

CAMS HILL SCHOOL Inspire • Nurture • Achieve • Excel

Guide to Improve Mental Wellbeing



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What Is the Reason for This Guide?

According to the Centre for Mental Health, one in five young people aged 16-24 experience a common mental illness such as anxiety or depression at any one time. However, 70% of these have not had the appropriate early age interventions. If we can spot the signs and symptoms earlier on in our young people, we can both understand their behaviour, and support them through their difficulties.

This booklet should hopefully debunk the myths that have become so prevalent in society about mental health disorders. This will allow our young people to feel more at ease when talking about their thoughts and feelings, as there will be no judgement or stigma attached.

You can either read all of this booklet, or simply skip to the pages you feel would be beneficial to you.



What is Mental Health?

Mental health can be described as:

"The strength and capacity of our minds to grow and develop, to be able to overcome difficulties and challenges and to make the most of our abilities and opportunities."

Without a healthy mind, our young people will struggle emotionally, socially and academically. Our pupils are at a crucial point in their lives in which they need to be mentally healthy to seize all opportunities for their future and grow into independent and confident young adults.

A lack of knowledge surrounding mental health has led to a huge amount of stigma and misinformation being communicated in society. If we further our understanding of the subject, our young people will feel comfortable to speak openly about their thoughts and emotions. From here, we can give them the support that they need.

This guidance pack will give more information on noticing those struggling with their mental health, information on different symptoms and disorders, how you can help, and to whom you can signpost them.

Cams Hill School has multiple internal and external agencies working within the school and we are committed to supporting all of our pupils in every way we can. If we can reinforce the coping techniques being taught at school, at home, our pupils will have the best chance for happiness and success.



let's end mental health discrimination

Anxiety

What is Anxiety?

Anxiety is a normal and healthy human reaction when faced with danger or in a worrying situation. A moderate amount of anxiety is extremely normal and can actually improve performance, leading to greater achievements.

However, when it starts to effect and interfere with an individual's everyday life, this becomes a problem. When anxieties are present without a dangerous or worrying situation, or when they seem to appear with no apparent reason or to an extreme which is not proportionate to the situation, anxiety can be very upsetting.

Anxiety comes in many different forms and varies in its severity, from worrying more than usual to intense panic attacks. The following information explains what anxiety is, how it is caused, and the symptoms of anxiety and panic attacks.

There are three parts to anxiety. Anxiety can become apparent at any one of these stages and each stage has a knock-one effect to the next:

- 1) Physical
- 2) Thoughts
- 3) Behaviour

1) PHYSICAL

Some symptoms of anxiety and panic attacks are:

- Irregular/heavy breathing
- Stomach churning or pain
- Sweating
- Shaking or trembling
- Twitching or muscle spasms
- Rapid heartbeat
- Needing the toilet

- Crying
- Pins and needles
- Chills or hot flushes

2) THOUGHTS

Although to others the thoughts someone has may seem 'silly', the anxieties for that individual are extremely real and worrying. These thoughts can be called 'Unhelpful Thinking Habits:'

Types of unhelpful thinking habits (more examples on page 26):

- Over Generalisation
 - A sweeping statement is made, eg: I will never get a job because I wasn't successful at one interview or everyone hates me because one person didn't say hello to me
- Catastrophizing
 - o Imagining the worst possible outcome of a situation
- Ignoring the positives
- Mind-Reading
 - o Assuming we know what others are thinking

These thoughts and worries escalate and heighten a situation leading to a pattern of negative thoughts in a vicious cycle. Being aware of the worries and thoughts in the present moment allows you to target and change them. This is the basis of Cognitive Behavioural Therapy.

3) BEHAVIOUR

Three of the main responses to a situation that is feared or worried about are 'fight', 'flight' or 'freeze'.

In our ancestors, the anxiety response played an extremely important role in their survival. When faced with a danger, our body learned to respond automatically to allow us to either fight, take flight or freeze in order to survive.

Although our need for survival is not the same as that of our ancestors, our bodies still react the same when faced with either a real or imagined threat.

For example, we need to go to the toilet more because we are getting rid of all excess waste in order to make the body lighter, adrenaline rushes through our body causing muscles to become tense and ready to react faster and 'flee' etc.

