capacity Building
 - Supervision & Training
- **Stakeholders**
 - Statutory TcAc
 - 3rd Sector TcAc
 - GP's, CAMHS and CMHT's

Assessment

- **Mental State**
 - Behaviour, Insight, Affect, Communication, Cognition & Thoughts
- **Developmental**
 - Concentration, Attention, Learning issues and ASD indicators
 - Reflective ability, consequential thinking, consent to treatment
- **Social Wellbeing**
 - Peer and Family Relationships, Occupational and Learning needs
- **Wider Health**
 - Nutrition, Relaxation, Mindfulness, Sleep Hygiene, Media Use
 - Sex (C-Card & Education) plus Sexuality and Identity (High CSE)

Typical Interventions

- Assessment and Formulation with teams...
- Harm Reduction/Motivational Interviewing
 - Self Harming, Alcohol and Drug misuse
- Case Management – males briefer input <6 months
- Supported access to Primary care
- Supported access to specialist care
- Distress Tolerance Modules 1-4
 - Canadian Centre for Clinical Interventions
- Cognitive Analytic Therapy 12-16 sessions

Annual Averages

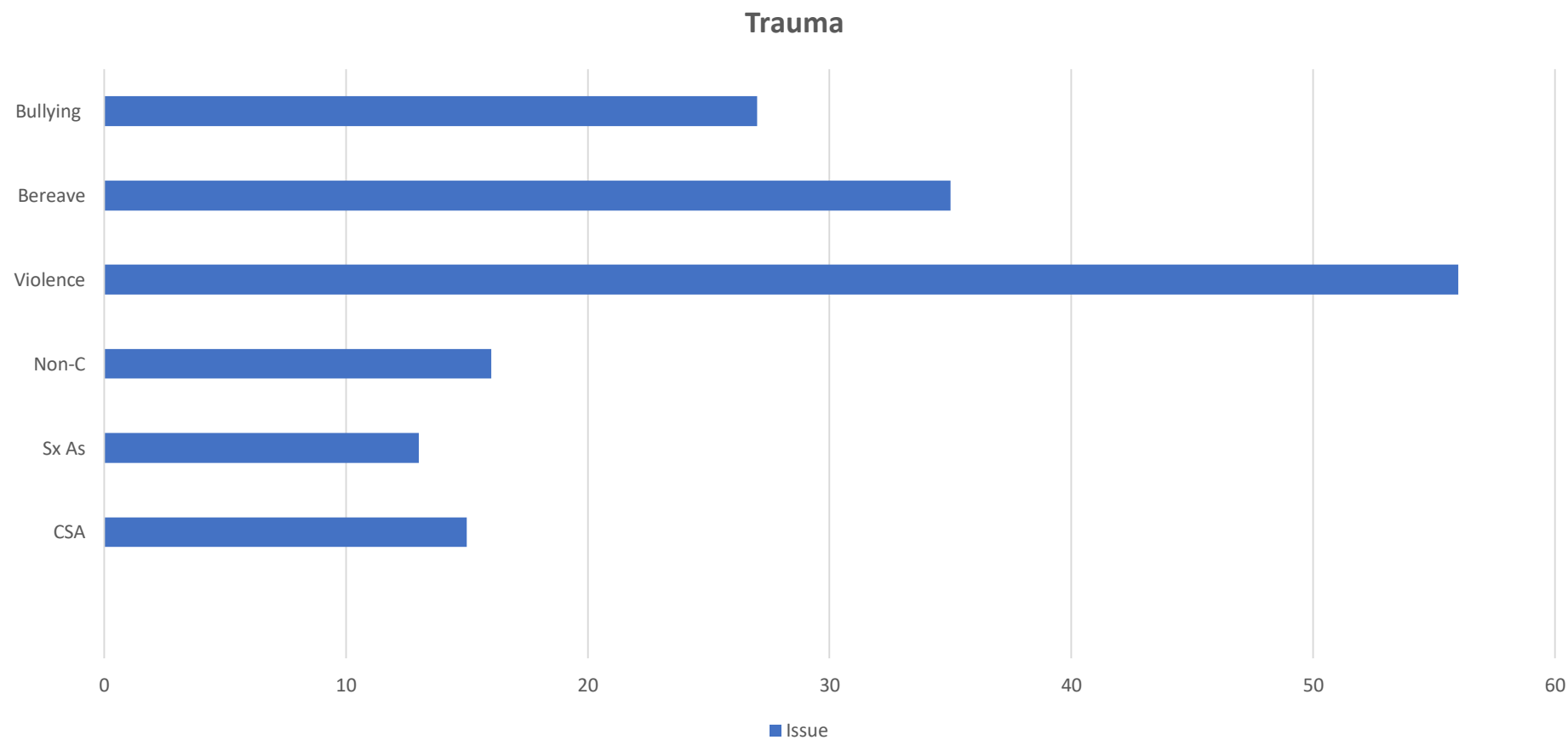
- **90 Referrals – equal gender mix**
- **80% Assessment**
- **20% Consultation**

- **40% Full assessment with further therapy**
- **25% Signposted after initial assessment**
- **20% Informal meetings – unable to engage fully**
- **15% Non engagement after creative outreach**

