



Student Wellbeing Resource

Student Wellbeing Index

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Introduction

We are all becoming increasingly aware of the impact of students' emotional wellbeing on their attendance and attainment at school, and the growing pressure on staff to provide support to students facing a range of issues around mental health, relationships and risky behaviour.

School staff are constantly faced with children and young people's wellbeing needs arising from complex family or care environments, peer relationships and the challenges of their developmental phase

and emerging identity.

Information on topics which may impact on students' wellbeing has been compiled by partner organisations with pointers for best practice and resources that schools can draw on to provide a whole school approach, targeted or individual support.

This is intended as a complimentary offer to the Healthy Minds framework which is being rolled out across Sheffield primary and

Healthy Minds Framework

secondary schools in phases. The Sheffield Healthy Minds Framework focuses on developing a positive mental health culture in schools by providing schools with in-reach from Children and Adolescent Mental Health Services (CAMHS). The focus of the in-reach is on providing whole school training on mental health, as well as targeted training for key members of staff such as pastoral teams, the contents of this training is tailored to a school's individual needs.

By embedding a whole-school approach to mental health, the framework aims to not only prevent emotional wellbeing and mental health issues from escalating, but to also make it easier for the most vulnerable children and young people to be supported.

If you are a Healthy Minds school, please work with your CAMHS link person when reviewing the student wellbeing offer and considering potential commissions. This will help ensure that you get the best service for your school.

As part of our local transformation plan we have also developed a YIACS service called Door 43 at Star House through Sheffield Futures. Door

Youth Information and Counselling Service (YIACS)

43 will provide a central hub of co-located services which young people age 13- 25 can access. The delivery of the service is through an innovative partnership between the statutory and voluntary sector, led by Sheffield Futures. The services on offer include a range of areas including emotional wellbeing,

sexual health, substance misuse, employment information and independent living support.

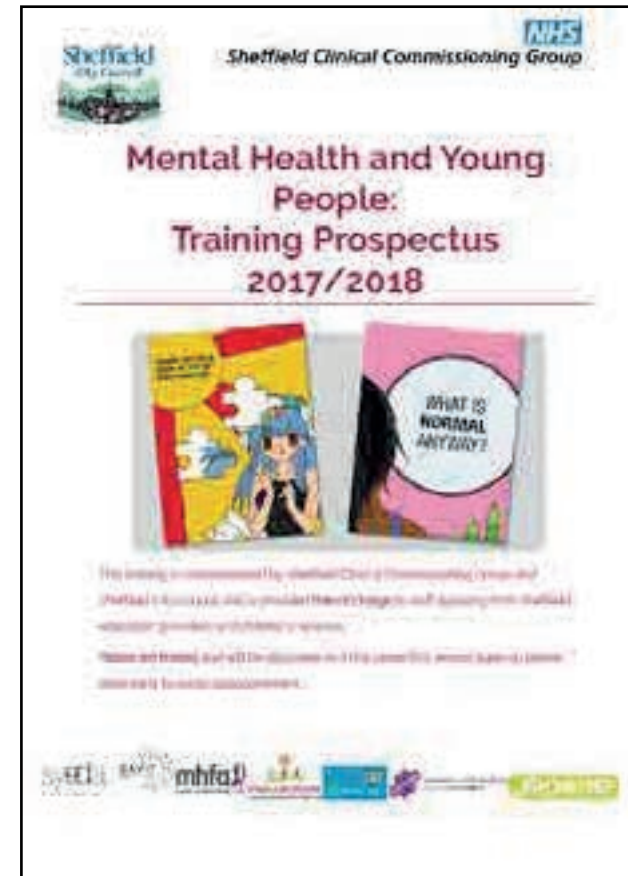
Introduction

Wellbeing Café

Door 43 includes a Wellbeing Café. This café will provide a safe space for young people who feel like they are at risk of a mental health crisis to go to, in order to receive support, advice and guidance. The café will be linked to Door 43 to make it easy for a young person who presents at the Wellbeing Café to access the range of services which form part of the YIACS.

Future in Mind Training Offer

Schools can access emotional health and wellbeing workforce development training by third sector partners from September 2017 to July 2018 including Youth Mental Health First Aid, Flower 125 (emotional wellbeing programme targeting primary school students), emotional attachment needs, and specialist support for students with eating disorders, LGBT+ students and students who self-harm.



The Multi-Agency Support Team MAST Core Offer

The MAST core offer will be a useful resource and is available on the website:

<https://www.sheffield.gov.uk/home/social-care/multi-agency-support-teams>

MAST offers support to families where there are issues such as the following:

- Children who are missing school
- Children at risk of entering or re-entering children's social care
- Children and adults with emotional and mental health issues
- Children with behavioural problems
- Families affected by domestic abuse
- Families affected by substance misuse
- Families experiencing poverty, at risk of homelessness or long term unemployment
- Families with needs around parenting

This support is offered: Through advice and self-help guidance via locality based appointment-led Advice Sessions that offer immediate advice and guidance on the 4 key areas of the Core Offer, and signposting for any additional services. Families can also access themed advice workshops on specific areas. This will also include Parenting Seminars on a range of topics.

Through Professional discussion and referral at Early Help Gateway Meetings in localities with agreed limited-time worker help being provided at an early stage, that includes support for assessment and escalation to specialist services.

Through an assessment-led professional referral to Early Help screening where a holistic picture and action plan will be created and supported, through the delivery of solution focused intervention by a whole family key worker.

Students may also find the CAMHS resource for peer support Epic Friends useful:

www.epicfriends.co.uk

Epic Friends offers advice on various issues such as depression, bullying, family problems, self-harm, eating disorders and anxiety, and gives guidance on when to seek help and support.

There are many other areas that we could have included in the Student Wellbeing offer, but we had to draw a line to get the information out to schools. We welcome your feedback on the contents and will respond with updates including new subjects if there is a demand.

The mental health section could be broken down into several pages on self-harm, risk of suicide, ADHD, ASD etc, which are referred to but not in detail. We also considered the importance of sleep and nutrition, which the school nurse and MAST can help with.

Some local organisations offer training and workforce development as well as support for children and young people. Resources for PSHE on these subjects are available on-line.

<https://www.pshe-association.org.uk>

There is useful information, advice and resources for schools on the Safeguarding Sheffield Children website:

<http://www.safeguardingsheffieldchildren.org/sscb/safeguarding-information-and-resources/information-and-resources>

Quality Standards

All the organisations included in the resources section have signed up to the following quality standards. Learn Sheffield and Sheffield City Council are not responsible for the content of the resources / programmes provided, but would be pleased to receive feedback and will review the offer annually. Data provided is taken from trusted sources and will be updated annually, but we cannot accept responsibility for its accuracy.

Providers will...

- Work in accordance with Sheffield Safeguarding Children Board procedures and children and young people's suicide prevention pathway:

<http://sheffieldscb.proceduresonline.com/chapters/contents.html>

- Work in partnership with the Local Authority and engage in relevant local partnership working bodies.
- Discuss emerging issues for the client groups with local authority commissioners and other appropriate partners.
- Share data for the purposes of local needs assessments with local authority commissioners and other appropriate partners.
- Promote locally agreed multi agency pathways and risk assessment tools.

Feedback

We hope you find these resources useful and would welcome feedback to: enquiries@learnsheffield.co.uk

Bereavement

Overview

Most young people will have been bereaved of someone close to them (a parent, sibling, grandparent, friend, teacher) by the time they are 16. Many will cope well with their loss, but all will need the support of those around them. Depending on many factors including who has died, how they died, what their relationship with the person who has died was like, as well as how their family show emotions and communicate about the death, young people will have very different reactions to the death of someone they knew.

Other factors that can contribute are how supportive people around them are, and if they have the capacity to understand what has happened. Children tend to move through many emotions and reactions very quickly; it is sometimes described as 'puddle jumping'

(while adults may wade through rivers of grief or become stuck in oceans of distress). It is natural for them to be extremely upset at one minute and then wanting to know what is for tea; it does not mean they are not distressed by what has happened.

Bereavement is common but can be hugely life changing and extremely distressing. It's important that everyone around the young person who is grieving is supportive and understanding. This means potentially telling others (e.g. teachers and the young person's friends) about the young person's situation so they can be sensitive to their needs and offer support if needed.

Resources

- <http://www.childhoodbereavementnetwork.org.uk/> a website designed especially for bereavement in children. Has resources for schools, for the young person and for parents/carers.
- <http://hopeagain.org.uk/> a website for young people to use.
- <http://childbereavementuk.org/young-people/> a website for child bereavement that has resources for schools, young people and parents/carers.
- www.winstonswish.org.uk charity for bereaved children, specialist provider of support for children bereaved through homicide and suicide freephone national helpline 08088 020 021.

Key Facts

- Up to 70% schools have a bereaved pupil on roll at any one time.
- 1 in 29 young people are dealing with the death of a parent or sibling.
- One in sixteen 5 to 16-year-olds had experienced the death of a friend
- 5 -16 year-olds who have experienced bereavement are approximately one and-a-half times more likely than other children to be diagnosed with 'any' mental disorder (2005)
- Bereavement by suicide increases the risk of the young person considering and attempting suicide

Best Practice

- Children and young people will have different understandings about death according to their age and developmental stage, all children will be affected in some way by a bereavement in the family. Not speaking about it, seeking to 'protect' children by not involving them can mean that their imaginings and the sense they make of it can be harmful.
- A bereaved young person may appear to be grieving like an adult but they are not an adult and should be treated as a young person.
- The bereaved young person shouldn't be burdened with tasks that a responsible adult can undertake. Being asked to 'look after' a surviving parent etc. isn't helpful.
- Grieving young people may prefer to speak with their friends or people outside of the immediate family about the death, this should be supported. Some young people feel isolated or 'different' from their friends, a support group may help, or a supportive mentor in school.
- Due to the developmental changes a young person will be undergoing, the emotions related to the death of someone close may be very intense. They may need support to express how they are feeling and the emotions they are encountering. Offer useful ways to express these feelings, so that they don't harm themselves or others. They may need a 'time out' space, a supportive mentor in School.
- If a young person is self-medicating or self-harming, very withdrawn or engaging in serious risk taking behaviour as a response to their grief, professional help/advice should be sought.
- A young person will be very vulnerable after bereavement and need someone to talk to about how they are feeling, so that any potentially harmful relationships or situations can be identified and dealt with appropriately. Safe Boundaries are vital to young people at this time.
- Grief is a normal and ultimately helpful response to loss, but complicated grief is harmful and the young person will need support.
- Suicide may create feelings of guilt or anger wondering if they or someone else is responsible, they may feel abandoned, the emotional cost to the family will impact on the young person and they may feel burdened. The child or young person may experience post-traumatic stress symptoms either from witnessing or imagining the death, professional support will be needed.
- After suicide it is best if children are told and their questions answered honestly but in a helpful way. If family members can't do this a trusted adult may be able to help.

Bereavement

Local Offers and Providers

Provider	What they offer	Cost	Contact details
CRUSE	All age bereavement counselling.	Free	10 Carver St, Sheffield S1 4FS 0114 249 3328 sheffield@cruse.org.uk
Samaritans	DEAL (Developing Emotional Awareness and Listening) is a free resource for teachers and other educational professionals designed to help develop resilience in young people. Lesson plans, activities, hand-outs, audio-visual resources, teachers' notes and staff training materials can all be accessed and downloaded at any time from Samaritans website. Postvention support- practical support following bereavement by suicide.	Free	272 Queens Road, Sheffield S2 4DL - 0114 276 7277 www.samaritans.org/deal
Education Psychology Service	Sheffield EPS has a range of useful material some of which is used to support staff and young people following a suicide. Often a useful first step after first contact with the school is to share these resources with the Head Teacher. EPs might then typically visit the school and work with the senior leadership team to listen to their concerns and offer advice in relation to practical matters such as telling the school community and supporting the staff and young people.	Free	Each school will have the details for contacting the EPS in their own Critical Incident Procedures.
Golddigger Trust	Golddigger Trust is a Sheffield based Charity, offering a variety of wellbeing projects, both within the school environment, and extra-curricular activities within the community, for young people aged 11-19. Services include: 1:1 Mentoring – Bespoke, flexible programmes of mentoring for students addressing specific needs identified. Minimum 6 sessions (usual course approx. 8-14 sessions). Students accessing Golddigger Trust services via school can also access additional free services outside of school hours, including drop in youth clubs, sexual health clinic, sports and music sessions and online support.	Cost varies based on service and available charitable funding, contact for most up to date costings. Community based services are free, accessed by community referral (MAST, CAMHS, Self-referral etc). There is no charge to young people.	0114 327 1191 Golddigger Trust Centre For Young People, 10 Psalter Lane, Sheffield, S11 8YN info@golddiggertrust.co.uk www.golddiggertrust.co.uk

Body Image & Self-Esteem

Overview

Body image describes our beliefs on how our body looks and how we think it is perceived by others. This includes our thoughts and feelings about our height, weight, shape, skin, colour, and our general appearance or attractiveness. Self-esteem is how we feel about ourselves and the belief and value we place on ourselves; it is our self-worth. The effects of body image on self-esteem are especially prevalent during the teenage years and both are areas of increasing concern for children, young people, parents and teachers.

Our culture is infused with messages linking individual worth with physical appearance and the advent of social media has carried these messages into young people's bedrooms. Young people report feeling increasingly overwhelmed by sexualised and unrealistic images of beauty. For those who exaggerate perceived flaws and use excessive negative self-talk, body image becomes a source of depression, anxiety and a loss of self-esteem. In addition to this, low self-esteem and body image are intrinsically connected to the development and persistence of eating disorders, other mental health problems and risk taking behaviours.

The number of children and young people with an eating disorder is on the rise. However, it is clinically proven that those suffering can recover faster when they are treated locally and as soon as possible. By prioritising our focus on doing this we can take a crucial role in reducing the amount of young people who end up needing more specialised in-patient care.

Key Facts

- 2/3 of adults suffer from negative body image.
- Over ½ of girls and ¼ of boys think their peers have body image problems.
- 42% of girls and young women feel that the most negative part about being a female is the pressure to look attractive.
- 1/3 of men would sacrifice a year of their life to achieve their ideal body.
- Girls as young as five years old are worried about the way they look and their size.

In their 2004 article, Mann et al investigated the relationship between self-esteem and mental health promotion, arguing that "high self-esteem can lead to a better health and social behaviour, and that poor self-esteem is associated with a broad range of mental disorders and social problems both internalising problems, for example depression, suicidal tendencies, eating disorders and anxiety" (2004, p357). Other academics have drawn similar conclusions "the significant influence of self-esteem on body image has led to programmes in which the promotion of self-esteem is used as a main preventive tool in eating disorders" (St Jeor, 1993, Vickers, Scarano et al, 1994) (Mann et al, 2004, 362).

Body Image & Self-Esteem

Best Practice

- All staff to be aware of the signs and symptoms of poor body image, self-esteem and eating disorders and feel confident about what to do if they are concerned about a young person.
- Students with low body image and self-esteem or disordered eating can spot the signs in themselves or their friends and will present themselves to a member of staff with whom they feel comfortable.
- All staff should be aware of the school's process of sharing information about their concerns in order to ensure proper confidentiality and privacy, and to prevent the young person having to explain themselves several times.
- The school to consider developing an eating disorder policy to formally undertake preventative and early intervention strategies for Eating Disorders.
- Staff to set a good example of body positivity and healthy eating behaviours in their own practice.

References

Michal (Michelle) Mann, Clemens M. H. Hosman, Herman P. Schaalma, Nanne K. de Vries; Self-esteem in a broad-spectrum approach for mental health promotion. Health Educ Res 2004; 19 (4): 357-372. doi: 10.1093/her/cyg041

St Jeor, S. T. (1993), The role of weight management in the health of women. Journal of the American Dietetic Association, 93.9:1007-1012

Vickers, M. J. (1993), Understanding Obesity in Women. Journal of Obstetric, Gynecologic, & Neonatal Nursing, 22: 17-23. doi:10.1111/j.1552-6909.1993.tb01778.x

Scarano, G. M. and Kalodner-Martin, C. R. (1994), A Description of the Continuum of Eating Disorders: Implications for Intervention and Research. Journal of Counseling & Development, 72: 356-361. doi:10.1002/j.1556-6676.1994.tb00949.x

Resources

South Yorkshire Eating Disorders Association is a charity that is based in Sheffield. Their website contains details of services, recovery stories and information on how to self-refer at www.syeda.org.uk.

Men Get Eating Disorders Too is a charitable organisation which aims to raise awareness of eating disorders in men <http://mengetedstoo.co.uk/>.

Beat is a national eating disorder charity with a helpline and youthline www.b-eat.co.uk.