Panic attacks are simply an exaggeration of the body's natural mechanisms to survive.

Symptoms of Anxiety at home may include:

- Tearful in the mornings and refusal or not wanting to attend school
- Frequent complaints of headaches and sickness
- Need for constant reassurance from people around them
- Spending a lot of time worrying about their behaviour or appearance
- Restlessness, feeling on edge or a 'buzzing' feeling in their body
- Difficulty concentrating
- Difficulty sleeping
- Difficulty making simple decisions

Hopefully, you will now understand more about anxiety and its causes.

Anxiety is a very real and upsetting feeling, especially when an individual does not understand why they feel the way they do.



Strategies to Reduce Anxiety and Calm Panic Attacks

In this section, there will be some strategies given for reducing anxiety and calming panic attacks. Anxiety and panic attacks are extremely different for everyone, and the ways in which individuals calm down are also different. Ask the individual what helps them and, if they don't know, you can trial and error many different techniques until you find one that is useful!

THE MOST IMPORTANT THING IS TO NOT PANIC! If you panic whilst someone else is having a panic attack, it will only escalate the situation.

NOTHING BAD WILL HAPPEN! As previously stated, these reactions are simply just an exaggeration of normal bodily mechanisms and they will calm down. A panic attack must just be accepted, not fought; it will pass.

TIP FROM A PARAMEDIC: The worst thing that will ever happen from a panic attack is that the individual passes out from hyperventilating. This is actually the best thing to happen as their breathing will return to normal!

1) STOPP Technique

The STOPP technique is widely used and is useful when an individual starts becoming very agitated and their worries begin to spiral.

STOPP stands for:

- STOP!
- Take a Breath

- Observe
 - What am I thinking?
 - What am I reacting to?
 - o What am I feeling in my body?
- Pull Back
 - Put in some perspective. See the bigger picture. Is what I am worry about a FACT or OPINION? How would someone else see this?
- Practise What Works
 - What's the best thing for me and for others to do in this situation?

By following this technique in this order, an individual becomes aware of their thoughts and bodily sensations, tries to understand what is causing them, works through them, and then brings themselves back to a normal and calm state.

Someone else can run through this technique with the individual if they are panicking, or you can say to them "remember the STOPP technique?" and they can work it through themselves.

2) Fact or Opinion?

This is included within the STOPP technique.

Many worries we have are simply just opinions, for example, "everyone is looking at me because I'm ugly." You can gently challenge this worry by asking whether this is fact or opinion. There is usually no factual basis that people are actually looking at that individual, and there is no evidence they can provide therefore it is simply an opinion that their anxiety is driving!

3) Open, Honest and Non-Judgemental Conversations

Although this may seem like common sense, individuals who suffer with anxiety will likely be anxious about talking about their worries especially if we are using common phrases such as "well you don't need to worry about that, that's silly", "come on, don't be stupid; that isn't going to happen" etc. By minimising their

anxieties, they may become withdrawn and their worries may become more physical e.g. in the form of panic attacks.

By allowing for open, honest, understanding and non-judgemental conversations, anxieties can be discussed and the STOPP and fact/opinion techniques can be used effectively.

4) Breathing Techniques

If you believe someone is having a panic attack, move them to a quiet space where they can sit down and relax.

This breathing method is called the box method:

Breathe with them in unison, breathe in for four seconds, hold for four seconds, breathe out for four seconds and hold for four seconds before repeating the process, ideally four times.

This should start to slow their breathing down. Encourage them to keep doing this. Tell them to focus only on their breathing and nothing else. They need to clear their mind of all thoughts.

Assure them that you will stay with them and that this will be over soon.

NOTHING BAD WILL HAPPEN!

5) Talk Through a Panic Attack

Some individuals find it extremely hard to calm down when simply focused on their breathing as they will not be able to stop worrying.

By asking the individual questions about themselves, and what they enjoy doing, they will have to calm their breathing to be able to talk. These conversations need to be calm and focused on the positives, eg: favourite holidays, weekend plans, pets, etc.

6) Mindfulness

This is used in order to make an individual more aware of their thoughts and bodily reactions, and how to change them in the present moment. This is usually not practised during a panic attack, but learnt in order to help when a panic attack does occur.

