



Scottish Government consultation on the new Suicide Prevention Action Plan

Barnardo's Scotland response to Scottish Government and subsequent written submission to the Scottish Parliament Health and Sport Committee

April 2018

Key points

- The Action Plan must make specific reference to **children and young people**.
- The Action Plan must make specific reference to **Adverse Childhood Experiences (ACEs)** and **trauma**
- **Childhood bereavement**, particularly through suicide, should be recognised within the Action Plan.
- The **role of schools** in educating and supporting children to build resilience, coping strategies and emotional literacy should be highlighted within the Action Plan.

Introduction

Barnardo's is the UK's largest children's charity and we welcome the opportunity to respond to the Scottish Government's engagement paper on the new Suicide Prevention Action Plan.

We work with thousands of vulnerable children, young people and their families across Scotland every year in over 130 services. We often work with children and young people displaying symptoms of anxiety, low self-esteem, loneliness and self-harm. Many of the issues we see in our young people have the potential to escalate into more serious situations, including suicide if the right interventions are not provided at the right time. Early intervention is crucial, particularly for young people, to prevent them reaching crisis point.

The previous suicide prevention strategy 2013-2016 did not include any mention of children or young people, and as it stands the current Action Plan does not make specific mention of children and young people either. This is something we would like to see rectified in the final Action Plan. This was highlighted very strongly in the pre-engagement report which brought together views of those affected by suicide.¹

We have therefore chosen to focus our response to the engagement paper on the specific issues relating to the children, young people and families we work with. Our

¹ <http://www.samaritans.org/sites/default/files/kcfinder/files/SPR%20final%20WEB.pdf>



work focuses on putting support in at the earliest possible point for children and young people to prevent issues reaching crisis point. We would therefore like to see support and intervention for groups within the population who may be at higher risk of mental health problems considered as part of the Suicide Prevention Action Plan.

Adverse Childhood Experiences and trauma

We would like to see the new Action Plan make explicit reference to the impact of adverse childhood experiences (ACEs) and trauma. The ground breaking ACEs research in the USA in the 1990's clearly evidenced the link between early childhood trauma and poor health outcomes in later life. Further research around neuroscience continues to emerge and develop, helping our understanding of the scientific impact of early trauma. The language of ACEs and trauma is gathering support across the political spectrum in Scotland and a commitment to tackling ACEs was included in the Programme for Government 2017/18.²

The University of Manchester conducted research on suicide by children and young people in England and Wales in 2017 and looked at common themes in the lives of young people who die by suicide. Important themes for suicide prevention highlighted by the research were support for or management of family factors (e.g. mental illness, physical illness, or substance misuse), childhood abuse, bullying, physical health, social isolation, mental ill-health and alcohol or drug misuse.³ All of these issues fall broadly under the category of adverse childhood experiences and early trauma.

We know that the impact of ACEs and the associated symptoms may not start to manifest until later life, and some evidence suggests that children who have experienced ACEs have a latent vulnerability which places them at greater risk of more severe mental health issues in later life. Professor Eamon McCrory argues that maltreatment in childhood is associated with a significantly increased likelihood of psychiatric disorder that endures across the life span.⁴

Identifying and addressing these issues as early as possible is imperative for suicide prevention and we would like to see this reflected in the final Action Plan.

Childhood bereavement

Our Here and Now service delivers trauma, bereavement and loss support to men and women in HM YOI Polmont. We provide therapeutic 1:1 support which is underpinned by trauma-informed practice and focuses on helping individuals to make sense of and cope with their experiences. An evaluation of this work by the Centre for Youth and Criminal Justice (CYCJ) found that the levels of need amongst the population relating to bereavement and trauma were extremely high.⁵

² <http://www.gov.scot/Resource/0052/00524214.pdf>

³ http://research.bmh.manchester.ac.uk/cmhs/research/centreforsuicideprevention/nci/reports/cyp_2017_report.pdf