Epic Friends is a site managed by CAMHS to help young people to support their friends through a variety of mental health problems <https://epicfriends.co.uk/>

The PHSE Association website contains lots of resources for addressing the topics of body image and self-esteem www.pshe-association.org.uk/curriculum-and-resources/.

Body Image & Self-Esteem

Local Offers and Providers

Provider	What they offer	Cost	Contact details
South Yorkshire Eating Disorders Association (SYEDA).	We offer a range of talking therapies, occupational therapy, complimentary therapy and support groups to anyone 14 and over who is suffering with an eating disorder or whose relationship with body image and food dominates their life. We also offer one-to-one therapy, support groups and courses to friends and family members of those directly affected. We also deliver a bespoke education and training offer to young people and the professionals who work with them, from GPs and nurses to teachers and third sector organisations.	Our Education and Training is a free service. We are currently funded until March 2018 and will seek to secure further funding to continue our service after this. Minimal charges may apply for our services.	Please contact our Education and Training Manager Christie Rossiter. christier@syeda.org.uk (0114) 272 8822
Golddigger Trust	Golddigger Trust is a Sheffield based Charity, offering a variety of wellbeing projects, both within the school environment, and extra-curricular activities within the community, for young people aged 11-19. Services include: 'I'm The Girl I Want To Be' and 'Made Of More' Self-esteem and healthy relationships courses (single gender groups of 8-12 students). Creative course exploring issues of esteem, identity, healthy sex and relationships and aspirations for the future, over 8 weeks (1.45-2hr session per week). 1:1 Mentoring – Bespoke, flexible programmes of mentoring for students addressing specific needs identified. Minimum 6 sessions (usual course approx. 8-14 sessions). 'SISU' Controlling Emotions Course – 5 week course for up to 6 students, creatively exploring issues around self-harming behaviours, anxiety and/or depression. SisU takes an innovative, CBT based approach, and can also be delivered 1:1. Students accessing Golddigger Trust services via school can also access additional free services outside of school hours, including drop in youth clubs, sexual health clinic, sports and music sessions and online support.	Cost varies based on service and available charitable funding, contact for most up to date costings. Community based services are free, accessed by community referral (MAST, CAMHS, Self-referral etc). There is no charge to young people.	0114 327 1191 Golddigger Trust Centre For Young People, 10 Psalter Lane, Sheffield, S11 8YN info@golddiggertrust.co.uk www.golddiggertrust.co.uk

Overview

Bullying can take many forms but it usually includes the following types of behaviour:

- **Physical:** Hitting, kicking, pinching, punching, scratching, spitting or any other form of physical attack.
- **Verbal:** This is the most common form of bullying. It includes name-calling; insulting; remarks which can also be prejudice related for example racist, sexist, homophobic, bi phobic, transphobic or disability related; jokes; teasing; using sexually suggestive or abusive language.
- **Indirect:** Spreading nasty stories about someone; exclusion from social groups and being made the subject of malicious rumours.
- **Cyber:** Any type of bullying that is carried out by an electronic medium, for example : text message; picture/video clip; phone; e-mail; chat-room , Instant Messaging (IM), Social Networking sites and bullying via websites.

Bullying can last for a short period or go on for years and is an abuse of power by those who carry it out. It is sometimes premeditated, sometimes opportunistic, sometimes occurs randomly and sometimes serially.

Bullying relies on bystander (observers, onlookers, watchers) doing nothing to stop the bullying or becoming actively involved in supporting it.

Bullying can happen to anyone.

The Anti-Bullying Alliance includes the following principles in its definition of bullying:

- Bullying behaviour deliberately causes hurt (either physically or emotionally).
- Bullying behaviour is repetitive (though one-off incidents such as the posting of an image, or the sending of a text that is then forwarded to a group, can quickly become repetitive and spiral into bullying behaviour).
- Bullying behaviour involves an imbalance of power (the person on the receiving end feels like they can't defend themselves).

Bullying is not:

- Teasing and banter between friends without intention to cause hurt (although bullying can be misrepresented as banter).
- Falling out between friends after a quarrel or disagreement.
- Behaviour that all parties have consented to and enjoy (note coercion can be very subtle).

Overview (cont)

Bullying can last for a short period or go on for years and is an abuse of power by those who carry it out. It is sometimes premeditated, sometimes opportunistic, sometimes occurs randomly and sometimes serially.

Bullying relies on bystander (observers, onlookers, watchers) doing nothing to stop the bullying or becoming actively involved in supporting it.

Specific types of bullying include:

- **Homophobic, biphobic and transphobic bullying** because of someone's sexual orientation or sexual identity
- **Racist bullying** because of someone's skin colour
- **Religious bullying** because of someone's belief or faith (including having no belief)
- **Sizeist bullying** because of someone's body size
- **Sexist bullying** because of a person being of the opposite sex
- **Appearance related bullying** because of appearance
- **Cyberbullying** targeting people online, often anonymously
- **SEN/Disability bullying** because of a disability or learning difficulties

Bullying can make young people feel isolated and worthless, lonely, anxious, angry and lacking confidence. Signs of bullying include:

- Truanting/absenteeism
- Depression
- Becoming withdrawn
- Taking drugs or drinking alcohol
- Tearfulness
- Thoughts of suicide
- Distress
- Decreased performance in school work for unexplained reasons
- Loss of appetite
- Refusing to say what's wrong
- Avoiding people/situations
- Self harm
- Anxiety

References

Brown, Victoria, Elizabeth Clery, and Christopher Ferguson. "Estimating the prevalence of young people absent from school due to bullying." *Nat Centre Soc Res* 1 (2011): 1-61.

Key Facts

- There were over 25,700 Childline counselling sessions with children about bullying last year. Source: NSPCC (2016)
- More than 16,000 young people are absent from school due to bullying Source: Brown, V., Clery, E. and Ferguson, C. (2011)
- There were over 11,000 counselling sessions with young people who talked to Childline about online issues last year Source: NSPCC (2016)

Key findings from the UK Annual Bullying Survey 2016 by anti bullying charity Ditch the Label include:

- 1.5 million young people (50%) have been bullied within the past year.
- 145,800 (19%) of these were bullied EVERY DAY.
- People who have been bullied are almost twice as likely to bully others
- 57% of female respondents have been bullied, 44% of male respondents and 59% of respondents who identified as trans have been bullied.
- 24% of those who have been bullied go on to bully.
- Twice as many boys as girls bully (66% of males vs. 31% females).
- 44% of young people who have been bullied experience depression.
- 41% of young people who have been bullied experience social anxiety.

- 33% of those being bullied have suicidal thoughts
Source: Ditch the Label 2016

Best Practice Resources

The Department of Education has produced guidance on preventing and tackling bullying <https://www.gov.uk/government/publications/preventing-and-tackling-bullying>.

Government produced good practice case studies on managing behaviour and bullying <https://www.gov.uk/government/collections/managing-behaviour-and-bullying-in-schools-case-studies>.

Stonewall have produced toolkits for preventing and tackling homophobic, biphobic and transphobic bullying in primary schools

http://www.stonewall.org.uk/sites/default/files/getting_started_-_a_toolkit_for_secondary_schools.pdf
and secondary schools.

http://www.stonewall.org.uk/sites/default/files/getting_started_toolkit_-_primary.pdf.

The Anti Bullying Alliance has produced a Tools and Information section about all things bullying. <https://www.anti-bullyingalliance.org.uk/tools-information>.

Resources

- http://www.barnardos.org.uk/what_we_do/our_work/lgbtq/professionals/hbt-bullying.htm
- <https://www.childline.org.uk/info-advice/bullying-abuse-safety/>
- <https://www.nspcc.org.uk/preventing-abuse/child-abuse-and-neglect/bullying-and-cyberbullying/what-is-bullying-cyberbullying>
- <https://www.ditchthelabel.org/>

The Legal Dimension

The Equality Act 2010

The Public Sector Equality Duty under the Equality Act 2010 requires all schools in England to eliminate discrimination; promote equality of opportunity and foster good relations, this means schools need to tackle and prevent bullying.

Education and Inspections Act 2006

Schools have a duty to promote the safety and well-being of all children and young people in their care which means clear responsibilities in responding to bullying.

Human Rights Act 1998

Schools could be challenged under the Human Rights Act 1998, if they allow the rights of children and young people that they work with to be breached through failing to take bullying seriously.

Safeguarding children and young people

Under the Children Act 1989 a bullying incident should be addressed as a safeguarding concern when there is 'reasonable cause to suspect that a child is suffering, or is likely to suffer, significant harm'.

Criminal law

Although bullying in itself is not a specific criminal offence in the UK, some types of harassing, threatening behaviour or communications could be a criminal offence.

Bullying outside school premises

The Education and Inspections Act 2006 gives Headteachers the power to regulate pupils' conduct when they are not on school premises and are not under the lawful control or charge of a member of school staff. This can relate to any bullying incidents occurring anywhere off the school premises, such as on school or public transport, outside the local shops, or in a town or village centre.

Ofsted

Ofsted inspections explore how schools prevent and tackle bullying, and will explore how the school meets its statutory duty to prevent all forms of prejudice based bullying and language.

Local Offers and Providers

Provider	What they offer	Cost	Contact details
SAYit	Training and support on LGBT+ for school staff and pupils.	SAYit are funded to work with 1000 pupils per year however, if capacity is exceeded SAYit is able to support on a traded basis.	judy@sayouthtrust.org.uk 0114 241 2728 www.sayouthtrust.org.uk
CRESST	CRESST run programmes of conflict resolution education which teach people to understand conflict, how it arises and the ways it can be managed without violence. CRESST can also support by training young people to become Peer Mediators within their schools and communities.	Costs for primary schools around £1,200, subsidised by CRESST. For secondary schools, contact office for details of bursaries.	0114 241 2745 admin@cresst.org.uk www.cresst.org.uk
Interchange Counselling	Emotional Well Being and Mental Health counselling support for Children and Young People up to 25 years.	No charge to service users. Referrers can fund counselling - prices available on request.	0114 201 6672 teri.connolly@interchangesheffield.org.uk www.interchangesheffield.org.uk

Local Offers and Providers (cont)

Provider	What they offer	Cost	Contact details
DECSY	Training, resources and curriculum development projects relating to cultural diversity, racism, gender equality, philosophy for children.	Full day training: £600 Half day / twilight: £400	0114 2412750 helen.griffin@decsy.org.uk www.decsy.org.uk
Golddigger Trust	Golddigger Trust is a Sheffield based Charity, offering a variety of wellbeing projects, both within the school environment, and extra-curricular activities within the community, for young people aged 11-19. Services include: 1:1 Mentoring – Bespoke, flexible programmes of mentoring for students addressing specific needs identified. Minimum 6 sessions (usual course approx. 8-14 sessions). Students accessing Golddigger Trust services via school can also access additional free services outside of school hours, including drop in youth clubs, sexual health clinic, sports and music sessions and online support.	Cost varies based on service and available charitable funding, contact for most up to date costings. Community based services are free, accessed by community referral (MAST, CAMHS, Self-referral etc). There is no charge to young people.	0114 327 1191 Golddigger Trust Centre For Young People, 10 Psalter Lane, Sheffield, S11 8YN info@golddiggertrust.co.uk www.golddiggertrust.co.uk

Children in Care & Care Leavers

Overview

As a whole city council Sheffield has corporate parenting responsibility for children in care and care leavers. This includes elected members and council officers in education, housing, health and social care being responsible for the wellbeing of children in care, children who are care experienced and children who are care leavers and understanding the complex needs and experiences for these children and young people. Children in care and care leavers have difference experiences but all have in common the loss of their birth family. This can lead to complex issues regarding loss and trauma and can result with multiple vulnerabilities for them to manage. Around 60% of children in care have emotional and mental health problems and a high proportion experience poor educational, health and social outcomes after leaving care.

Interventions for children in care and care leavers that focus on increasing the ability to have meaningful relationships, attachment figures and a sense of belonging will reduce risks. The NICE/SCIE guidance (2010) and the quality standard for the health and well-being of looked-after children (2013) emphasise the need for warm and nurturing care in order to achieve long-term physical, mental and emotional well-being.

Stable education built on high aspirations is also essential to promoting the quality of life for Children in care and care leavers whose transition to adulthood can often be traumatic. Without access to services to support this transition young people can end up unemployed, homeless or in custody, experiencing a downward spiral of rejection.

A disproportionate number of children in care and care leavers are from black and minority ethnic backgrounds and have particular needs. There are also other groups of Children in care and care leavers, such as unaccompanied asylum seekers or those who are LGBT+, who have particular needs. Services should be sufficiently diverse and sensitive to meet the needs of these groups.

Staff should have training and support to identify and respond to needs and risks for children in care and care leavers and services should be available to children in and leaving the care system with key priorities:

- Commissioning of services up to the age of 25 that support young people's transition leaving care.
- Providing access to a range of health and practical support for independent living.
- Developing opportunities for care leavers to engage in education, training and employment.

Key Facts

One-third of children and young people in contact with the criminal justice system have been looked after ('Children looked after in England, including adoption' National Institute for Health and Care Excellence (NICE) 2014).

Children in Care & Care Leavers

✓ Best Practice

NICE Guidance states that health and social care services include dedicated services to promote the mental health and emotional well-being of looked-after children and young people, and to support young people in the transition to independence. Services should be designed to help children and young people with particular needs, including those from black and minority ethnic backgrounds, unaccompanied asylum seekers and those with disabilities.

The NICE pathway contains recommendations about providing flexible and accessible mental health services and support for looked-after children and young people (including those from BAME groups and unaccompanied children and young people who may be seeking asylum).

📍 Local Offers and Provider

Provider	What they offer	Cost	Contact details
Golddigger Trust	Golddigger Trust is a Sheffield based Charity, offering a variety of wellbeing projects, both within the school environment, and extra-curricular activities within the community, for young people aged 11-19. Services include: 1:1 Mentoring – Bespoke, flexible programmes of mentoring for students addressing specific needs identified. Minimum 6 sessions (usual course approx. 8-14 sessions). Students accessing Golddigger Trust services via school can also access additional free services outside of school hours, including drop in youth clubs, sexual health clinic, sports and music sessions and online support.	Cost varies based on service and available charitable funding, contact for most up to date costings. Community based services are free, accessed by community referral (MAST, CAMHS, Self-referral etc). There is no charge to young people.	0114 327 1191 Golddigger Trust Centre For Young People, 10 Psalter Lane, Sheffield, S11 8YN info@golddiggertrust.co.uk www.golddiggertrust.co.uk

📖 Resources

<https://www.nice.org.uk/guidance/ph28>

This guideline covers how organisations, professionals and carers can work together to deliver high quality care, stable placements and nurturing relationships.

<https://www.nice.org.uk/guidance/qs31>

This quality standard covers the health and wellbeing of looked-after children and young people (from birth to 18 years) and care leavers.

www.scie.org.uk/publications/guides/guide40/

This is NICE and SCIE's formal guidance on improving the physical and emotional health and wellbeing of looked-after children and young people.

Children in Care & Care Leavers

Local Offers and Provider (cont)

Provider	What they offer	Cost	Contact details
Sheffield Virtual School	Every Child Looked After (from 2years to 18 years of age) will have a member of the Virtual school (VS) allocated to them, who will be responsible for ensuring the high attainment engagement and participation in education, employment or training. The VS advocate will work with education settings, social workers and carer providers to ensure the Child in Care has a Personal Education Plan (PEP) which is reviewed termly (3 times a year) and ensure that the Pupil Premium (PP+) funding for Children in Care is used appropriately and effectively, to raise educational standards and aspirations. The Virtual School will quality assure PEP's to ensure that they are of high quality and meet the needs of individual. The VS provides support and training to Designated Teachers, Social workers, and carers to empower and enable them to effectively undertake their roles as education champions for Children in Care. The Virtual school will work with other professionals to ensure that barriers to learning and engagement are eliminated. The Virtual School also commissions specific projects and initiatives which will raise educational engagement, attainment and progress. For further details please contact the Virtual School. This is a universal offer which is free to all Children in Care.	Free	Contact Sheffield Virtual school on 0114 273 5584

Child Sexual Exploitation

Overview

Child Sexual Exploitation (CSE) is a form of Child Sexual Abuse (CSA), which is characterised by the young person, or the abuser receiving some form of payment or gain for sexual activity with someone under 18. Some high profile cases have been reported in recent years, but CSE is not a new phenomenon and is not concentrated in certain communities or areas. All young people by the nature of adolescence are vulnerable to CSE but some are more vulnerable than others. Like CSA, CSE can involve contact and non-contact abuse, it is never the young person's fault and early detection and intervention is key.