Two useful apps are:

- Headspace
 - o Free for certain episodes
- Calm
 - o Free for certain episodes

Mrs McBride also runs a 'Mindful Monday' session within the school. This includes meditation, mindfulness and yoga. (Contact office@camshill.com)

7) Progressive Muscle Relaxation

At the end of this pack, there is a progressive muscle relaxation script. This exercise makes the individual tense and then relax each muscle one by one. Over time, the individual will get the hang of letting tension go and being able to relax their body fully. This method will need practice and repetition; it will not be perfected straight away.

8) Further help

GP

- GP's can provide referrals to CAMHS (Child and Adolescent Mental Health Services) who can offer more specialist assessments and support
- They can provide ongoing appointments for counselling and provide signposts to different external charities and agencies
- They may offer medication but YOU CAN SAY NO!

- You can ask to try everything else before medication is even considered
- Do not be scared about going to the GP in case medication may be prescribed
 - In some instances, medication may be needed to bring an individual to a level where therapy will be most effective, but you can discuss this with your GP

CBT

- Cognitive Behavioural Therapy is one of the most common and best studied forms of psychotherapy. You can speak to your GP, find external agencies or private therapists who can provide CBT.

Self Help Strategies

- Engage in regular physical activity
- Engage in leisure time and fun activities
- Get a good night's sleep
- Talk about your emotions if and when you feel comfortable
- Meditate daily
- A list of online resources and apps are available at the end of this guidebook

Depression

What is depression?

The word depression is used is many different ways. However, there must be a clear distinction from those who feel sad and upset, which is completely normal, and those who are suffering from clinical depression which must be diagnosed by a trained professional.

Clinical depression is classified in the DSM-5 (used for diagnosing mental disorders) as:

The individual must be experiencing five or more symptoms during the same twoweek period. At least one of the symptoms should be either (1) depressed mood or (2) loss of interest or pleasure.

Symptoms include:

- 1) Depressed mood most of the day, nearly every day
- 2) Markedly diminished interest or pleasure in all, or almost all, activities most of the day, nearly every day
- 3) Significant weight loss when not dieting or weight gain, or decrease or increase in appetite nearly every day
- A slowing down of thought and a reduction of physical movement (observable by others, not merely subjective feelings of restlessness or being slowed down)
- 5) Fatigue or loss of energy nearly every day
- 6) Feelings of worthlessness or excessive or inappropriate guilt nearly every day
- 7) Diminished ability to think or concentrate, or indecisiveness, nearly every day
- 8) Recurrent thoughts of death, recurrent suicidal ideation without a specific plan, or a suicide attempt or a specific plan for committing suicide

Some further signs of depression may be:

- Finding it hard to concentrate
- Irritability and moodiness beyond the normal range
- Tearfulness
- Violent outbursts
- Becoming withdrawn
- Self-harm, drinking or taking drugs to excess
- Sleeping very little or too much

Many of the techniques set out in this guidebook can be used to help with 'normal' low moods, as well as helping those who have been diagnosed with clinical depression.



Strategies to Improve Low Mood and Depression

- 1) Open, Honest and Non-Judgemental Conversations
 - Try to ask 'open questions' which allow them to say how they are feeling
 - Allow for silences, it will give them time to think about what they are wanting to say
 - Try to keep any worries or anxieties you may feel to yourself
 - Be calm and supportive and allow plenty of time for them to talk
 - Reassure them you are there for them no matter what
 - Understand their anger and irritability is not their fault and try to help them find coping mechanisms

2) Things NOT to say!



3) Go to the GP

GP's can provide referrals to CAMHS (Child and Adolescent Mental Health Services) who can offer more specialist assessments and support.

They can provide ongoing appointments for counselling and provide signposts to different external charities and agencies

They may offer medication but YOU CAN SAY NO!

- You can ask to try everything else before medication is even considered
- Do not be scared about going to the GP in case medication may be prescribed
 - In some instances, medication may be needed to bring an individual to a level where therapy will be most effective, but toy can discuss this with the GP



4) Three Good Things Diary

Writing down three good things that happened to you every day can increase your positive mental wellbeing. They can be anything you feel good about or grateful for. Talking about these three good things is a good way to open up communication and focus on the positive aspects of the day. Rather than asking "How was your day?" and expecting a negative reply, ask "tell me three good things about today." There is a template attached on page 29.