⁴ <https://www.ncbi.nlm.nih.gov/pubmed/25997767>

⁵ <http://www.cycj.org.uk/wp-content/uploads/2016/11/Our-Lives-with-Others-Evaluation-Report-.pdf>



The research with 33 of the young men in Polmont identified that **91% had been bereaved**, over **three quarters** of these were **traumatic bereavements**, such as murder, suicide or overdose, and **two thirds** had suffered **more than four** bereavements. ⁶

"He reports never coming to terms with the loss of his father aged 11. He found his father hanging following a completed suicide"

Barnardo's Scotland - Referral Database Here and Now

The University of Manchester research found bereavement to be a common factor in the lives of young people who die through suicide, with **25%** of under 20s and **28%** of 20-24 year olds having experienced bereavement.

We welcomed the Scottish Government's commitment to a National coordinator of childhood bereavement services in the Programme for Government 2016/17⁷ as well as Action 7 in the 10 Year Mental Health Strategy which committed to supporting the mental health needs of young offenders, including on issues such as trauma and bereavement. ⁸ It is important that there is coordination within the Action Plan which recognises these strands of work and the importance of addressing childhood bereavement in the context of suicide prevention.

The role of schools

The pre-engagement report from those with lived experience highlighted the need for *'broader education to equip young people with the skills to manage their emotions and build resilience'*. ⁹ Our extensive work in schools is built around creating positive, secure attachments for children and nurturing environments where children feel safe to talk about and name their emotions. Our PATHS programme in primary schools ¹⁰ promotes social and emotional learning. We support children to develop self-control, emotional awareness and interpersonal problem-solving skills. We support teachers to model behaviours and encourage children to regulate their emotions using feelings words and self-control techniques.

"We talked about going into our shells so that we don't do something we regret later."

"We use feelings cards to tell other people when we might need space or help"

Quotes from children about using PATHS strategies

⁶ <https://www.therobertsontrust.org.uk/news/trauma-loss-and-bereavement-at-hmyoi-polmont>

⁷ <http://www.gov.scot/Publications/2016/09/2860/6>

⁸ <http://www.gov.scot/Resource/0051/00516047.pdf>

⁹ <http://www.samaritans.org/sites/default/files/kcfinder/files/SPR%20final%20WEB.pdf>

¹⁰ <http://www.pathseducation.co.uk/what-is-paths/paths-curriculum/>



"Lucy's gran passed away recently- we've had some other sad news in our family recently too- talking about feelings for homework definitely helped us help her"

Parent of child using PATHS

Building programmes like this into the education system alongside broader training around mental health is essential in order to equip children and young people with the coping strategies they need to self-regulate and deal with potentially distressing circumstances and experiences as they arise. There is also a need for more emphasis in teacher training and CPD on health and wellbeing, the impact of trauma and adversity and the importance of creating strong resilience factors for all children and young people.

The Trauma Knowledge and Skills Framework ¹¹ developed by NHS Education Scotland is a critical document for the entire workforce, particularly those working with children and young people. We understand NHS Education Scotland is currently developing Scottish Trauma Informed Leadership Training. We would like to see this training form part of the new Head Teacher qualification and be a central focus in the development of the proposed Head Teachers' Charter.

Equipping teachers and those caring for our children with the knowledge and skills they need to recognise and respond to trauma is a crucial element of the early intervention and prevention agenda. We would like to see the role of schools highlighted in the final Action Plan.

"If youngsters are coming to custody with all of these bereavement issues then surely we should be doing something about that at the time it happens, not waiting until they come into custody. So there is a whole set of issues about provision in the school system and making sure that they're actively targeting youngsters who they know have had bereavement and not waiting for the young person or someone to ask for support. By the time they know they need support it's too late"

Key Stakeholder – Here and Now research

We look forward to engaging with the Scottish Government further on any of the above issues as the Action Plan develops.

For any queries or further information, please contact:

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¹¹ <http://www.nes.scot.nhs.uk/media/3971582/nationaltraumatrainingframework.pdf>