Key Facts

Like all forms of child sexual abuse, child sexual exploitation:

- can affect any child or young person (male or female) under the age of 18 years, including 16 and 17 year olds who can legally consent to have sex.
- can still be abuse even if the sexual activity appears consensual.
- can include both contact (penetrative and non-penetrative acts) and non-contact sexual activity.
- can take place in person or via technology, or a combination of both.
- can involve force and/or enticement-based methods of compliance and may, or may not, be accompanied by violence or threats of violence.
- may occur without the child or young person's immediate knowledge (through others copying videos or images they have created and posting on social media, for example).
- can be perpetrated by individuals or groups, males or females, and children or adults.
- can be a one-off occurrence or a series of incidents over time, and range from opportunistic to complex organised abuse.
- is typified by some form of power imbalance in favour of those perpetrating the abuse.
- whilst age may be the most obvious, this power imbalance can also be due to a range of other factors including gender, sexual identity, cognitive ability, physical strength, status and access to economic or other resources.

Definition (DoE Guidance 2017)

Child sexual exploitation is a form of **child sexual abuse**. It occurs where an individual or group **takes advantage** of an **imbalance of power** to coerce, manipulate or deceive a child or young person under the age of **18** into **sexual activity** (a) in **exchange** for something the victim needs or wants, and/or (b) for the financial **advantage** or increased status of the perpetrator or facilitator.

The victim may have been sexually exploited even if the sexual activity appears consensual.

Child sexual exploitation does not always involve physical contact; it can also occur through the use of technology.

Child Sexual Exploitation

Context

- CSE is a complex form of abuse and can be difficult to identify.
- Relies on “professional curiosity” to identify.
- Can be mistaken for normal adolescent behaviours.
- Even when a young person can legally consent to sexual activity, consent is only valid when they have a choice and have the freedom and capacity to make that choice.
- If a child feels that they have no other meaningful choice, are under the influence of harmful substances or fearful of what might happen if they don't comply consent cannot legally be given no matter what the age of the child.
- CSE is part of a wider continuum of exploitation, violence and abuse.
- Child sexual exploitation is not a catch all category for all forms of sexual harm in adolescence.
- Should be viewed within the wider continuum of sexual abuse and issues such as trafficking, modern slavery, domestic abuse and other gendered violence and going missing.
- The necessary focus of child sexual exploitation should not overshadow a focus on other manifestations of abuse.

Good Practice

If you are concerned about a child or young person you work with, call the Safeguarding Hub on 0114 273 4855 for assessment and referral onto support services. If the young person is at risk of immediate harm call 999.

Vulnerabilities

- Having a prior experience of neglect, physical or sexual abuse.
- Lack of a safe/stable home environment, now or in the past (e.g. domestic violence, parental substance misuse, mental health issues, family criminality).
- Recent bereavement or loss.
- Social isolation or social difficulties.
- Absence of a safe environment to explore sexuality.
- Economic vulnerability.
- Homelessness or insecure accommodation status.
- Connections with other sexually exploited people.
- Family members or other connections involved in sex work.
- Having a physical or learning disability.
- Being in care (particularly those in residential care and those with interrupted care histories).
- Sexual Identity.

Child Sexual Exploitation

Indicators

- Acquisition of money, clothes, mobile phone etc. without plausible explanation.
- Gang-association and/or isolation from peers/ social networks.
- Exclusion or unexplained absences from school, college or work.
- Leaving home/care without explanation and persistently going missing or retuning late.
- Excessive receipt of texts/phone calls.
- Returning home under the influence of drugs/alcohol.
- Inappropriate sexualised behaviour for age/ sexually transmitted infections.
- Evidence of/suspicious of physical or sexual assault.
- Relationships with controlling or significantly older individuals or groups.
- Multiple callers (unknown adults or peers).
- Frequenting areas known for sex work.
- Concerning use of internet or other social media.
- Increased secretiveness around behaviours.
- Self-harm or significant changes in emotional well-being.

Resources

Sheffield Safeguarding Children Board procedures
http://sheffieldscb.proceduresonline.com/chapters/p_sex_exp.html?zoom_highlight=sexual+abuse

NSPCC 'Preventing child sexual abuse' guidelines
<https://www.nspcc.org.uk/preventing-abuse/child-abuse-and-neglect/child-sexual-abuse/preventing-child-sexual-abuse/>

NHS guidelines
<http://www.nhs.uk/Livewell/abuse/Pages/child-sexual-exploitation-signs.aspx>

National Working Group for CSE
www.nwg.org

Consent video for young children
<https://www.youtube.com/watch?v=h3nhM9UIjlc>

"I thought I was the only one. The only one in the world":
Interim report
<https://www.childrenscommissioner.gov.uk/wp-content/uploads/2017/07/I-thought-I-was-the-only-one-in-the-world.pdf>

Barnardos info on the subject
http://www.barnardos.org.uk/what_we_do/our_work/csehome?gclid=CjwKEAiAirXFBRCQyvL279Tnx1ESJAB-G-Qvz2qcLeQDNZb2kt1h55NZr-0pvsxHLWtwH0SrOWRHLhoC9Zvw_wcB

Child Sexual Exploitation

Local Offers and Providers

Provider	What they offer	Cost	Contact details
Sheffield Sexual Exploitation Service	Our service supports young people who are at risk of, or have been, sexually exploited. Young people receive one-to-one support from either our service, or from specially trained staff within the three community youth teams. Support workers focus on raising young people's awareness of risky situations, whilst bolstering their self-esteem to support them to make informed choices about their lives. We offer professionals support and training in partnership with the Sheffield Safeguarding Children Board. Single or multi-agency training sessions are available on request. The service also offers education and awareness raising sessions via schools and other settings to groups of young people to try and prevent them from becoming involved in sexual exploitation.	Free	0114 201 8645 www.sheffieldfutures.org.uk
Golddigger Trust	Golddigger Trust is a Sheffield based Charity, offering a variety of wellbeing projects, both within the school environment, and extra-curricular activities within the community, for young people aged 11-19. Services include: 'Choose Your Own Adventure' – an interactive 1hr lesson for Y9-13 (up to 30 students per lesson), addressing topics of CSE, E-safety, Domestic Abuse and risky relationships. Students journey through a life-sized board game, exploring risks and choices. 'I'm The Girl I Want To Be' and 'Made Of More' Self-esteem and healthy relationships courses (single gender groups of 8-12 students). Creative course exploring issues of esteem, identity, healthy sex and relationships and aspirations for the future, over 8 weeks (1.45-2hr session per week). 1:1 Mentoring – Bespoke, flexible programmes of mentoring for students addressing specific needs identified. Minimum 6 sessions (usual course approx. 8-14 sessions). Students accessing Golddigger Trust services via school can also access additional free services outside of school hours, including drop in youth clubs, sexual health clinic, sports and music sessions and online support.	Cost varies based on service and available charitable funding, contact for most up to date costings. Community based services are free, accessed by community referral (MAST, CAMHS, Self-referral etc). There is no charge to young people.	0114 327 1191 Golddigger Trust Centre For Young People, 10 Psalter Lane, Sheffield, S11 8YN info@golddiggertrust.co.uk www.golddiggertrust.co.uk

Child Sexual Exploitation

Local Offers and Providers (cont)

Provider	What they offer	Cost	Contact details
YWHP Sexual Abuse Support Service (Young Women's Housing Project)	Our "Protect Yourself" initiative includes group-work programmes and/or one to one sessions for girls and young women. Mixed gender sessions available. • "Escape the Trap" Teenage Relationship Abuse Programme. 8 sessions (ASDAN accredited) • "Friend or Foe" Relationships & Risk (CSE). 6 sessions • ISVA: Independent Sexual Violence Advisor awareness raising workshop	FREE Donation welcome	0114 268 0580 ywhp@ywhp.org.uk

Domestic Abuse

Overview

The UK government's definition of domestic abuse is 'any incident or pattern of incidents of controlling, coercive, threatening behaviour, violence or abuse between those aged 16 or over who are, or have been, intimate partners or family members regardless of gender or sexuality. The abuse can encompass, but is not limited to psychological, physical, sexual, financial, and emotional.' Domestic abuse is hardly ever a one off incident – it is a range of behaviours that may or may not lead to physical injury but is often characterized by coercive control – a crime since December 2015, which more resembles kidnapping than assault and is about preventing someone from having the freedom to do what they want to do, about isolation, intimidation and humiliation. The definition of domestic abuse also includes so called 'honour' based violence, female genital mutilation (FGM) and forced marriage, and is clear that victims are not confined to one gender or ethnic group.

Witnessing domestic abuse of a parent or carer is traumatising for children and young people. It can cause serious harm to their mental wellbeing and is very long lasting. There are many ways that children and young people may experience domestic abuse, these include, seeing the abuse; hearing the abuse from another room, seeing parents' injuries and distress after the incident and being injured themselves by being nearby or trying to stop the abuse.

As domestic abuse mainly happens in the home it is difficult to tell if it is happening. Children who witness domestic abuse may become aggressive, withdrawn, display anti-social behaviours, suffer from depression or anxiety and not do well at school. If you think a child is living with domestic abuse consider a referral to safeguarding.

Key Facts

- An estimated 17,292 children have a female parent who is a victim of domestic abuse in Sheffield⁵.
- Around 1 in 5 children have been exposed to domestic abuse⁶.
- A third of children witnessing domestic abuse also experienced another form of abuse⁷.
- In 50% of cases domestic abuse continues even after the parents have separated⁸.
- 1 in 5 teenagers have been physically abused by their boyfriends or girlfriends⁹.
- In a 2009 NSPCC survey, one quarter of girls aged 13-17 reported experiencing intimate partner violence; one in nine female respondents had experienced severe physical violence; and almost three quarters of girls had experienced emotional abuse¹⁰.

Young People - abuse within teen relationships

It is important to remember that young people can also experience domestic abuse in their own relationships. In fact both young women and young men (aged 16-19) are more likely to experience domestic abuse than adults². Young adolescents are just as likely to experience abuse as older teenagers are. Research by Bristol University and the NSPCC showed that 27% of teenage girls aged 13-17 had experienced sexual violence in their relationships. Based on Sheffield population figures and applying national prevalence data, there could be around 3,500 young people (of which 2,300 of these are female) living in Sheffield who have been a victim of domestic abuse in the last 12 months.

YWAVE research in to Young People's Domestic Abuse Services in Sheffield³ provides further insight into young people's awareness of domestic abuse:

- 5% of those surveyed did not know what a healthy relationship was.
- 17% would not be able to spot the signs of an unhealthy relationship
- Less than half (41.5%) would not know how to find information about healthy relationships.
- 4% did not know what the term domestic abuse meant.
- 44% said they would not know where to get help if they or someone else they knew was experiencing domestic abuse.
- One in five of the questionnaire respondents had experienced domestic abuse in their family life, their own relationship or both.

In 2017 questions about controlling behaviour were included in the Every Child Matters survey⁴ for the first time for year 10s. The findings

were that boys and girls were equally likely to understand they were in a controlling relationship but the level of the control, how much the young person likes the person who is being controlling and individual confidence levels are all factors as to whether the situation is considered to be OK and whether action would be taken by the young person to act to change or end the relationship. Whilst the statistical differences between gender responses are only marginal, it appears boys are slightly more likely to consider controlling behaviour is OK if they really like the person but more likely to act than their female counterparts, whilst the opposite applied to females; they were more likely to think the controlling behaviour was wrong but have less confidence and are therefore less likely to act to change the situation.

References

¹ <https://www.gov.uk/guidance/domestic-violence-and-abuse>

² Crime Survey of England and Wales 2016

³ <http://www.chilypep.org.uk/resources-reports>

⁴ www.sheffield.gov.uk/ecm

⁵ <http://sheffielddact.org.uk/domestic-abuse/resources/danac/>

⁶ Radford, L. et al (2011) Child abuse and neglect in the UK today.

^{7, 10} *ibid*

⁸ Stanley et al 2009

⁹ Barter et al (2009) Partner exploitation and violence in teenage intimate relationships. NSPCC and Bristol University.

Domestic Abuse

Resources

Sheffield Safeguarding Children Board procedures re. domestic abuse
http://sheffieldscb.proceduresonline.com/chapters/p_dom_abuse.html?zoom_highlight=sexual+abuse

NSPCC <https://www.nspcc.org.uk/preventing-abuse/child-abuse-and-neglect/domestic-abuse/>

Women's Aid Federation England <https://www.womensaid.org.uk/the-survivors-handbook/children-and-domestic-abuse/>

<http://thehideout.org.uk/> a page created to help young people and children understand domestic abuse. It includes short cartoons, other children's stories and how to get help if they need it.

<https://www.disrespectnobody.co.uk/> website made for teens about domestic abuse in their own relationships.

<http://www.lovedontfeelbad.co.uk/> website developed by Women's Aid and Avon young providing a guide to healthy behaviour in intimate relationships for girls and young women

Sheffield young people domestic abuse pathway <http://sheffielddact.org.uk/domestic-abuse/wp-content/uploads/sites/3/2013/05/Sheffield-Young-People-and-Domestic-Abuse-Pathway-September-2015.pdf>

Sheffield young people and domestic abuse traffic light tool <http://sheffielddact.org.uk/domestic-abuse/wp-content/uploads/sites/3/2013/05/Young-People-and-Domestic-Abuse-Traffic-Light-Tool-November-2015.pdf>

Sheffield Speaks Out (Chilypep) a short film about young people and controlling relationships <http://www.chilypep.org.uk/with-young-people/ava-domestic-abuse/>

Recovery and empowerment partnership project:
<http://www.chilypep.org.uk/the-recovery-empowerment-partnership>

Best Practice

- If a parent is a victim of domestic abuse/ a child is witnessing domestic abuse at home signpost the parent to the free Domestic Abuse Helpline 0808 808 2241 help@sheffielddact.org.uk or ring the Helpline yourself to get support as to next steps
- Refer to the Sheffield Safeguarding Hub if risk is ongoing or Early Help for children needing support after abuse
- Use the Sheffield Traffic Light tool for young people in abusive peer on peer relationships to assess risk
- Young people who are 16 or over and experiencing domestic abuse in their own relationships should be referred to the Independent Domestic Violence Advocacy Service - 0114 2493920 IDVA.Group@actionorg.uk.

Domestic Abuse

Local Offers and Providers

Provider	What they offer	Cost	Contact details
Haven Project	Haven specialises in providing to support to children and young people affected by domestic abuse. We provide a range of services including: - Group sessions for children (age 5-11 and 11-14, 14+) tailored specifically for children known to live with DA, or can be broadened out if the home situation is not known or confirmed. These can be delivered on the school's premises or offsite. - Awareness training for staff on the impact of DA on children. - Delivery training for staff to run group sessions themselves. Haven also takes individual referrals. Please contact the Domestic Abuse Helpline for advice.	Some free, some chargeable Please call to discuss	admin@havenorg.uk 0114 213 0590 www.havenorg.uk
Sheffield Futures Domestic Abuse Project	Groupwork training for YPs. One-to-one support for 16-18. Free training for professionals. Whole school staff/Safeguarding team. Twilight sessions available.	Free	cyt@sheffield.gov.uk 0114 201 8572 http://www.sheffieldfutures.org.uk/
Local Authority - MAST	Parenting courses for parents who have experiences domestic abuse.	Free	East MAST: 0114 205 3635, eastmast@sheffield.gov.uk West MAST 0114 250 6865, westmast@sheffield.gov.uk North MAST: 0114 233 1189, northmast@sheffield.gov.uk
Action	Domestic Abuse training for professionals – courses on young people and domestic abuse (with Sheffield Futures) and Safeguarding Children Affected by Domestic Abuse.	Free	http://www.actionorg.uk/domestic-abuse-training/ training.group@actionorg.uk

Domestic Abuse

Local Offers and Providers (cont)

Provider	What they offer	Cost	Contact details
YWHP Sexual Abuse Support Service (Young Women's Housing Project)	Our "Protect Yourself" initiative includes group-work programmes and/or one to one sessions for girls and young women. • "Escape the Trap" Teenage Relationship Abuse Programme. 8 sessions (ASDAN accredited) • "Friend or Foe" Relationships & Risk (CSE). 6 sessions • "Parent As First Teachers" programme for pregnant girls and young parents affected by abuse. PAFT support helps parents develop a positive relationship with their child	FREE Donation welcome	0114 268 0580 ywhp@ywhp.org.uk
Golddigger Trust	Golddigger Trust is a Sheffield based Charity, offering a variety of wellbeing projects, both within the school environment, and extra-curricular activities within the community, for young people aged 11-19. Services include: 'Choose Your Own Adventure' – an interactive 1hr lesson for Y9-13 (up to 30 students per lesson), addressing topics of CSE, E-safety, Domestic Abuse and risky relationships. Students journey through a life-sized board game, exploring risks and choices. 'I'm The Girl I Want To Be' and 'Made Of More' Self-esteem and healthy relationships courses (single gender groups of 8-12 students). Creative course exploring issues of esteem, identity, healthy sex and relationships and aspirations for the future, over 8 weeks (1.45-2hr session per week). 1:1 Mentoring – Bespoke, flexible programmes of mentoring for students addressing specific needs identified. Minimum 6 sessions (usual course approx. 8-14 sessions). Students accessing Golddigger Trust services via school can also access additional free services outside of school hours, including drop in youth clubs, sexual health clinic, sports and music sessions and online support.	Cost varies based on service and available charitable funding, contact for most up to date costings. Community based services are free, accessed by community referral (MAST, CAMHS, Self-referral etc). There is no charge to young people.	0114 327 1191 Golddigger Trust Centre For Young People, 10 Psalter Lane, Sheffield, S11 8YN info@golddiggertrust.co.uk www.golddiggertrust.co.uk

Eating Disorders

Overview

Eating disorders are a range of mental health conditions that affect someone physically, psychologically and socially. Eating disorders are not just about food, weight and body image but are a serious psychological illness where an unhealthy relationship with food or body image can be the outward expression of emotional turmoil. Various eating, restricting, bingeing and purging behaviours can become a distraction method or ways of coping with a person's uncomfortable thoughts and feelings. Because of the often secretive nature of the illness, many people suffer for years without their illness being detected.