5) Do Something Fun!

Individuals with depression find it very difficult to motivate themselves into doing something that makes them happy. Ask them what they think might make them feel better and do it with them. If they aren't sure, find something they used to like and try make it fun for them again. If they don't want to do this, do something completely different!

Here are some ideas:

- Baking
- Going for a walk
- Visiting the beach
- Visiting family
- Watching a sunset
- Going out for food
- Being creative e.g. making a collage, drawing, painting
- Gardening
- Playing with an animal e.g. dog

CBT

- Cognitive Behavioural Therapy is one of the most common and best studied forms of psychotherapy. You can speak to your GP, find external agencies or private therapists who can provide CBT.

6) Self Help Strategies

There are some self-help strategies laid out in this work booklet, but there are also thousands of resources on the internet that you can help yourself to.

Some examples are:

- Engage in regular physical activity
- Engage in leisure time and fun activities
- Get a good night's sleep
- Talk about your emotions if and when you feel comfortable
- Meditate daily
- A list of charities, external agencies and online resources are available at the end of this guidebook

Self-Harm

Self-harm isn't attention seeking behaviour; it can be a way for people to cope with overwhelming or distressing thoughts and feelings.

Some of the triggers that young people report as causes of self-harm include:

- Difficulties at home
- Arguments or problems with friends
- School pressures
- Bullying
- Depression
- Anxiety
- Low self-esteem
- Transitions and changes
- Alcohol and drug use

Self-harm is any behaviour that causes harm or injury to oneself as a way to deal with difficult emotions or thoughts. It frequently takes the form of cutting, burning or non-lethal overdoses but can present itself in many different forms.

The Mental Health foundation explains the cycle of self-harm:



It usually starts as a way to relieve the pressure of an emotional overload. However, soon after, feelings of guilt and shame may follow. Due to this temporary relief, it can become habit for individuals to deal with their emotional overloads in this way.

There are coping strategies to deal with these thoughts and emotional overloads, which can help break the cycle of self-harm in the long term.

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Distraction Techniques and Strategies to Help Someone Who Is Self-Harming

1) Open, Honest and Non-Judgemental Conversations

- Try to ask 'open questions' which allow them to say how they are feeling
- Allow for silences, it will give them time to think about what they are wanting to say do not push conversation too hard, they may not feel ready to talk about their feelings just yet
- Try to keep any worries or anxieties you may feel to yourself
- Be calm and supportive and allow plenty of time
- Reassure them you are there for them no matter what, use 'encouragers'

Encouragers are statements such as:

- I love you, nothing can ever change that
- You can talk to me, I'm here for you
- If you need to talk to someone else, that's okay too
- If you talk to me about what is worrying you, I can do my best to help
- Even if I don't understand, know that I want to
- We're going to get through this together

2) Remove/Hide Objects With Young Person's Permission

It may be that the young person would feel safer if you were to hide and remove any objects they feel they may hurt themselves with.

Do not do this without talking to the individual as although you want to help, this may be seen as patronising and misunderstood by the individual.

3) Visit the GP

It may be that the young person needs a risk assessment from a qualified professional. They may be referred to CAMHS or signposted to another service which can help.

4) Distraction Techniques

If the young person is happy to talk about their self-harm, try and find if there are any triggers that cause this, or what they think or feel when they have the urge to selfharm. At either the trigger point, or when the feelings start to rise, distraction techniques can be used.

The "Truth about Self-Harm" document produced by the Mental Health Foundation is available free online. Within this book, it includes these distraction techniques:

- Write down thoughts and feelings that are
- distressing you; crumple the page up, rip it apart and throw it out as a way to let go of that thought.
- Get some play-dough: stretch it or squeeze it to relieve tension.
- Hit a pillow or cushion to vent your anger and frustration.
- Have a good scream into a pillow or cushion.
- Take a minute and breathe or meditate.
- Go for a walk to take yourself away from triggers. Being in a public place gives you the time and space to reduce the urge to hurt yourself.
- Make lots of noise, either with a musical instrument or just banging on pots and pans.
- Scribble on a large piece of paper with a red crayon or pen.
- Call a friend or family member and talk to them. This doesn't have to be about self-harm.
- Do something creative: make a collage of colours to represent your mood or to remind you of your favourite things.



