

**North Yorkshire Wider Partnership Conference 2019**  
**Notes from Workshop 6 - Supporting families: Helping families build resilience**

**Presenters:** Emma Pears and Karen Lister, SELFA

The workshop session was opened by the two representatives from SELFA giving a background to their organisation and how they had become involved, including have lived through some of the experiences of their clients.

SELFA's work includes Family Coaching & Counselling and Family resilience project – funding provided for three years through grant funder.

6 Weeks programme – families have six sessions/6 weeks of mindfulness – coping strategies/establishing the triggers for behaviour.

Also there is a family weekend residential. This includes team building and family coaching.

There are also 4 psychotherapy sessions and 4 life coaching sessions.

Key thing SELFA have found is to use mentors who can talk and share their lived experiences so that clients can feel that they are understood and are accepted and feel that they belong.

Workshop exercises included case studies – examples of families who are on the journey

Case study: Family 5 (a father with two daughters aged 6 and 10. Mother has died: Support needed: - support from young carers/bereavement counselling/school support/support/support for Dad to look after himself and have time to do social/sporting activities. Get the school involved work as a team with Dad. School nurse (healthy child programme) to provide support and other pastoral support in the school/teacher to speak to both daughters' friends to advise them on responding to their friends' bereavement. Longer term support needed – bereavement counselling but don't rush in straightaway.

Case Study: single mum 2 teenage girls – one with an eating disorder seen by CAHMS. ASD assessment youngest daughter. Mum diagnosed with depression.

- Carers could get involved to provide girls with respite/Home Start to get support for Mum/Provide education to Mum re. eating disorders – Mum to realise she is a role model around eating/

Case Study: 2 parents and teenage son – in Pupil Referral Unit, displays violent and threatening behaviour at school. Does online gaming. Live in area of high poverty, in the local area there are late night parties at which drug dealing is rife.

- Look at who son is comfortable speaking to re. causes of his behaviour and what he wants out of life/provide mentors.

Case Study – two parents and three girls – struggling to settle in at school, parents feel overwhelmed.

- Use Early help service (NYCC Prevention Service – Stronger Families) and if required refer to CAMHS

Key summing up points:

- There is a risk that we increasingly medicalise issues in children. We need to recognise they have adverse experiences but children need to be children and we need to collectively see how we can strengthen families and ensure they have networks of support. The local authority can go into families lives but can't stay on so for the longer term it is about who can support the family.
- The rep. from Craven College referred to the Youth Mental Health First Aid - viewing things from a child's perspective. Don't just ask a child 'are you okay' because they will say yes. Compass Buss mental health training in Schools Level 1, 2 and 3 is very useful – make it compulsory to have First Aiders for Mental Health in schools

Participants were all asked what more could they do individually and with others in the future to support families in our communities. There is hope if organisations and individuals work together as organisations. Organisations need to ask is the support that I am providing to families good enough for my child – if not we need to do things differently.