The most common eating disorders are Anorexia Nervosa, Bulimia Nervosa, Binge Eating Disorder and Other Specified Feeding and Eating Disorders.

Although serious, eating disorders are treatable conditions and full recovery is possible. The number of children and young people with an eating disorder is on the rise and it is clinically proven that those suffering can recover faster when they are treated locally and as soon as possible. We can help to achieve this by raising awareness, building the resilience of our young people through sessions on body image and self-esteem, and by being proactive in supporting someone experiencing difficulties.

Resources

Beat is a national eating disorder charity with a helpline and youthline **www.b-eat.co.uk**.

Our website contains details of all of our services, recovery stories and information of how to self-refer at **www.syeda.org.uk**.

Men Get Eating Disorders Too is a charitable organisation aiming to raise awareness of eating disorders in men **<http://mengetedstoo.co.uk/>**.

Key Facts

- It is estimated that over 725,000 people are affected by an eating disorder in the UK. Amongst those, nearly half suffer from binge eating disorder and other specified feeding and eating disorders, although anorexia nervosa and bulimia nervosa remain prominent. This information comes from a report by national charity Beat which also details the prevalent link between eating disorders and other conditions including depression, obsessive compulsive disorder, personality disorders and substance abuse.
- As many as one in five of the most seriously affected with die prematurely as a result of the illness, making eating disorders the mental illnesses with the highest mortality rate.
- 11% of those affected by EDs are male – this number is rising, and likely to be higher than it appears. Young women (aged 12-20) are a particularly at risk group.
- 33% increase in the over 50s diagnosed with eating disorders.
- Between February 2015 and January 2016 there were 2,703 finished admission episodes, a decrease of 8% from the previous year. The NHS claim that 76% of the admitted cases were for anorexia, 5% for bulimia and 19% for other eating disorders.
- Worryingly, average waiting times for patients vary from 20 to 180 days depending on the trust, putting the lives of people seriously ill with eating disorders at risk.

Eating Disorders

✓ Best Practice

- All staff to be aware of the signs and symptoms of an eating disorder and feel confident about what to do if they are concerned about a young person.
- Pupils with disordered eating or an eating disorder can spot the signs in themselves or their friends and will present themselves to a member of staff with whom they feel comfortable.
- All staff should be aware of the schools process of sharing information about their concerns in order to ensure proper confidentiality and privacy, and to prevent the young person having to explain themselves several times.
- The school to consider developing an eating disorder policy to formally undertake preventative and early intervention strategies for Eating Disorders.

📍 Local Offers and Providers

Provider	What they offer	Cost	Contact details
South Yorkshire Eating Disorders Association (SYEDA).	We offer a range of talking therapies, occupational therapy, complimentary therapy and support groups to anyone 14 and over who is suffering with an eating disorder or whose relationship with body image and food dominates their life. We also offer one-to-one therapy, support groups and courses to friends and family members of those directly affected. We also deliver a bespoke education and training offer to young people and the professionals who work with them, from GPs and nurses to teachers and third sector organisations.	Our Education and Training is a free service. We are currently funded until March 2018 and will seek to secure further funding to continue our service after this. Minimal charges may apply for our services.	Please contact our Education and Training Manager Christie Rossiter. christier@syeda.org.uk (0114) 272 8822
Golddigger Trust	Golddigger Trust is a Sheffield based Charity, offering a variety of wellbeing projects, both within the school environment, and extra-curricular activities within the community, for young people aged 11-19. Services include: 1:1 Mentoring – Bespoke, flexible programmes of mentoring for students addressing specific needs identified. Minimum 6 sessions (usual course approx. 8-14 sessions). Students accessing Golddigger Trust services via school can also access additional free services outside of school hours, including drop in youth clubs, sexual health clinic, sports and music sessions and online support.	Cost varies based on service and available charitable funding, contact for most up to date costings. Community based services are free, accessed by community referral (MAST, CAMHS, Self-referral etc). There is no charge to young people.	0114 327 1191 Golddigger Trust Centre For Young People, 10 Psalter Lane, Sheffield, S11 8YN info@golddiggertrust.co.uk www.golddiggertrust.co.uk

Female Genital Mutilation (FGM)

Overview

Female genital mutilation (FGM) is a procedure where the female genitals are deliberately cut, injured or changed, but where there's no medical reason for this to be done. FGM is also referred to as female circumcision or cutting as well as many other names including: sunna, gudniin and tahur but these other terms have been criticised for underplaying the severity of FGM or being used to justify it. FGM has no health benefits for girls but instead causes adverse effects like severe bleeding, problems urinating, infections and problems in childbirth. FGM is mostly carried out on young girls between infancy and the age of 15. FGM is illegal in the UK and is classed as child abuse. If someone is found guilty of carrying out this procedure (or arranging for it to be carried out – in the UK or elsewhere) on a young girl it can lead to up to 14 years imprisonment.

The justifications for FGM vary between cultures, families and communities. The most common reasons given are:

- Belief that it is a necessary part of raising a girl, it prepares her for adulthood and marriage.
- It is a social norm in many places so FGM is performed so girls are accepted socially in their community as there is a lot of pressure on them to conform.
- FGM is often driven by ideas about acceptable sexual behaviour. It is believed in some communities that FGM ensures premarital virginity and marital fidelity. It is also believed to reduce a woman's libido, to help her resist extramarital sexual acts.
- It is thought that girls must be clean and beautiful so the removal of body parts that are considered unclean, unfeminine or male is promoted.

Signs a young person is at risk or has already undergone FGM include:

- The family belongs to a community that practices FGM and they are preparing their child for a holiday e.g. vaccinations, planning absence from school
- The child has talked about a special procedure/ceremony that is going to take place.
- If the child comes back from a prolonged absence with a behaviour change or bladder/menstrual problems.
- They may find it hard to sit still and complain about pain between their legs.
- If a child has said someone did something to them but they aren't allowed to talk about it.

Key Facts

- An estimated 17,292 children have a female parent who is a • 60,000 girls under 15 are at risk of FGM in the UK¹.
- 137,000 girls and women are living with the consequences of FGM in the UK².
- FGM procedures are usually carried out outside of the UK.
- FGM Protection Orders can be applied for by a local authority; or any other person with the permission of the court (for example, the police, a teacher, a charity or a family member)³.

Female Genital Mutilation (FGM)

✓ Best Practice

Sheffield has an agreed multi-agency pathway – see resources.

If a girl or young woman is at risk of FGM it is important to act swiftly – make a referral to the Sheffield Safeguarding Hub.

If a girl or young woman under 18 discloses that they have undergone FGM it is mandatory to inform the police.

📄 Resources

Sheffield Safeguarding Children Board procedures re. FGM
http://sheffieldscb.proceduresonline.com/chapters/p_female_gen.html?zoom_highlight=FGM

Sheffield FGM pathway
<http://sheffielddact.org.uk/domestic-abuse/resources/pathways/>

Sheffield FGM Strategy
<http://sheffielddact.org.uk/domestic-abuse/resources/local-strategies/>

Government FGM Unit resources and information
<https://www.gov.uk/government/collections/female-genital-mutilation>

Short video explaining different types of FGM and its complications.
<https://www.youtube.com/watch?v=HN1mulqww5g>

Video about FGM. 3 women share their stories plus professional opinions.
<https://www.youtube.com/watch?v=04qAO5ZzZdY>

📍 Local Offers and Providers

Provider	What they offer	Cost	Contact details
Ashiana	Awareness raising and support around harmful practices most prevalent in BME communities (Domestic Abuse, FGM, Forced Marriage, 'honour' based violence, CSE, grooming).	Free	info@ashianasheffield.org 0114 255 5740
Action	Systems of Abuse training for staff (covering HBV, forced marriage and FGM).	Free	http://www.actionorg.uk/domestic-abuse-training/

📖 References

¹ https://www.city.ac.uk/_data/assets/pdf_file/0004/282388/FGM-statistics-final-report-21-07-15-released-text.pdf

² ibid

³ <https://www.gov.uk/government/publications/fgm-protection-orders-factsheet>

Forced Marriage

Overview

As part of UK law everyone has the right to choose who they want to marry and when you want to marry. You don't even have to get married at all! Therefore, forced marriage is when someone experiences physical threats (physical and sexual violence) or they feel emotional/psychological pressure to marry someone they do not want to (e.g. if they are made to feel like they will bring shame to the family if they do not marry the person chosen for them). It is illegal in the UK to take someone abroad to force them to marry someone (even if the marriage doesn't happen they've still broken the law) and it's illegal to marry someone who does not have the mental capacity to consent (children and disabled people) even if they say they want to.

It is important to remember that there is a clear distinction between a forced marriage and an arranged marriage. In arranged marriages, the families of both spouses take a leading role in arranging the marriage, but the choice of whether or not to accept the arrangement still remains with the prospective spouses.

In the UK it's often the case that young people and children are forced into marriage as this is felt it will protect 'family honour'. Other reasons may be to control unwanted behavior in the young person or to maintain cultural beliefs that are often misguided or out of date. It should be noted that another potential reason for a forced marriage is that the child may want to identify as Lesbian, Gay, Bisexual or Transgender and their parents do not agree with them having a same sex relationship.

There are many negative consequences of forced marriage. The most prominent issue is the domestic and sexual abuse that the young person forced into marriage will face – if a young person is forced to consummate a marriage then they have been subject to

rape. The abuse that is endured and the psychological damage of being forced into marriage can lead to serious mental health and wellbeing issues, and in the most extreme cases can even lead to suicide. Young people, especially young women who are forced to marry are much more likely to be made to drop out of school which will affect their development and isolate them from peers.

Key Facts

- 27% of forced marriage cases reported to the Forced Marriage Unit in 2015 involved victims under the age of 18.
- Around 80% of cases involve female victims.
- In 2015 14% of forced marriage cases happened in the UK with no overseas element¹.
- Forced Marriage Protection Orders can be applied for by the person who is to be protected by the order, a relevant third party or any other person with the permission of the court².

Forced Marriage

Best Practice

Report any concerns to the Sheffield Safeguarding Hub as soon as possible.

When there is a risk of Forced Marriage it is important to act swiftly –there may only be one chance to intervene. This is known as the ‘one chance rule’. That is, professionals may only have one opportunity to speak to a victims or potential victim and may possibly only have one chance to save a life. As a result, all professionals working within statutory agencies need to be aware of their responsibilities and obligations when they are faced with forced marriage cases. If the victim is allowed to leave without the appropriate support and advice being offered, that one chance might be wasted.

Local Offers and Providers

Provider	What they offer	Cost	Contact details
Ashiana	Awareness raising and support around harmful practices most prevalent in BME communities (Domestic Abuse, FGM, Forced Marriage, 'honour' based violence, CSE, grooming).	Free	info@ashianasheffield.org 0114 2555740
Action	Systems of Abuse training for staff (covering HBV, forced marriage and FGM).	Free	http://www.actionorg.uk/domestic-abuse-training/ training.group@actionorg.uk

Resources

Sheffield Safeguarding Children Board procedures re. Forced Marriage
http://sheffieldscb.proceduresonline.com/chapters/p_forced.html?zoom_highlight=forced+marriage

Government Forced Marriage Unit resources and information
<https://www.gov.uk/guidance/forced-marriage>

Right to choose campaign short 2 minute clips showing different scenarios to do with forced marriage.

https://www.youtube.com/watch?v=nF2_4uRtHJs

<https://www.youtube.com/watch?v=pSPxOa9tCOI>

<https://www.youtube.com/watch?v=kJbND8seYhE>

<https://www.youtube.com/watch?v=dUdiT5cAVgg>

References

¹ <https://www.gov.uk/government/statistics/forced-marriage-unit-statistics-2016>

² <https://www.gov.uk/apply-forced-marriage-protection-order>

³ Multi-agency practice guidelines: Handling cases of Forced Marriage, HM Government

Gender Equality

Overview

Gender equality is essential for healthy relationships within schools and in wider society locally and globally and so needs to underpin all work on relationships in schools.

According to the UN Commission on the Status of Women, the root of gender-based violence is 'the historical and structural inequality in power relations between women and men' and this is 'intrinsically linked with gender stereotypes that underlie and perpetuate such violence as well as other factors that can increase women's and girls' vulnerability to such violence'¹.

Gender based violence includes domestic abuse, Female Genital Mutilation, Forced Marriage, so called 'Honour' Based Violence, child sexual exploitation, issues around sexual consent and sexual health. Gender stereotyping and norms can also underlie issues to do with eating disorders, self-esteem, bullying, bereavement, housing, mental health, substance abuse, young carers and youth crime.

Gender stereotyping is linked to the enormous pressures on young people to conform to particular body image ideals which children and young people are constantly confronted by through social and other media. It also impacts on young people's ability to recognise and express emotions, with many boys and young men lacking in the emotional literacy that can prevent angry feelings erupting into violence, and sad feelings resulting in suicide.

Key Facts

In a recent survey:

- 22% of girls aged 7-12 had experienced jokes of a sexual nature from boys.
- 12% of girls had seen rude pictures or rude graffiti about girls and women.
- 10% had experienced unwanted touching².

There is extensive evidence that children's perceptions of sex, consent, gender roles and relationships are changing as a result of the pornography they are seeing. Research with over 1,000 16-21 year-olds in 2014 found that:

- Almost a quarter of young people were 12 years old or younger when they first saw porn online (24.6%), and 7.3% were under 10.
- The majority of young people (60%) were 14 years old or younger when they first saw porn online—although 62% said they first saw it when they weren't expecting to, or because they were shown it by someone else.
- Only 22% of those surveyed say they were looking for it on purpose³.

The End Violence Against Women YouGov Poll carried out in October 2010⁴ with a representative sample of 788, 16-18 year olds revealed that:

- 71% of all 16-18-year-olds (i.e. boys and girls) say they hear sexual name-calling with terms such as "slut" or "slag" towards girls at schools daily or a few times a week.

Key Facts (cont)

- Close to one in three (29%) 16-18-year-old girls say they have experienced unwanted sexual touching at school.
- Close to one in three (28%) of 16-18-year-olds say they have seen sexual pictures on mobile phones at school a few times a month or more.
- In 2012 the NSPCC said 'One of the key findings of this research highlights the extent to which gendered power relations saturate the young people's lives. No understanding of sexting would be complete without an appreciation of the extent to which an often completely normalised sexism constitutes the context for all relationships both on and off-line.
- deeply rooted notion that girls and young women's bodies are somehow the property of boys and young men.
- 'boys' failure to perform a particular kind of macho masculinity carries with it the risk of being labelled 'gay': "If they had a picture of a girl naked and you told them "That's wrong" they will think straight away you are gay.'" (Focus group, year 10 boy)⁵.