- Listen to music you like or watch a film you enjoy.

5) Do Something Fun!

There is more to the young person than their self-harm. Get them to focus on the positive parts of their life and go out and make new positive memories for them to both distract themselves, and to remember in times of crisis.

Here are some ideas:

- Baking
- Going for a walk
- Visiting the beach
- Visiting family
- Watching a sunset
- Going out for food
- Being creative e.g. making a collage, drawing, painting
- Gardening
- Playing with an animal e.g. dog

6) Recovery is possible – do not forget this.

Common Mental Health Myths

The final part of this guide book will debunk some of the common mental health myths in society.

All of the information from this guidebook put together should help you when understanding and interacting with those suffering from a mental health disorder, relieving them of the fears and isolation they face due to wrongful stigmatisation and misinformation.

These myths are taken from the Time to Change and Change Your Mind websites:

1) People with mental illness aren't able to work or function at school.

Research has shown that 60-70% of people with common mental disorders are in work (Chief Medical Officer's Annual Report, Dame Sally Davies, 2014). We all probably know of, work with or have gone to school with someone experiencing a mental health illness.

2) People with mental illnesses are violent and unpredictable.

Most people with mental health problems, even those with severe ones like schizophrenia, are not violent. Someone with a mental illness is more likely to be a victim of violence than inflict it.

3) Physical health problems are worse than mental health problems.

Just because you can't see a mental illness doesn't mean it's any less painful or debilitating than a broken arm. A mental health problem can feel just as bad or worse than any other illness and needs just as much support.

4) Mental Health problems are a sign of weakness.

Mental health problems are not a sign of weakness just as a broken leg is not. They are a common part of human experience and can happen to anyone from any walk of life. Many high profile, successful and inspirational people have experienced mental ill health and many people gain strength from the experience.

Extra Information and Worksheets



Unhelpful Thinking Habits

Over the years, we tend to get into unhelpful thinking habits such as those described below. We might favour some over others, and there might be some that seem far too familiar. Once you can identify your unhelpful thinking styles, you can start to notice them - they very often occur just before and during distressing situations. Once you can notice them, then that can help you to challenge or distance yourself from those thoughts, and see the situation in a different and more helpful way. Blue text (italics) helps us find alternative, more realistic thoughts.



Mental Filter - When we notice only what the filter allows or wants us to notice, and we dismiss anything that doesn't 'fit'. Like looking through dark blinkers or 'gloomy specs', or only catching the negative stuff in our

'kitchen strainers' whilst anything more positive or realistic is dismissed. Am I only noticing the bad stuff? Am I filtering out the positives? Am I wearing those 'gloomy specs'? What would be more realistic?

Prediction - Believing we know what's going to happen in the future. Am I thinking that I can predict the future? How likely is it that that might really happen?



Judgements - Making evaluations or judgements about events, ourselves, others, or the world, rather than describing what we actually see and have evidence for. I'm making an evaluation about the situation or person. It's how I make sense of the world, but that doesn't

mean my judgements are always right or helpful. Is there another perspective?

Emotional Reasoning - I feel bad so it must be bad! I feel anxious, so I must be in danger. Just because it feels bad, doesn't necessary mean it is bad. My feelings are just a reaction to my thoughts - and thoughts are just automatic brain reflexes



Mind-Reading - Assuming we know what others are thinking (usually about us). Am I assuming I know what others are thinking? What's the evidence? Those are my own thoughts, not theirs. Is there another, more balanced way of looking at it?



Compare and despair

Seeing only the good and positive aspects in others, and getting upset when comparing ourselves negatively against them. Am I doing that 'compare



and despair' thing? What would be a more balanced and helpful way of looking at it?

Critical self



Putting ourselves down, selfcriticism, blaming ourselves for events or situations that are not (totally) our responsibility

There I go, that internal bully's at it again. Would most people who really know me say that about me? Is this something that I am totally responsible for?

Shoulds and musts -

Thinking or saying 'I should' (or shouldn't) and 'I must' puts pressure on ourselves, and sets up unrealistic expectations. Am I putting more pressure on myself, setting up expectations of myself that are almost



impossible? What would be more realistic?