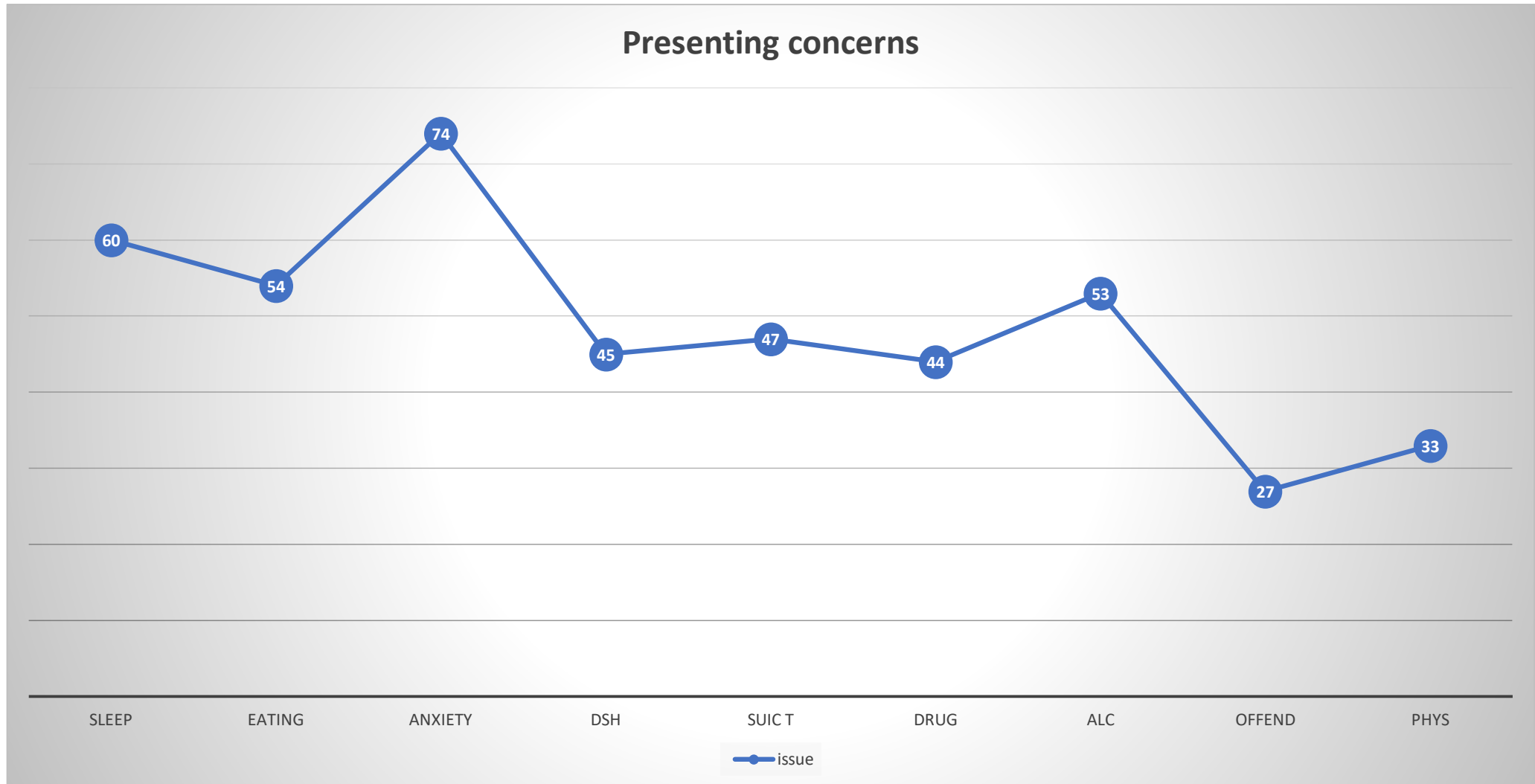
Trauma reporting

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Presenting Concerns



Over 21 Themes- 2nd year

- 9 consultations and 9 referrals
- 70% referrals and consultations being Male.
- Referral reasons included: ADHD, anger, depression, suicidal ideation, anxiety, alcohol, drugs and self-harm.
- At assessment included: intimate relationship difficulties, bereavement, anger, & childhood sexual abuse.
- Drug and alcohol statistics, cheaper NPS (self management).
- Reduced alcohol bingeing.
- It also appears that this group maybe returning after a gap in receiving support, with increased willingness to engage.
- High number wanting to discuss sexuality and risk issues

How it developed

- **Average active small case load of 12 per worker**
 - High degree of flexibility and outreach focused service
- **Difficulty with standardised tools**
 - High degree of crisis in sessions which reduced over time
 - Core 34 was started but overly complex/time consuming
 - Prepared proposal on I-ROC but no budget/management support
- **Focused sessions naturally concluded after 9-12 months**
 - Young people still had allocated TcAc worker or duty access
 - Only 2 exceptions where YP not in a place to return to support from TcAc caseworker

“It’s great that I can come along to Throughcare and be in a comfortable place with Council staff I’ve known for years. I can sort out income and other practical problems as well as getting NHS mental health treatment including support to arrange to see a psychiatrist and access medication.....this helped me successfully repeat my National Certificate in Health and Social Care“

“In 12 years the establishment of a mental health team within TCAC has had the most positive impact on direct work with young people . The support, advice and specific training that they offer staff members is invaluable for staff confidence”

Senior Social Worker

“1-1 and group sessions for staff and consultations has greatly enhanced practice as it has allowed staff to have a secure space to discuss their own feelings and thoughts in regards to the more complex cases allowed staff to develop more robust plans...”

Barnardos 16+



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