References

¹ [http://www.un.org/womenwatch/daw/csw/csw57/CSW57_Agreed_Conclusions_\(CSW_report_excerpt\).pdf](http://www.un.org/womenwatch/daw/csw/csw57/CSW57_Agreed_Conclusions_(CSW_report_excerpt).pdf)

² Written submission from Girl Guiding to House of Commons, Women and Equalities Committee Sexual Harassment and Violence in Schools, Third report of Session 2016-2017 HC 91 Published on 13 September 2016 by authority of the House of Commons <https://www.publications.parliament.uk/pa/cm201617/cmselect/cmwomeq/91/91.pdf>

³ <https://www.publications.parliament.uk/pa/cm201617/cmselect/cmwomeq/91/91.pdf>

⁴ <http://www.endviolenceagainstwomen.org.uk/yougov-poll-exposes-high-levels-sexual-harassment-in-schools/>

⁵ NSPCC (2012) A Qualitative Study of Children, Young People and 'Sexting', A report prepared for the NSPCC by Institute of Education, London King's College, London School of Economics, Open University available at http://www.nspcc.org.uk/inform/resourcesforprofessionals/sexualabuse/sexting-research_wda89260.html

Resources

Website of DECSY's Gender Respect Project.

<https://genderrespect2013.wordpress.com/>

Includes teaching materials for EYFS, Primary and Secondary; background information; scoping study of children and young people's attitudes to gender issues in Sheffield and soon to be developed guidance on whole school development: Gender Equality Charter Mark for secondary schools.

Local Offers and Providers

Provider	What they offer	Cost	Contact details
Development Education Centre South Yorkshire (DECSY)	Training for teachers and other professionals, resources, projects.	Training fee: £600 per day	helen.griffin@decsy.org.uk
Golddigger Trust	Golddigger Trust is a Sheffield based Charity, offering a variety of wellbeing projects, both within the school environment, and extra-curricular activities within the community, for young people aged 11-19. Services include: 1:1 Mentoring – Bespoke, flexible programmes of mentoring for students addressing specific needs identified. Minimum 6 sessions (usual course approx. 8-14 sessions). Students accessing Golddigger Trust services via school can also access additional free services outside of school hours, including drop in youth clubs, sexual health clinic, sports and music sessions and online support.	Cost varies based on service and available charitable funding, contact for most up to date costings. Community based services are free, accessed by community referral (MAST, CAMHS, Self-referral etc). There is no charge to young people.	0114 327 1191 Golddigger Trust Centre For Young People, 10 Psalter Lane, Sheffield, S11 8YN info@golddiggertrust.co.uk www.golddiggertrust.co.uk

Healthy Relationships

Overview

The types of relationships we have impact on all areas of our lives whether these are family relationships, friendships, relationships with people in authority, relationships with people in organisations we belong to or young people's intimate partner relationships.

It is important that all members of a school community (staff, volunteers, parents/carers and pupils/students) have a clear understanding of what constitutes a healthy relationship.

What makes a healthy relationship?

- Fairness/equality.
- Separate identities.
- Good communication.
- A sense of playfulness/fondness.
- Mutual respect.
- Trust.
- Honesty.
- Support.

Unfortunately we know that there are many adults, children and young people in Sheffield that are experiencing unhealthy relationships where people are bullied, controlled or abused.

People don't always recognise that the relationship is unhealthy, or if they do they may not know what to do about it. They may not realise there is support available or if they do, they may not have the confidence to ask for help. Some adults or children and young people experience threats or intimidation which can mean they are less likely to come forward. Or they are frightened that they will not be believed or are worried about what will happen next. For some people cultural barriers can increase fear and isolation, although it's important to remember not to make generalisations.

Abuse can take place in all communities.

Think about how you can incorporate healthy relationships in:

- curricular or non-curricular activity.
- your code of conduct .
- PSHE provision.
- sex and relationship education or equivalent.

Resources

The Sheffield Young People and Domestic Abuse pathway and traffic light tool can be found here:

<http://sheffielddact.org.uk/domestic-abuse/resources/children-young-people/>

Resources for children and young people from Women's Aid
<http://thehideout.org.uk/>

Resources for young people from government campaign <https://www.disrespectnobody.co.uk/>

Website aimed at young women by Women's Aid
<http://www.lovedontfeelbad.co.uk/>

Educational Toolkit
<https://www.womensaid.org.uk/what-we-do/safer-futures/expect-respect-educational-toolkit/>

PSHE Association
<https://pshe-association.org.uk/curriculum-and-resources>

Healthy Relationships

Key Facts

Unhealthy relationships are relationships in which physical, sexual, psychological, or emotional abuse take place. Many unhealthy relationships can be avoided by helping children and young people to develop skills to create healthy relationships and by teaching them to recognize the signs of unhealthy relationships.

Signs of an unhealthy relationship are where you:

- Put one person before the other by neglecting yourself or your partner.
- Feel pressure to change who you are for the other person.
- Feel worried when you disagree with the other person.
- Feel pressure to stop activities you usually/used to enjoy
- Pressure the other person into agreeing with you or changing to suit you better.
- Notice one of you has to justify your actions (e.g., where you go, who you see.)
- Notice one partner feels obligated to have sex or has been forced.
- Have a lack of privacy, and may be forced to share everything with the other person.
- You or your partner refuse to use safer sex methods.
- Notice arguments are not settled fairly.
- Experience yelling or physical violence during an argument.

- Attempt to control or manipulate each other.
- Notice your partner attempts to control how you dress and criticises your behaviour.
- Do not make time to spend with one another.
- Have no common friends, or have a lack of respect for each others' friends and family.
- Notice an unequal control of resources (e.g., food, money, home, car, etc.).
- Experience a lack of fairness and equality.

Best Practice

Good practice guides:

Ofsted <https://www.gov.uk/government/publications/learning-about-healthy-relationships-abuse-and-consent>

National Children's Bureau <https://www.ncb.org.uk/resources-publications/resources/whole-school-framework-emotional-well-being-and-mental-health>

Healthy Relationships

Local Offers and Providers

Provider	What they offer	Cost	Contact details
SAYit	Staff training, group work with students, peer education sessions for students, one to one work (including peer mentoring), assemblies, support to develop and run Gay Straight Alliance groups about sex and relationships.	All primary work and any work that exceeds the capacity of our funded work must pay. - £250+ for whole day of workshops to classes. £175 for 2.5 hour staff training. £25 for one assembly. 1-1 work - £10 per session, £40 for block of six sessions. - Unlimited package - £1000 per year: assemblies and workshops for up to 3 year groups, 2 training sessions for teachers in HIV and LGBT awareness, staff/management support in work with pupils and teachers, support in developing LGBT friendly and HIV friendly policies and procedures, unlimited one-to-one support for pupils.	judy@sayouthtrust.org.uk 0114 241 2728
Development Education Centre South Yorkshire (DECSY)	Resources on gender equality: training for teachers - groups. Individual support to teachers using resources via website	Website materials open to any teacher. Option to join DECSy and get more resources on other teaching areas (costs).	0114 241 2750 info@decsy.org.uk http://www.decsy.org.uk/ https://genderrespect2013.wordpress.com/home/

Healthy Relationships

Local Offers and Providers (cont)

Provider	What they offer	Cost	Contact details
Talkabout	Group work, Teacher Training on sex and relationships.	£100 per session or £250 for a day.	talkaboutconsent.co.uk@gmail.com 07982 722 811
Golddigger Trust	Golddigger Trust is a Sheffield based Charity, offering a variety of wellbeing projects, both within the school environment, and extra-curricular activities within the community, for young people aged 11-19. Services include: 1:1 Mentoring – Bespoke, flexible programmes of mentoring for students addressing specific needs identified. Minimum 6 sessions (usual course approx. 8-14 sessions). Students accessing Golddigger Trust services via school can also access additional free services outside of school hours, including drop in youth clubs, sexual health clinic, sports and music sessions and online support.	Cost varies based on service and available charitable funding, contact for most up to date costings. Community based services are free, accessed by community referral (MAST, CAMHS, Self-referral etc). There is no charge to young people.	0114 327 1191 Golddigger Trust Centre For Young People, 10 Psalter Lane, Sheffield, S11 8YN info@golddiggertrust.co.uk www.golddiggertrust.co.uk
YWHP Sexual Abuse Support Service (Young Women's Housing Project)	Our "Protect Yourself" initiative includes group-work programmes and/or one to one sessions for girls and young women. • "Escape the Trap" Teenage Relationship Abuse Programme. 8 sessions (ASDAN accredited) • "Friend or Foe" Relationships & Risk (CSE). 6 sessions • "Parent As First Teachers" programme for pregnant girls and young parents affected by abuse. PAFT support helps parents develop a positive relationship with their child	FREE Donation welcome	0114 268 0580 ywhp@ywhp.org.uk

Honour Based Violence

Overview

So called 'Honour' based violence (HBV) is a violent crime or incident that has been committed against a partner or family member where the perpetrator or perpetrators use the excuse that they were protecting or defending the 'honour' of the family or community. HBV can also be referred to as 'Izzat' which means 'shame' in some communities. It is often linked to a belief that someone has brought shame onto their family or community that goes against the traditional beliefs of their culture. Examples of excuses for 'honour' based violence include: having a partner / boyfriend / girlfriend who is from a different culture or religion; rejecting an arranged marriage and wearing clothes that are not considered part of the traditional culture.

Women and girls are more likely to be victims of 'honour' based violence but it can also affect boys and men. 'Honour' based crimes can include: physical abuse, threats of violence and forced marriage. Any type of 'honour' based violence is against the law so all types should be reported! A child or young person who is at risk of 'honour' based violence is at significant risk of physical harm (including being murdered), and / or neglect. They may also suffer significant emotional harm, as a result of a threat of violence or witnessing violence directed towards a sibling or other family member.

Key Facts

- HBV estimates are not currently available as this is not a specific crime, although a 2012 IKWRO¹ report using police recorded information suggested around 3,350 incidents are reported to the police per year but a further IKWRO report in 2014 found that only four out of five police forces reported these incidents as HBV, therefore the 3,350 is likely to be underestimation of reported incidents by up to 20%.
- Local Sheffield providers reported that they were supporting 107 people affected by HBV in 2016².
- 41 HBV cases were heard at Sheffield MARAC in 2016³.

Best Practice

Report any concerns to the Sheffield Safeguarding Hub as soon as possible.

When there is a risk 'honour' based violence it is important to act swiftly – there may only get one chance to intervene. This is known as the 'one chance rule'.⁴ That is, professionals may only have one opportunity to speak to a victim or potential victim and may possibly only have one chance to save a life. As a result, all professionals working within statutory agencies need to be aware of their responsibilities and obligations when they are faced with 'honour' based violence cases. If the victim is allowed to leave without the appropriate support and advice being offered, that one chance might be wasted.

Honour Based Violence

References

¹ Iranian and Kurdish Women's Rights Organisation

² <http://sheffielddact.org.uk/domestic-abuse/wp-content/uploads/sites/3/2017/08/Part-1-Section-9-Harmful-cultural-practices-FINAL.pdf>

³ Ibid

⁴ Multi-agency practice guidelines: Handling cases of Forced Marriage, HM Government

Resources

Sheffield Safeguarding Children Board procedures re. 'Honour' Based Violence

http://sheffielddscb.proceduresonline.com/chapters/p_honour.html?zoom_highlight=honour+based+violence

Charity website that explains 'Honour' based violence and provides support to victims e.g. helpline.

<http://www.haloproject.org.uk/>

'Honour'based violence victims story.

<https://www.youtube.com/watch?v=hObICnCK-Fc>

Karma Nirvana is a charity supporting victims of 'Honour' Based Abuse and Forced Marriage. <http://www.karmanirvana.org.uk/>

Local Offers and Providers

Provider	What they offer	Cost	Contact details
Action	Systems of Abuse training for staff (covering HBV, forced marriage and FGM).	Free	http://www.actionorg.uk/domestic-abuse-training/ training.group@actionorg.uk
Ashiana	Awareness raising and support around harmful practices most prevalent in BME communities (Domestic Abuse, FGM, Forced Marriage, 'honour' based violence, CSE, grooming).	Free	info@ashianasheffield.org 0114 255 5740

Housing & Supported Accommodation

Overview

Research has identified a number of factors associated with high risk of homelessness among young people including: “experiencing abuse or neglect; experiencing domestic violence, mental health or substance issues within the family home; running away as a child; truanting or being excluded from school; leaving school with no qualifications; having learning disabilities; and being a lesbian, gay, bisexual or transgender young person.”¹

It is crucial that young people at risk of homelessness get early support to inform them about their choices and options and to help them to access accommodation services at the right time. The number of young people reaching the tipping point of homelessness in Sheffield has been falling over recent years but young people continue to form a relatively high proportion of the total number of people who present to the Council’s Housing Solutions as homeless, and the number of 16-25’s accessing supported accommodation. It is important to note that the incidence of homelessness among young people is likely to exceed official statistics because it is often masked, for example as ‘staying with friends’. This description can cover a wide range of circumstances from relatively safe temporary arrangements to significantly unstable accommodation and downright dangerous situations of exploitation.

References

^{1,2} B. Watts, S. Johnsen and F. Sosenko, Youth Homelessness in the UK (Herriot-Watt University: 2015).

³ <http://www.homeless.org.uk/connect/news/2013/jun/21/report-calls-for-action-to-prevent-homelessness-for-next-generation>

⁴ <https://www.gov.uk/government/collections/homelessness-guidance>

Key Facts

- The main reported reason why young people become homeless in Sheffield and nationwide is because their parents or families are unable to or no longer wish to house them. This can be for a number of reasons including clashes within the home, overcrowding, pregnancy, parental ill-health, financial pressures, breakup of parents’ relationship, introduction of parent’s new partner, problematic parental or young people’s behaviour, etc.
- In 2015-16 Housing Solutions dealt with 438 homeless presentations by young people aged between 16 and 25, 310 of whom were single young people.
- Generally research indicates that the best outcomes for young people are achieved by those who remain living in the family home, where it is safe to do so, and for those who leave home in a planned way only when they are ready in terms of their emotional, practical and financial wellbeing.^{2,3}
- All 16/17 year olds who present as homeless to the Council are jointly assessed by a housing officer and a children’s social worker.
- It is now possible to identify the secondary schools attended by young people who later became homeless, although this is not routinely monitored.

Housing & Supported Accommodation

Best Practice

Statutory Guidance - *Homelessness Code of Guidance for Local Authorities 2006*⁴ (Department for Communities and Local Government, the Department for Education and Department for Health) identifies that young people who are at risk of exclusion from education are more at risk of becoming homeless. It suggests that one way to tackle common causes of homelessness is by housing authorities working with local schools to provide young people with information about the implications of leaving home and the housing choices available to them. The following local agencies offer help and advice on specific matters, and the list of local offers and providers highlights who will do work in schools around homelessness.

Local Housing & Support Agencies

Sheffield City Council, Housing Solutions – Provides advice and help for anyone aged 16 years and above who is homeless or is at risk of becoming homeless in the near future, or has a housing problem that they need help to resolve. Call Housing Advice and Options line on 0114 273 6306 during Monday-Friday 8.30am to 5pm or in case of an emergency out of hours please call 0800 731 1689. Email HousingSolutionsGeneric@sheffield.gov.uk

Sheffield City Council, Permanence and Through Care – Provides statutory social care duties to maximise outcomes for looked after children and care leavers. Call 0114 203 9060 / Email PermanenceThroughCareService@sheffield.gov.uk

Sheffield City Council, Sheffield Safeguarding Hub – Provides a single point of access for concerns about vulnerable children, young people and young adults who have complex needs or who may be at risk of harm. Lines are open 24/7 call: 0114 273 4855.

Sheffield Futures, YIACS (Youth Information Advice Counselling Service) – Provides a single access point for holistic advice and counselling for young people in a youth-friendly environment. Trained staff support young people to access appropriate services including accommodation services. This service launches fully in autumn 2017. Further information from Sheffield Futures on 0114 201 2800.

Roundabout Homeless Prevention Service – Provides advice for young people about housing options, from planned moves to emergency accommodation. Roundabout also has a mediation service and will work to reconnect young people with their families. Call 0114 272 8424 or drop in Monday-Friday 10am-4:30pm at 22 Union St, Sheffield, S1 2JP.