Catastrophising - Imagining and believing that the worst possible thing

will happen OK, thinking that the worst possible thing will definitely happen isn't really helpful right now. What's most likely to happen?



Black and white thinking - Believing that



something or someone can be only good or bad, right or wrong, rather than anything in-between or 'shades of grey'. Things aren't either totally white or totally black - there are shades of grey. Where is this on the spectrum?

Memories - Current situations and events can trigger upsetting memories, leading us to believe that the danger is here and now, rather than in the past, causing us distress right now. This is just



a reminder of the past. That was then, and this is now. Even though this memory makes me feel upset, it's not actually happening again right now.



Mountains and Molehills

Exaggerating the risk of danger, or the negatives.

Minimising the odds of how

things are most likely to turn

Progressive Muscle Relaxation Script

Progressive muscle relaxation is an exercise that reduces stress and anxiety in your body by having you slowly tense and then relax each muscle. This exercise can provide an immediate feeling of relaxation, but it's best to practice frequently. With experience, you will become more aware of when you are experiencing tension and you will have the skills to help you relax. During this exercise, each muscle should be tensed, but not to the point of strain. If you have any injuries or pain, you can skip the affected areas. Pay special attention to the feeling of releasing tension in each muscle and the resulting feeling of relaxation. Let's begin.

Sit back or lie down in a comfortable position. Shut your eyes if you're comfortable doing so.

Begin by taking a deep breath and noticing the feeling of air filling your lungs. Hold your breath for a few seconds.

(brief pause)

Release the breath slowly and let the tension leave your body.

Take in another deep breath and hold it.

(brief pause)

Again, slowly release the air.

Even slower now, take another breath. Fill your lungs and hold the air.

(brief pause)

Slowly release the breath and imagine the feeling of tension leaving your body.

Now, move your attention to your feet. Begin to tense your feet by curling your toes and the arch of your foot. Hold onto the tension and notice what it feels like.

(5 second pause)

Release the tension in your foot. Notice the new feeling of relaxation.

Next, begin to focus on your lower leg. Tense the muscles in your calves. Hold them tightly and pay attention to the feeling of tension.

(5 second pause)

Release the tension from your lower legs. Again, notice the feeling of relaxation. Remember to continue taking deep breaths.

Next, tense the muscles of your upper leg and pelvis. You can do this by tightly squeezing your thighs together. Make sure you feel tenseness without going to the point of strain.

(5 second pause)

Progressive Muscle Relaxation Script

And release. Feel the tension leave your muscles.

Begin to tense your stomach and chest. You can do this by sucking your stomach in. Squeeze harder and hold the tension. A little bit longer.

(5 second pause)

Release the tension. Allow your body to go limp. Let yourself notice the feeling of relaxation.

Continue taking deep breaths. Breathe in slowly, noticing the air fill your lungs, and hold it.

(brief pause)

Release the air slowly. Feel it leaving your lungs.

Next, tense the muscles in your back by bringing your shoulders together behind you. Hold them tightly. Tense them as hard as you can without straining and keep holding.

(5 second pause)

Release the tension from your back. Feel the tension slowly leaving your body, and the new feeling of relaxation. Notice how different your body feels when you allow it to relax.

Tense your arms all the way from your hands to your shoulders. Make a fist and squeeze all the way up your arm. Hold it.

(5 second pause)

Release the tension from your arms and shoulders. Notice the feeling of relaxation in your fingers, hands, arms, and shoulders. Notice how your arms feel limp and at ease.

Move up to your neck and your head. Tense your face and your neck by distorting the muscles around your eyes and mouth.

(5 second pause)

Release the tension. Again, notice the new feeling of relaxation.

Finally, tense your entire body. Tense your feet, legs, stomach, chest, arms, head, and neck. Tense harder, without straining. Hold the tension.

(5 second pause)

Now release. Allow your whole body to go limp. Pay attention to the feeling of relaxation, and how different it is from the feeling of tension.

Begin to wake your body up by slowly moving your muscles. Adjust your arms and legs.

Stretch your muscles and open your eyes when you're ready.

Three Good Things exercise

Write down three good things that happened to you today. They can be anything you feel good about or grateful for.

Use this sheet to keep a record of your Three Good Things each day over the course of a week. Try to include **why** you felt each of the things was really good.