Shelter Housing Advice & Information Resource – Provides advice on housing related matters via drop in and appointment. Call 0344 515 1515 or drop in Monday-Friday 9am-5pm at 48 Furnival Gate, Sheffield, S1 4QP. Email sheffield_hub@shelter.org.uk

Housing & Supported Accommodation

Local Offers and Providers

Provider	What they offer	Cost	Contact details
Roundabout	Peer Education – interactive session about youth homelessness, the facts and real life stories from trained young people who have experienced homelessness themselves.	Aimed at Y10 and Y11 pupils. Could be an assembly slot but prefer x 3 full class sessions, duration flexible from 40 minutes to 1 hour.	Free
	Mediation – mediation worker delivers an introduction to mediation, will see pupils in school or at Roundabout's Prevention Service (details above).	Sessions are usually weekly, but service is needs led, and there is no time restriction on delivery.	Free
De Paul Nightstop	The service aims to be an option for agencies, to directly prevent rough sleeping, or keep people from staying in unsafe places.	Free, safe accommodation for people that are in housing crisis or homeless aged from 16 to 25 in the homes of trained and vetted volunteers, on a night by night basis.	Free
Cathedral Archer Project	Briefing session/awareness raising.	Assembly slot or short talk about homelessness and the impact of the pupils' donations especially around Harvest time.	Free to Primary or Secondary schools

Housing & Supported Accommodation

Local Offers and Providers (cont)

Provider	What they offer	Cost	Contact details
Safe at Last (Depaul UK)	Education and Prevention Programme – aims to educate and inform children and young people about keeping safe, the risks and dangers of running away and alternative choices for support.	Interactive sessions with a 30 minute performance and 30 minute workshop – these times and themes/topics can vary. Suitable for assemblies.	Bespoke packages can be created starting at £250.
	One to one support sessions – for those at risk of running away or who have run away from home.	Range of support including conflict, bereavement, family relationship breakdown, anti-social behaviour, criminal activity, mental health, emotional well-being and more.	Free
	Family Support – delivering family support work to parents/carers of children and young people that have run away.	Family Support Workers provide emotional and practical help and advice to families who are experiencing long or short term difficulties. They help them to access support from other services as appropriate.	Free

LGBT+ Young People

Overview

Recent surveys have found that up to 20% of people under the age of 30 identify as LGBT+, with 12% identifying outside the gender binary as either transgender or gender-nonconforming. Attitudes towards LGBT+ people have also become more accepting in recent years.

However, LGBT+ young people continue to experience disproportionate levels of mental ill health, poverty, homelessness, bullying and abuse, and many do not get the support they need.

Key Facts

- More than half of lesbian, gay and bisexual students have experienced homophobic bullying.
- 99% of lesbian, gay and bisexual young people hear the phrases 'that's so gay' or 'you're so gay' in school.
- Only half of lesbian, gay and bisexual students report that their schools say homophobic bullying is wrong.
- 86% of secondary school teachers say children and young people, regardless of their sexual orientation, experience homophobic bullying.
- 92% of secondary school teachers believe that school staff have a duty to tackle homophobic bullying.
- 80% of teachers have not had any specific training on how to tackle homophobic bullying.
- 83% of trans young people say they have experienced name-calling and 35% have experienced physical attacks.
- 32% of trans young people say they have missed lessons due to discrimination or fear of discrimination.
- 52% of LGBT young people have self-harmed, compared with 9% of non-LGBT+ peers.
- 23% of lesbian, gay and bisexual young people have tried to take their own life.
- 48% of trans young people have attempted suicide, and 59% say they have considered doing so.
- LGBT pupils who don't feel they have an adult to talk to are much more likely to have symptoms of depression than those who do have an adult to talk to.

LGBT+ Young People

Good Practice

The public sector Equality Duty requires all schools in England to eliminate discrimination on the grounds of sexual orientation and gender reassignment. Schools must promote equality of opportunity and foster good relations. This means schools need to tackle homophobic, biphobic and transphobic bullying, and need to take proactive steps to support LGBT+ students and promote acceptance, respect and understanding of LGBT+ people and issues across the whole school community. (The Equality Act 2010)

The Department for Education requires all schools to publish information to show how they are complying with this duty. Schools should set and publish specific and measurable equality objectives, for example reducing levels of homophobic, biphobic and transphobic bullying.

This means that schools must protect any student taking steps to reassign their sex, whether those steps are social (for example changing their name, the pronoun they prefer and the way they dress or look) or include medical intervention (for example accessing hormone therapy or having surgery).

Schools have a duty to promote the safety and well-being of all children and young people in their care, including those who are lesbian, gay, bisexual and trans and those experiencing homophobic, biphobic or transphobic bullying. (Education and Inspections Act 2006)

Ofsted inspectors are explicitly directed to look at a school's efforts to tackle bullying based on sexual orientation and gender identity. They may also look at how the school supports the needs of distinct groups of students, such as lesbian, gay, bisexual and trans students.

Resources

Getting started A toolkit for preventing and tackling homophobic, biphobic and transphobic bullying in secondary schools

http://www.stonewall.org.uk/sites/default/files/getting_started_-_a_toolkit_for_secondary_schools.pdf

Getting started A toolkit for preventing and tackling homophobic, biphobic and transphobic bullying in primary schools

http://www.stonewall.org.uk/sites/default/files/getting_started_toolkit_-_primary.pdf

<http://www.stonewall.org.uk/media/lgbt-facts-and-figures>

https://www.stonewall.org.uk/sites/default/files/an_introduction_to_supporting_lgbt_young_people_-_a_guide_for_schools_2015.pdf

Mental Health

https://www.stonewall.org.uk/sites/default/files/Mental_Health_Stonewall_Health_Briefing_2012_.pdf

LGBT+ Young People

Local Offers and Providers

Provider	What they offer	Cost	Contact details
SAYIT	For LGBT+ young people - 1:1 support plus: • Fruitbowl – For LGBT young people under the age of 18 we run weekly social and support groups offering activities and opportunities to help to support young people's identity and peer support networks. • Off the Scene – For LGBT young people aged 18 - 25. • HIV Group – Support & social opportunities for young people living with HIV. • Youth Action Groups – e.g: Art Activism, Campaigning. For schools and youth groups: • Staff training on LGBT+ inclusive SRE; specific training on LGBT+ awareness; HIV and Sexual Health training. • Education sessions with young people on LGBT+ awareness, Sexual Health and HIV. • Assemblies. • Support to develop and run Gender and Sexuality Alliances. • Consultancy for schools on creating inclusive environments.	Some of SAYIT's work is funded. Details on enquiry. SAYIT has to charge for work not funded – details on application	info@sayit.org.uk 0114 241 2728
Interchange Counselling	Emotional Well Being and Mental Health counselling support for Children and Young People up to 25 years.	No charge to service users. Referrers can fund counselling - prices available on request	0114 201 6672 teri.connolly@interchangesheffield.org.uk www.interchangesheffield.org.uk

Menstruation

Overview

Menstruation is a vital sign. Like blood pressure, resting heart rate or temperature, it can indicate good health or illness. Periods are an ordinary biological function that are part of the reproductive cycle.

Due to a long history of taboos and stigmas around attitudes to reproductive health in general and periods in particular, this topic can produce some anxiety for teachers, parents, carers and young people. Some of this comes from historical and cultural taboos that are passed down from one generation to the next, but for the past century or so media advertising has also played an influential role.

Advertising messages can make their way into schools in the form of leaflets and free lesson materials from major multinational corporations that manufacture and sell disposable menstrual products. By not questioning the messages we have received or not teaching young people how to do so, teachers, parents and carers can accidentally transmit the message that periods are bad or should be kept secret. It is important to ensure that we “catch up” on our own learning so we can pass on the most valuable, evidenced-based, accurate information to young people in a way that dispels myths and actively challenges taboos.

Encouraging an atmosphere where young people of all genders can speak freely about periods supports a better overall attitude to the changes of puberty as well as a positive sense of wellbeing. It can lead to better focus in the classroom and more open conversations with parents and carers, and it may also help with early diagnosis of STIs, womb-related cancers and other illnesses. A positive attitude around menstruation helps to create an atmosphere in which young people will feel more supported to seek medical help for reproductive health-related medical conditions such as endometriosis.

It is important to remember that while most people who menstruate are girls and women, not all women do for medical or physiological reasons, and some people who menstruate may be trans, non-binary or intersex.

Taboos & Myths

In the past, menstruation management in western culture was practical and, while not necessarily as convenient as today, did not carry the negative connotations that have built up over the past hundred years or so. While historic taboos evolved from religious customs, superstitions and inaccurate medical beliefs, the 20th century saw a focus on advertising influencing most of the public discourse around menstruation. Companies selling disposable menstrual products found it lucrative to send a representative into schools, offer schools free samples, and even provide mothers, teachers and school nurses with branded educational booklets. This still goes on today, and in many schools across the country one can still find these materials. Market research companies issue reports that recommend companies continue doing this to gain loyal customers, and experts reviewing or vetting these resources frequently find them lacking valuable information.

References

¹ https://www.city.ac.uk/_data/assets/pdf_file/0004/282388/FGM-statistics-final-report-21-07-15-released-text.pdf

² *ibid*

³ <https://www.gov.uk/government/publications/fgm-protection-orders-factsheet>

Menstruation

Biology Glossary

Cervix The lower part of the uterus that contains the opening to the vagina.

Clitoris Organ providing sexual pleasure, part of which is visible just inside the top of the labia.

Discharge Fluid produced by glands in the cervix or vagina that indicate different states of health, eg fertility, arousal, infection. Most discharge is healthy and normal. Some kinds can indicate an infection. Healthy discharge shouldn't be itchy or painful, but unhealthy discharge can be (although some infections may go unnoticed because they have no symptoms).

Endometrium The blood and tissue that line the uterus.

Fallopian tubes The tubes that eggs travel along from the ovaries to the uterus.

Hormones Chemicals in the body that control various biological functions.

Labia The inner and outer folds of the vulva.

Luteinising hormone The hormone that triggers ovulation.

Menarche When someone begins their very first menstrual cycle.

Menopause The time in life when menstrual cycles end, around age 50 - 55.

Menstrual cycle The menstrual cycle is everything from preparing for ovulation to menstruation and round again.

Menstruation When the uterus sheds its lining, resulting in bleeding from the vagina.

Menstruator A person who menstruates.

Oestrogen The hormone that triggers egg maturation.

Ovaries The organs that store and mature eggs inside the body.

Ovulation When an egg is released from the ovaries.

Ovum An egg cell which, if fertilised by sperm, can implant into the uterine wall, leading to pregnancy.

Premenstrual dysphoric disorder (PMDD) Severe and debilitating physical and emotional symptoms experienced before or at the start of each cycle.

Premenstrual tension (PMT) Minor to moderate physical and emotional symptoms experienced in the run-up to and sometimes during the start of each cycle.

Progesterone The hormone responsible for the build-up of the uterine lining.

Puberty The time at which young people's bodies change, when they mature into young adults and become able to reproduce.

Toxic shock syndrome (TSS) A very serious bacterial infection that studies have linked to tampon use.

Uterus An organ inside the body that grows a lining to protect an egg each month. If the egg is fertilised it implants into the wall of the uterus at the start of pregnancy.

Vagina Internal passage to the uterus.

Vulva External genitalia consisting of the clitoris and labia – not to be confused with the vagina.

Key Facts

- 1 in 4 young people don't learn about menstruation in school lessons before they reach puberty.¹
- Young women aged between 18-24 are four times less likely to go to a doctor about a sexual health issue than women aged between 55-64.²
- A quarter of young women avoided their doctor purely because they didn't know what words to use, while 44% did so out of a reluctance to discuss sexual health issues.²
- 65% of women say they would feel uncomfortable carrying disposable menstrual products openly to the toilet, but only 14% of men said they would feel uncomfortable seeing someone carrying a menstrual product to the toilet.³
- In a report by the Bolton NHS Foundation Trust in 2010, "menstruation problems" were the fifth most common reason given for school absence.⁴
- The average menstruator will use 11,000 menstrual products in their menovulatory lifetime, and 4.3 billion disposable menstrual products are used per year in the UK.⁵

References

¹ Sex Education Forum Prepared for Puberty Project (NCB 2016) www.sexeducationforum.org.uk/policy-campaigns/the-puberty-issue.aspx

² Ovarian Cancer Action Survey, 2015 www.telegraph.co.uk/women/womens-health/11807083/Ovarian-cancer-Sex-vagina-and-orgasm-feats-put-women-off-seeing-GP.html?placement=CB2

³ WaterAid Survey, 2017 www.wateraid.org/uk/media/prudish-about-periods-new-survey-reveals-nations-awkwardness-around-periods-as-wateraid

⁴ Davies, J., & Hindley, D. (2010). Managing frequent medical absences from school. Archives of Disease in Childhood. <https://doi.org/10.1136/adc.2009.176651>

⁵ Menstruation and Sanpro/Femcare Market Facts and Fig's, AHPMA www.ahpma.co.uk/docs/Menstruation%20Facts%20and%20Figs.pdf

Menstruation Management

There are four types of menstrual products: internal, external, disposable and reusable.

Most people are familiar with disposable menstrual products like pads, tampons and panty liners. These are used once and thrown away. There are many different brands, varieties and material variations, and it may take time to find one that is the right price and the right design for each menstruator. Companies work hard to advertise these products as part of a very profitable industry.

Reusable menstrual products are gaining popularity because they are good for the environment and for personal budgets. These include menstrual cups, which are inserted into the vagina to collect blood. They are designed to be taken out, rinsed or wiped with loo roll and reinserted. Cloth pads are also reusable and are often familiar to those who use cloth nappies. They can be bought or homemade. Period pants are underwear with a built-in absorbent fabric layer – they absorb a light flow of blood and then can be washed and worn again.

Internal menstrual products, such as tampons and menstrual cups, are used inside the vagina.

External menstrual products, such as disposable pads, cloth pads and period pants, are worn outside the body.

Menstruation

Best Practice

A big shift in how we currently approach the topic of menstruation is needed so that young people can focus on their schoolwork, exams and activities rather than worrying about menstruation management.

Reflect on your own attitudes to menstruation and when and how they may have formed. Develop your own knowledge so that, if approached, you can confidently support young people with their menstruation queries.

Carry out an audit of your school or organisation to ensure that menstruation management is made easy and practical.

Ensure that toilets accommodate people who menstruate by providing small pedal bins (including in the men's, unisex and disabled toilets) and that there is soap, hot water and drying facilities. In schools, allow pupils to go to the toilet when needed, and ensure that toilets are unlocked at all times.

Provide a range of free menstrual products that are easily accessible. Do not use one brand or promote free samples or lessons with logos – this can unduly influence young people and may promote advertising tactics that use shame and secrecy.

Try not to make assumptions about who has periods. Whether for physiological, gender identity, trauma or medical reasons, be sensitive to individuals. For trans and non-binary-identifying young people (who may not have indicated their gender identity to all staff), gender-neutral language can be critical to ensuring they receive valuable information that does not exclude.

When teaching about or providing menstruation management, show examples of a range of several different brands, styles and types of

reusable and disposable menstrual products.

Use teachable moments to remove any sense of secrecy around menstruation. Be alert for off-the-cuff opportunities and avoid expressing disgust, as that creates a sense of shame about periods. How you handle these moments sets the tone – humour, neutrality and matter-of-factness work well – and ignoring these incidents can speak volumes.

Make menstruation education into an ongoing conversation rather than a “big talk”.

Resources

A resource for gauging your own or young people's attitudes to menstruation <https://periodpositive.files.wordpress.com/2014/05/how-periodpositive-are-you.jpg>

A short video demonstrating the Menstrual Product Mambo for teaching the four types of menstrual products <https://vimeo.com/143278862> and dance steps projector slide <https://periodpositive.files.wordpress.com/2016/02/menstrual-product-mambo1.jpg?w=1680>

A resource booklet with photos explaining how to change a pad for young people with learning disabilities www.me-and-us.co.uk/ppg/ichangemypad.html

STAINS™ – activities based around Chella Quint's spoof company combating leaking taboos and promoting confidence in menstruators to “reclaim the stain” www.stainstm.com

Resources (cont)

The education resource magazine for the Wellcome Trust and Sex Education Forum co-produced Prepared for Puberty Project edition of the Sex Educational Supplement magazine **www.sexeducationforum.org.uk/sex-educational-supplement**

An audit you can use in a school/college/workplace to ensure that there is supportive provision for menstruation management **<https://periodpositive.files.wordpress.com/2016/02/sef-period-positive-prepared-for-puberty.pdf>**

A flowchart for finding the right words to use when including trans and non-binary menstruators **<https://periodpositive.files.wordpress.com/2016/02/queeriods-lgbt-stem-poster-feb-2016.pdf>**

Menstruation Education Should Be

- Free, unbranded, objective, inclusive of reusables (like menstrual cups and cloth pads), evidence-based, and easy to understand.
- Consistently taught by trained staff, factually accurate, up-to-date and well-researched, with learners' needs in mind, and regularly evaluated with pupils and menstruation education practitioners, including excellent communication with other departments, parents and community partners about the content of lessons.
- Aimed at different age groups, starting well before puberty (and ensuring the use of correct names for body parts, even with very young children) and revisited regularly.

- Inclusive of all genders, cultures, abilities and sexualities (the way all high-quality RSE should be), with adapted resources where appropriate.
- Supportive of easy menstruation management in school and equipped to signpost diverse and effective ways of menstruation management now and in future, including offering as-needed disposable menstrual products and ensuring that pupils are made aware of reusables and supported in using them.
- Delivered in planned curriculum lessons, as well as in teachable moments as they arise.
- Actively challenging messages of shame in media, advertising, current cultural discourse etc through activities that teach media literacy.
- Avoid using euphemisms like "Aunt Flo" or "sanitary products" – reinforce the use of correct terms: "menstruation", "period" and "menstrual products".
- Able to scaffold and complement lessons on fertility, puberty and reproductive health, with an awareness of physiological differences and medical conditions related to reproductive health and of healthy menstrual cycles as a vital sign.
- Supported more comprehensively across the curriculum, particularly in science and PSHE but also in media studies, PE, maths, graphics and textiles.

Menstruation

Local Offers and Providers

Provider	What they offer	Cost	Contact details
#period positive	A one-year pilot programme taking schools through a new #periodpositive Schools Charter, including school audit, free training for whole staff/subject specialists, advice for parents, workshops for young people and peer leaders, evaluation and monitoring.	Free for partner schools and organisations in Sheffield.	#periodpositive Contact: Chella Quint 07497 593 968 http://www.periodpositive.com chellaquint@gmail.com
	Training for schools, teacher training programmes, charities and private companies hoping to improve their menstruation awareness or prevent period poverty.	Free or reduced cost for qualifying organisations, £250 day rate within the local area.	
	Menstruation 101 workshops for young people, young adults and parents of adolescents as a fun and interactive “catch-up” session.	Contact for details on costs of performances, bespoke events or provision outside the local area.	
	Adventures in Menstruating touring comedy show for young people and adults and accompanying workshops.		

Overview

Mental health is a wide subject but in basic terms it is a person's emotional, psychological, and social well-being. Your mental health can affect how you think, feel, and act. It also determines how people handle stress, relate to others, and make choices. Mental health is important at every stage of life, from childhood and adolescence through adulthood. The causes for mental health problems vary from one person to another and can include: biological factors, such as genes or brain chemistry; life experiences and/or family history of mental health problems. Mental health can be affected by common experiences like relationship difficulties, loss, confidence and self-esteem, exam stress, as well as trauma or abuse.

These are some early signs to look out for if someone has deteriorating mental health:

- Eating or sleeping too much or too little.
- Pulling away from people and usual activities.
- Having low or no energy.
- Feeling numb or like nothing matters.
- Having unexplained aches and pains.
- Feeling helpless or hopeless.
- Smoking, drinking, or using drugs more than usual.
- Feeling unusually confused, forgetful, on edge, angry, upset, worried, or scared.
- Yelling or fighting with family and friends.

- Experiencing severe mood swings that cause problems in relationships.
- Having persistent thoughts and memories that they can't get out of their head.
- Hearing voices or believing things that are not true.
- Thinking of harming themselves or others.
- Inability to perform daily tasks like brushing their teeth or getting to school.

The list above includes a number of non-specific signs that are difficult to distinguish from the normal ups and downs of a young person's life. These often come to people's attention when they represent a change in behaviour. It is important to find out what is behind these feelings or behaviours, irrespective of whether they are new or more long term. Intervening early to improve self-esteem, resilience, emotional literacy and coping strategies and building in support for students can help meet emotional wellbeing needs and prevent mental health problems in many cases.

- The most common diagnosed mental health problems in children and young people are:
- Depression, it affects more children and young people today than in the last few decades. Teenagers are more likely to experience depression than young children, however increasing numbers of children are reporting low mood.
- Self-Harm, some people find self-harm helps them to cope with emotional pain by experiencing physical pain, which releases endorphins giving temporary relief, often followed by guilt and

Overview (cont)

shame. Most young people will try to hide the harm they have done to themselves (e.g. cuts, burns and scratching). Even though someone may self-harm this does not necessarily mean they want to take their own life, but it does increase the risk of accidental fatal injury and can lead to suicide in a minority of cases.

- Anxiety, everyone has some level of anxiety however it's when this anxiety interferes with someone's life that it becomes a problem. Anxiety can take many forms such as panic attacks, becoming withdrawn, avoiding situations and being easily irritated.
- Eating disorders, usually start in the teenage years and are more common in girls than boys. The number of young people who develop an eating disorder is small, but eating disorders such as anorexia nervosa and bulimia nervosa can have serious consequences for their physical health and development.
- ADHD Attention Deficit Hyperactivity Disorder affecting concentration and behaviour.

These are just a few of the many mental health illnesses people can have. Some symptoms can be triggered by hormonal changes in adolescence, but may also be an indication of psychological distress.

Key Facts

- 1 in 10 children and young people aged 5 - 16 suffer from a diagnosable mental health disorder - that is around three children in every class
- Between 1 in every 12 and 1 in 15 children and young people deliberately self-harm
- 72% of children in care have behavioural or emotional problems - these are some of the most vulnerable people in our society
- 70% of children and young people who have a mental health problem have not had appropriate interventions at a sufficiently early age.
- 12% of Sheffield secondary pupils say they feel very sad or depressed most days

Best Practice

The Healthy Minds Framework is being rolled out across Sheffield schools to embed an emotionally healthy culture through identification of Healthy Minds Champions, workforce development and consultation with CAMHS, to support students' emotional wellbeing and mental health needs.

Resources

<https://epicfriends.co.uk/> This is a website created by CAMHS for young people wanting to know more about mental health.

<https://www.family-action.org.uk/tamhstoolkit/> information about mental health disorders resources for school staff and referral pathways.

<http://www.youngminds.org.uk/> This website has resources for young people, professionals and parents.

Sheffield Children and Young People Suicide prevention Pathway provides information, referral thresholds and resources for families and professionals.

Local Offers and Providers

Provider	What they offer	Cost	Contact details
Chilypep	Nationally Accredited Peer Mentoring and whole school awareness raising around mental health & emotional wellbeing. Training for groups of young people to mentor friends and peers around emotional wellbeing issues. Deliver awareness raising and resilience building to students and school staff.	A cost negotiable depended on level of work required. Includes ASDAN accreditation	training@chilypep.org.uk 0114 234 8846
	Youth Mental Health First Aid training for schools – 1 day 'light touch' max 16 per group. There are 94 places paid for this year through SCC Future in Mind. Participants become YMHA Champions. 2 day YMHA Training for groups of school staff - 16 max per group. Participants become YMHA First Aiders.	£150 per person (£300 for 2-day course) (Includes certification)	

Local Offers and Providers (cont)

Provider	What they offer	Cost	Contact details
Chilypep	Girls self-esteem course – Group work for girls to develop self-esteem, awareness and understanding around issues that affect girls and young women. 12 girls per programme.	£3500 per programme (includes ASDAN accreditation)	training@chilypep.org.uk 0114 234 8846
	BRUV Programme 10 week boys group programme. Boys participating will develop improved emotional literacy and a positive sense of self which is not governed by their life experiences, be more able to identify inappropriate and harmful behaviours for themselves and others, and be able to develop self-help and help seeking strategies to protect themselves and others from further harm and improve education and social outcomes.		
	Healthy relationship and awareness raising workshops for mixed and single sex groups. A limited number of free workshops available in 2017/18 through our Empowerment and recovery Lottery funded programme.	Free £250 once free workshops delivered	Ellie.Munday@chilypep.org.uk 0114 234 8846
Chilypep Available from January 2018.	ASIST – Applied Suicide Intervention Skills Training (ASIST) is a two-day interactive workshop in suicide first aid. ASIST teaches participants to recognize to attend the workshop—anyone 16 or older can learn and use the ASIST model when someone may have thoughts of suicide and work with them to create a plan that will support their immediate safety. Studies show that the ASIST method helps reduce suicidal feelings in those at risk and is a cost-effective way to help address the problem of suicide. All school staff including pastoral, teaching and support staff. To be nominated by school.	£3000 per programme (includes certification) 16 participants per course.	training@chilypep.org.uk 0114 234 8846

Local Offers and Providers (cont)

Provider	What they offer	Cost	Contact details
Golddigger Trust	Group work Programmes include the 'I'm The Girl I Want to Be', 'Made Of More' and self-harm recovery courses. Individual and small group bespoke mentoring programmes, CSE awareness sessions amongst other programmes.	Some funded places (current waiting list) Schools may fund	info@golddiggertrust.co.uk 0114 327 1191
Family Action	ADHD Support Group – An ADHD service based on a model developed by Family Action which supports the families of children and young people diagnosed with ADHD through improving knowledge and awareness of the disorder, providing strategies for managing the symptoms associated with ADHD and in promoting the individuality and potential for those affected. Support is provided through post-diagnosis home visits and group work via our Managing ADHD Groups. We work closely with diagnosing agencies to ensure that families are given the most accurate and up-to-date support and advice.	Free	Sheffield.Tamhs@family-action.org.uk 0114 321 1702
Attachment Training	Whole school or groups, assessment of child's emotional needs, consultation and therapeutic work.	Cost dependent on the needs/ package	hopeattach@gmail.com 07808 200 162
Interchange	Counselling and Psychotherapy, Therapeutic group work, Training, Counselling and Consultancy/Supervision for staff, Issue based workshops and tasters for young people or staff. Developing online counselling and webinar service from April 2017.	No charge to service users. Referrers can fund counselling - prices available on request	interchangeproject@ymail.com teri.connolly@interchangesheffield.org.uk 0114 201 6672

Local Offers and Providers (cont)

Provider	What they offer	Cost	Contact details
MAST (Multi-Agency Support Teams)	For 7-19 year olds. CBT informed therapeutic approach to supporting low mood and anxiety in young people, delivered by trained MAST Senior Learning Mentors. Referral pathway to CAMHS (Child and Adolescent Mental Health Service) for assessment, diagnosis and treatment of mental health disorders up to the age of 18.	Free	East MAST: 0114 205 3635 eastmast@sheffield.gov.uk West MAST: 0114 250 6865 westmast@sheffield.gov.uk North MAST: 0114 233 1189 northmast@sheffield.gov.uk
Samaritans	DEAL – (Developing Emotional Awareness and Listening) is a free resource for teachers and other educational professionals designed to help develop resilience in young people. Lesson plans, activities, hand-outs, audio-visual resources, teachers' notes and staff training materials can all be accessed and downloaded at any time from Samaritans website.	Free	272 Queens Road, Sheffield S2 4DL 0114 276 7277 www.samaritans.org/deal
SToRMS	Suicide awareness and prevention	Free	enquiries@stormsdmc.org
Golddigger Trust	Golddigger Trust is a Sheffield based Charity, offering a variety of wellbeing projects, both within the school environment, and extra-curricular activities within the community, for young people aged 11-19. Services include: 1:1 Mentoring – Bespoke, flexible programmes of mentoring for students addressing specific needs identified. Minimum 6 sessions (usual course approx. 8-14 sessions). Students accessing Golddigger Trust services via school can also access additional free services outside of school hours, including drop in youth clubs, sexual health clinic, sports and music sessions and online support.	Cost varies based on service and available charitable funding, contact for most up to date costings. Community based services are free, accessed by community referral (MAST, CAMHS, Self-referral etc). There is no charge to young people.	0114 327 1191 Golddigger Trust Centre For Young People, 10 Psalter Lane, Sheffield, S11 8YN info@golddiggertrust.co.uk www.golddiggertrust.co.uk

Local Offers and Providers (cont)

Provider	What they offer	Cost	Contact details
YWHP Sexual Abuse Support Service (Young Women's Housing Project)	We can offer support where trauma or abuse might be a factor. Group work or 121 sessions for girls to develop self-esteem, wellbeing-awareness and developing positive ways of coping. • Protective Behaviours & Resilience. • Creative Movement Wellbeing sessions.	FREE Donation welcome	0114 268 0580 ywhp@ywhp.org.uk
Door 43 (Youth Information Advice and Counselling Service)	Direct access to a range of emotional wellbeing and practical support for young people age 13-25 with a counselling offer and wellbeing café with activities and support open 5-7pm on Tuesdays	Free	0114 201 2774 Door43@sheffieldfutures.org.uk 43 Division Street open Monday – Friday 9am - 5pm and Saturday 9.30am - 12.30pm

Overview

Using the internet with children and young people is an incredibly rewarding experience. Incorporating internet safety themes across the curriculum, and celebrating the benefits of new technologies, can enhance learning in so many ways. Students have access to the internet at school and home where some supervision and restrictions can be applied, but access on their phones is much more difficult to manage, and the messages and information received through social media can have a significant impact on emotional wellbeing and mental health.

Cyberbullying is an increasingly common form of bullying behaviour which happens on social networks, games and mobile phones. Cyberbullying can include spreading rumours about someone, or posting nasty or embarrassing messages, images or videos.

Children may know who's bullying them online – it may be an extension of offline peer bullying or abusive behaviour from someone they are or have been in a relationship with - or they may be targeted by someone using a fake or anonymous account. It's easy to be anonymous online and this may increase the likelihood of engaging in bullying behaviour.

Cyberbullying includes:

- sending threatening or abusive text messages.
- creating and sharing embarrassing images or videos.
- 'trolling' - the sending of menacing or upsetting messages on social networks, chat rooms or online games.
- excluding children from online games, activities or friendship groups.

- setting up hate sites or groups about a particular child.
- encouraging young people to self-harm.
- voting for or against someone in an abusive poll.
- creating fake accounts, hijacking or stealing online identities to embarrass a young person or cause trouble using their name.
- sending explicit messages, also known as sexting.
- pressuring children into sending sexual images or engaging in sexual conversations .

Grooming is when someone builds an emotional connection with a child to gain their trust for the purposes of sexual abuse, sexual exploitation or trafficking. Children and young people can be groomed online or face-to-face, by a stranger or by someone they know - for example a family member, friend or professional. Groomers may be any age and gender.

Many children and young people don't understand that they have been groomed or that what has happened is abuse. Groomers can use social media sites, instant messaging apps including teen dating apps, or online gaming platforms to connect with a young person or child. They can spend time learning about a young person's interests from their online profiles and then use this knowledge to help them build up a relationship.

It's easy for groomers to hide their identity online - they may pretend to be a child and then chat and become 'friends' with children they are targeting. Groomers may look for:

Overview (cont)

- usernames or comments that are flirtatious or have a sexual meaning
- public comments that suggest a child has low self-esteem or is vulnerable.

Groomers don't always target a particular child. Sometimes they will send messages to hundreds of young people and wait to see who responds. Groomers no longer need to meet children in real life to

Best Practice

- Develop policies and procedures as part of the school's safeguarding practice.
- Encourage students to share concerns about online content and behaviour with staff.
- Ensure that students have the information they need to control their online accounts including privacy settings, blocking users and reporting abuse.
- Support students to develop the skills they need to manage their online activity using the NSPCC TEAM approach: Talk about what's safe and what's not, Explore their on-line world, Agree what's ok and what's not and Manage settings and parental controls.
- Respond to known risks such as social media encouraging young people to self-harm and suicide.
- Promote apps that support mental health.

abuse them. Increasingly, groomers are sexually exploiting their victims by persuading them to take part in online sexual activity.

When sexual exploitation happens online, young people may be persuaded, or forced, to:

- send or post sexually explicit images of themselves
- take part in sexual activities via a webcam or smartphone
- have sexual conversations by text or online.

Abusers may threaten to send images, video or copies of conversations to the young person's friends and family unless they take part in other sexual activity. Images or videos may continue to be shared long after the sexual abuse has stopped. (NSPCC website).