Try to write down your three good things every day if possible – but if for some reason you miss a day then don't worry, just carry on the next day.

You could even talk to your family or friends about your three good things and ask them about theirs.

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Three Good Things exercise (continued)

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External Agencies, Services & Providers Contact Information





MOCD-UK	www.ocduk.org	Info on OCD, and support forums
RECOVERYOURLIFE.COM	www.recoveryourlife.com	Info and support around self-harm
Z= SANE	www.sane.org.uk	Lots of info on mental health, as well as telephone, email and text support, and an online forum (have to be 18+ to use forum)
JANE		28
selfharm ^{uk}	www.selfharm.co.uk	Information for professionals and young people about self-harm
student minds	www.studentminds.org.uk	UK student mental health charity. Campaigns and peer support groups in universities across the country
STUDENTS AGAINST DEPRESSION	www.studentsagainstdepression.org	Information, advice and real life stories, specifically for students struggling with depression
time to change let's end meetal bealth discrimination	www.time-to-change.org.uk	Real life stories and information
YOUNGMINDS	www.youngminds.org.uk	Information on mental health and wellbeing for young people, parents and professionals
THE MIX	www.themix.org.uk	Support / advice service for young people.

Apps: Mood Trackers



MoodPanda



Moodbug



Moodometer

Half moodtracker, half social network. Allows you to choose whether you keep mood private, or share it publicly for support from other MoodPanda users

Created by MindApples, allows you to track your mood and share with friends or the public if you want to. Can give 'gifts' to others to say well done, or to cheer them up

Fairly basic moodtracker from the NHS

Apps: Meditation



Anamaya for Schools



Headspace



Stop, Breathe & Think

An 11 week full curriculum Mindfulness for School course. Offers 109 lessons and exercises over two age categories (7-11 yrs, and 11+)

Mini 10 minute meditations. Once you've completed the initial free course you can pay to access more meditations

Guide to meditation. Recommends certain meditations based on how you're feeling

Apps: Anxiety



MindShift



SAM (Self-help for Anxiety Management) Specifically for young people to help manage anxiety. Lots of tools, techniques and advice

Help with anxiety management. Interactive games and tools, and anxiety tracker

	Stress Tips (Anxiety UK)	Tests to see which form of anxiety you have, audio tips from people with lived experience, information to read
B	Big White Wall	App version of the website
Big White Wall	.*	
Apps: Other		
	Sleep Cycle	Uses the phone's accelerometer to wake you up within a half hour window when you are at the lightest level of sleep. Waking up from lighter sleep should help you feel more refreshed and feel better more generally
00	Personal Zen	Game that has been clinically proven to reduce stress. More info here: www.psychologicalsci- ence.org/index.php/news/releases/reduc- ing-anxiety-with-a-smartphone-app.html
	InHand .	App to help young people through the ups and downs of life. Suggests activities to help based on how you rank your mood
	HealthyMinds	Problem-solving tool aimed at students
	Recovery Record	Self-help tool for eating disorders

Pages and Groups

CAMHS and Mental Health Services Support Group For Parents https://www.facebook.com/groups/807820982942771

Hampshire CAMHS Innovations and Events https://www.facebook.com/Hampshirecamhs1

Talk to Us!

We are always here to help! We rely on the relationships between parents, carers and school staff in order to enable pupils to reach their full potential both inside and outside of school.

Any queries, questions or if you just want advice, simply ring the school on **01329 231641** or email **office@camshill.com** and you will be directed to the right member of staff.

Mental Health and Wellbeing staff information is as follows:

Mrs Newman – Mental Health Lead & Head of Year 11

Mrs Brooker – Safeguarding Lead

Miss Dugan – Nexus Centre Pupil Assistant/1:1 Mental Health Support & Guidance

Mrs McBride – Mindfulness and Yoga Coach

Miss Neil & Mrs Pearson – ELSAs

Mr Haines – SENCo

Miss Haynes – Head of Year 7

Mr Townsend – Head of Year 8

Miss Robinson – Head of Year 9

Mrs Seve – Head of Year 10

Miss Kendall – Assistant Head of Years 9 & 11

Mr Anderson-Poore – Assistant Head of Years 8 & 10

Ms Hale – Assistant Head of Year 7

Mrs Braisher – Assistant Head of Year 7