Resources

Guidance for schools on responding to sexting can be found at:

<https://www.nspcc.org.uk/preventing-abuse/child-abuse-and-neglect/online-abuse/legislation-policy-practice/#sextingguidance>

The NSPCC website has useful information, advice and resources:
<https://www.nspcc.org.uk/preventing-abuse/keeping-children-safe/online-safety/>

Kidscape has practical advice on privacy settings and how to block users to help young people stay in control of their online world:
<https://www.kidscape.org.uk/advice/advice-for-young-people/dealing-with-cyber-bullying/cyber-safe-settings/>

Online Safety

Resources

Abusive online content can be reported to Internet Watch Foundation which works in partnership with police and voluntary organisations to remove images that may be abusive or used to exploit children <https://www.iwf.org.uk/>

Childline provide telephone support and online information and

advice on e-safety <https://www.childline.org.uk/> Tel: 0800 1111

Online abuse can be reported to the National Crime Agency Child Exploitation and Online protection <https://ceop.police.uk/safety-centre/>

Resources for schools to help you use the internet safely and positively as a professional, and information to help safeguard your workplace and the young people you work with <http://www.childnet.com/teachers-and-professionals>

Local Offers and Providers

Provider	What they offer	Cost	Contact details
Safeguarding Sheffield Children	Sheffield Safeguarding Children Board (SSCB) co-ordinates a city-wide approach to e-safety, also known as online safeguarding. On the SSCB website you will find information and guidance that will help you to understand the safeguarding issues relating to the use of information technology and implement safety measures to enable you and the children and young people you work with to do this safely.	Free	http://www.safeguardingsheffieldchildren.org/sscb/safeguarding-information-and-resources/online-safeguarding For safeguarding concerns about children and young people, call the Sheffield Safeguarding Hub: 0114 273 4855
Golddigger Trust	Golddigger Trust is a Sheffield based Charity, offering a variety of wellbeing projects, both within the school environment, and extra-curricular activities within the community, for young people aged 11-19. Services include: 1:1 Mentoring – Bespoke, flexible programmes of mentoring for students addressing specific needs identified. Minimum 6 sessions (usual course approx. 8-14 sessions). Students accessing Golddigger Trust services via school can also access additional free services outside of school hours, including drop in youth clubs, sexual health clinic, sports and music sessions and online support.	Cost varies based on service and available charitable funding, contact for most up to date costings. Community based services are free, accessed by community referral (MAST, CAMHS, Self-referral etc). There is no charge to young people.	0114 327 1191 Golddigger Trust Centre For Young People, 10 Psalter Lane, Sheffield, S11 8YN info@golddiggertrust.co.uk www.golddiggertrust.co.uk

Prevent & Radicalisation

Overview

Prevent is a strand of the UK Government's wider Counter Terrorism Strategy. The Prevent strategy aims to stop people becoming terrorists or supporting terrorism by:

- Challenging extremist ideologies (that might be promoted through internet propaganda or hate speakers).
- Safeguarding individuals who are at risk of being drawn into terrorism.
- Supporting institutions (including schools, local authorities, universities, etc.) to implement the Prevent Duty and to address local risks relating to terrorism.

Prevent is concerned with all forms of terrorism, regardless of ideology or cause, including that driven by extremist Islamist ideology, extremist right wing groups, animal rights extremism, nationalist causes, etc.

The Government has defined extremism as "vocal or active opposition to fundamental British values, including democracy, the rule of law, individual liberty and mutual respect and tolerance of different faiths and beliefs. We also include in our definition of extremism calls for the death of members of our armed forces". Terrorist groups often draw on extremist ideology which seeks to justify or promote terrorism or encourage others to commit terrorist acts.

The Counter Terrorism and Security Act 2015 makes the implementation of Prevent a statutory duty for Schools, Further Education and Childcare Providers (as well as other public sector bodies). Schools should, in the exercise of their functions, have "due

regard to the need to prevent people from being drawn into terrorism". The Ofsted Common Inspection Framework assesses the implementation of the Prevent Duty in early years, education and skills settings.

Best Practice

Education settings should ensure that:

- They are alert to changes in behaviour which may indicate that a learner needs help or protection.
- They discuss and challenge ideas and encourage critical thinking.
- They have clear safeguarding procedures in place to assess & protect learners at risk.
- Learners are safe from terrorist & extremist material when accessing the internet.
- They link with local partners including the Children's Safeguarding Service, South Yorkshire Police, Social Care, & Community Youth Teams to ensure the welfare of learners.

Prevent should **not** stop learners from raising and debating difficult issues.

Safeguarding

Prevent is a safeguarding issue and seeks to support individuals before they get involved in criminal activity. Safeguarding people from radicalisation into terrorism is very similar to safeguarding them from other forms of harm.

Children, young people and adults can be drawn into violence or they can be exposed to the messages of terrorist organisations by many means: through the influence of family members or friends, direct contact with organisations or, increasingly, through the internet. This can put individuals at risk of being drawn into criminal activity and has the potential to cause significant harm. Be careful that you do not stereotype – any group or community can be drawn to extremist ideas & put a child at risk.

Factors that may influence the vulnerability of children and young people to being radicalised into terrorist activity can include:

- Pressure from peers & others or the internet
- Crime against them or involvement in crime
- Anti-social behaviour and bullying
- Family tensions
- Race or hate crime
- Lack of self-esteem or identity
- Personal or political grievances

Escalating concerns

If you have concerns about a vulnerable individual:

Discuss your concerns through your internal safeguarding processes, with your DSL, a colleague or manager

If you still have Prevent concerns and wish to discuss further or escalate, contact:

Sheffield Children and Families SPOC, Steve Hill

Tel: 0114 2734934 LADO@sheffield.gcsx.gov.uk

- **In an emergency (where yours or others safety is at risk) call 999**
- To report illegal terrorist information, pictures or videos you've found on the internet: <https://www.gov.uk/report-terrorism>

Prevent & Radicalisation

Resources

Further information can be found on the Safeguarding Sheffield Children website.

Home Office Prevent Duty Guidance, DfE 15, is available from
<https://www.gov.uk/government/publications/prevent-duty-guidance>

Keeping Children Safe in Education, DfE 16
<https://www.gov.uk/government/publications/keeping-children-safe-in-education--2>

E-safety guidance – training and curriculum:
<https://www.saferinternet.org.uk>

Government website for teachers, school leaders and parents with links to a range of resources and good practice:

www.educateagainsthate.com

A growing library of resources for schools can be found at:
www.preventforschools.org

Online Prevent awareness training for educational settings:
<https://www.elearning.prevent.homeoffice.gov.uk/>

Let's Talk About It is a national initiative designed to provide practical help and guidance in order to stop people becoming terrorists or supporting terrorism:
<http://www.ltai.info/>

Local Offers and Providers

Provider	What they offer	Cost	Contact details
The Tim Parry Johnathan Ball Foundation for Peace and The Peace Museum	Covers curriculum resources and staff training, suitable for primary, secondary and FE settings. Sessions will be allocated between July 2017 and March 2018.	Free	tim.wright@sheffield.gov.uk
Development Education Centre South Yorkshire (DECSY)	Staff/ governor training and support on responding to SMSC requirements to do with 'Promoting British Values'. Training on dialogic learning methods such as Philosophy for Children (P4C) which can create safe spaces for dialogue about controversial issues. Lesson plans available for discussing terrorism at KS2 and 3.	£600 per day	helen.griffin@decsy.org.uk



Overview

A child or young person is sexually abused when they are forced or persuaded to take part in sexual activities. This doesn't have to be physical contact and it can happen online. Sometimes the child or young person won't understand that what's happening to them is abuse. They may not even understand that it's wrong.

There are 2 different types of child sexual abuse. These are called contact abuse and non-contact abuse.

Contact abuse involves touching activities where an abuser makes physical contact with a child, including penetration. It includes:

- sexual touching of any part of the body whether the child's wearing clothes or not
- rape or penetration by putting an object or body part inside a child's mouth, vagina or anus
- forcing or encouraging a child to take part in sexual activity
- making a child take their clothes off, touch someone else's genitals or masturbate.

Non-contact abuse involves non-touching activities, such as grooming, exploitation, persuading children to perform sexual acts over the internet and flashing. It includes:

- encouraging a child to watch or hear sexual acts
- not taking proper measures to prevent a child being exposed to sexual activities by others
- meeting a child following sexual grooming with the intent of abusing them

- online abuse including making, viewing or distributing child abuse images
- allowing someone else to make, view or distribute child abuse images
- showing pornography to a child
- sexually exploiting a child for money, power or status (child exploitation).



Best Practice

If you think a child or young person has been sexually assaulted or raped report this to the Police.

They will then refer the child or young person to the Child Assessment Unit (at the Children's Hospital) or to Hackenthorpe Lodge the Sexual Assault Referral Centre.

Sexual Abuse

Resources

Sheffield Safeguarding Children Board procedures

http://sheffieldscb.proceduresonline.com/chapters/p_sg_ch_sxab.html?zoom_highlight=sexual+abuse

NSPCC

<https://www.nspcc.org.uk/preventing-abuse/child-abuse-and-neglect/child-sexual-abuse/>

Let's Talk Pants – NSPCC guide for parents

<https://www.nspcc.org.uk/preventing-abuse/keeping-children-safe/underwear-rule/>

Childline

<https://www.childline.org.uk/info-advice/bullying-abuse-safety/abuse-safety/sexual-abuse/>

Local Offers and Providers

Key Facts

1 in 20 children in the UK have been sexually abused. (Radford, L. et al (2011) Child abuse and neglect in the UK today) .

Children who are sexually abused may:

Stay away from certain people

- they might avoid being alone with people, such as family members or friends.
- they could seem frightened of a person or reluctant to socialise with them.

Show sexual behaviour that's inappropriate for their age

- a child might become sexually active at a young age.
- they might be promiscuous.

Provider	What they offer	Cost	Contact details
Golddigger Trust	Golddigger Trust is a Sheffield based Charity, offering a variety of wellbeing projects, both within the school environment, and extra-curricular activities within the community, for young people aged 11-19. Services include: 1:1 Mentoring – Bespoke, flexible programmes of mentoring for students addressing specific needs identified. Minimum 6 sessions (usual course approx. 8-14 sessions). Students accessing Golddigger Trust services via school can also access additional free services outside of school hours, including drop in youth clubs, sexual health clinic, sports and music sessions and online support.	Cost varies based on service and available charitable funding, contact for most up to date costings. Community based services are free, accessed by community referral (MAST, CAMHS, Self-referral etc). There is no charge to young people.	0114 327 1191 Golddigger Trust Centre For Young People, 10 Psalter Lane, Sheffield, S11 8YN info@golddiggertrust.co.uk www.golddiggertrust.co.uk

Sexual Abuse

Local Offers and Providers (cont)

Provider	What they offer	Cost	Contact details
NSPCC Sheffield Service Centre	1. Letting The Future In 1:1 therapeutic work with children aged 4-17yrs who have disclosed sexual abuse. Can include some support and joint sessions for carers/ parents.	Free	0114 228 9200
	2. Protect and Respect 6-weekly group work sessions in secondary schools (by request) raising awareness of child sexual exploitation (CSE) including: healthy relationships, consent, grooming, CSE and online safety.		
YWHP Sexual Abuse Support Service (Young Women's Housing Project)	We provide safe, supported accommodation & specialist therapeutic support for young women / mothers aged 16-25 years affected by sexual abuse, sexual exploitation, and domestic abuse. Support is delivered through 121 key-work and group-work. Our "Protect Yourself" initiative includes a wide range of group-work programmes and one to one therapeutic sessions for girls and young women, pregnant young women and young mothers. We can deliver bespoke training/workshops on request.	FREE Donations welcome	0114 268 0580 ywhp@ywhp.org.uk
Sheffield Rape and Sexual Abuse Centre	Children's Independent Sexual Violence Advisors (ChISVAs) - Support for children / young people and their families going through the criminal justice system.	Free	https://isva-referral.drasacs.org.uk/ 0114 241 2766 www.sheffieldrapecrisis.org.uk
Interchange Counselling	Emotional Well Being and Mental Health counselling support for Children and Young People up to 25 years.	No charge to service users. Referrers can fund counselling - prices available on request	0114 201 6672 teri.connolly@interchangesheffield.org.uk www.interchangesheffield.org.uk

Overview

Sexual consent, just like consent for many other things (e.g. asking to borrow a pencil in class and your friend agreeing is consent), is an agreement between people to engage in sexual activity with each other. Consent doesn't have to be verbal, but verbally agreeing to different sexual activities can help both you and your partner respect each other's boundaries. It's important to understand that every time anyone wants to partake in any kind of sexual activity consent from all parties needs to be present. Additionally, people can withdraw their consent at any point of the sexual activity and carrying on would then not be consensual.

Consent should never just be 'assumed', people should always be certain that sexual activity is consented to. Below is a list of reasons that should not be considered as consent:

- **Body language, Appearance, or Non-Verbal Communication:** A person should never assume consent from the way a person dresses, smiles, looks or acts, that they want / agree to have sex with them.
- **Dating relationships or previous sexual activity:** Simply because two or more people are dating or have had sex in the past does not mean that they have consented to have sex again.
- **Marriage:** in marriage, a person should still not assume they have consent for sexual activity. Marital rape is as serious as any other sexual assault.
- **Previous Activity:** Consent to engage in one sexual activity at one time is not consent to engage in a different sexual activity or to engage in the same sexual activity on a later occasion.

- **Silence, Passivity, Lack of Resistance, or immobility:** A person's silence should not be considered consent. A person who does not respond to attempts to engage in sexual activity, even if they do not verbally say no or resist physically, is not clearly agreeing to sexual activity.
- **Incapacitation:** Alcohol consumption or use of other drugs can render a person incapable of giving consent. Alcohol is often used as a means of targeting individuals and is used by perpetrators to excuse their own actions.

The legal age for sex in the UK is 16 as this is when it's believed that people can make conscious decisions as to whether they will consent or not to sexual activity. Therefore, if someone over 16 is found to have had sex with someone under 16 this is classed as rape as the person under 16 does not have the capacity to consent. Additionally, people who may have a mental disorder or are affected by alcohol/drug may also not have the mental skills needed to make decisions as they may not understand the meaning, consequences or implications of their decisions. Sexual activity without consent is considered, by law, to be sexual assault or rape. If they are found guilty of partaking in sexual activity where consent wasn't present, the perpetrator can be sent to jail.

References

- ¹ Coy et al (London Met 2010) Non-consensual sex and teenage pregnancy
- ² ibid
- ³ Crime Survey of England and Wales, 2013
- ⁴ Barter et al (2015)
- ⁵ An Overview of Sexual Offending in England and Wales, January 2013.

Sexual Consent

Key Facts

- 45.3% of girls and 38.5% of boys say they find it difficult to say no when pressured into having sex.¹
- 50% of boys and 62.4% of girls said that unwanted sex is common in young people's relationships.²
- 1 in 5 women in the UK have experienced some form of sexual violence since the age of 16.³
- 1 in 3 teenage girls have been pressured into doing something sexual by a partner.⁴
- Approximately 90% of those who are raped knew the perpetrator before the crime.⁵

Best Practice

Where possible, ensure that correct information about consent and the law is shared with children and young people.

Local Offers and Providers

Provider	What they offer	Cost	Contact details
The Chat	"Switching the Lights on" - Sexual consent work with young people, other sexual health work bespoke to need.	Per class £50, staff training contact for details	0114 250 9874 http://www.thechat.org.uk/

Resources

A resource for teaching sexual consent to key stages 3 and 4:

<http://www.rasasc.org.uk/wp/wp-content/uploads/2013/11/Give-n-Get-Consent-A-resource-for-teaching-sexual-consent-to-key-stages-3-and-4.pdf>

A good video explaining consent:

<https://www.youtube.com/watch?v=MjRLutSWwA0>

A cartoon video explaining consent with the use of tea. Makes it very easy to understand:

<https://www.youtube.com/watch?v=pZwvrXVavnQ>

Information for teens including around being pressured into sex:

<https://www.childline.org.uk/info-advice/friends-relationships-sex/sex-relationships/healthy-unhealthy-relationships/#2>

Sexual Consent

Local Offers and Providers (cont)

Provider	What they offer	Cost	Contact details
Sheffield Futures	• Groupwork training for YPs. • One-to-one support for 16-18. • Free training for professionals. • Whole school staff/Safeguarding team. • Twilight sessions available.	Free	0114 201 8572 http://www.sheffieldfutures.org.uk/
Talkabout	Sex and relationship education through groupwork and teacher training.	£100 per session or £250 for a day	talkaboutconsent.co.uk@gmail.com 07982 722 811
Golddigger Trust	Golddigger Trust is a Sheffield based Charity, offering a variety of wellbeing projects, both within the school environment, and extra-curricular activities within the community, for young people aged 11-19. Services include: 1:1 Mentoring – Bespoke, flexible programmes of mentoring for students addressing specific needs identified. Minimum 6 sessions (usual course approx. 8-14 sessions). Students accessing Golddigger Trust services via school can also access additional free services outside of school hours, including drop in youth clubs, sexual health clinic, sports and music sessions and online support.	Cost varies based on service and available charitable funding, contact for most up to date costings. Community based services are free, accessed by community referral (MAST, CAMHS, Self-referral etc). There is no charge to young people.	0114 327 1191 Golddigger Trust Centre For Young People, 10 Psalter Lane, Sheffield, S11 8YN info@golddiggertrust.co.uk www.golddiggertrust.co.uk
YWHP Sexual Abuse Support Service (Young Women's Housing Project)	Our "Protect Yourself" initiative includes group-work programmes and/or one to one sessions for girls and young women dealing with safe relationships & consent. Mixed gender sessions available. • "Escape the Trap" Teenage Relationship Abuse Programme. 8 sessions (ASDAN accredited). • "Friend or Foe" Relationships & Risk (CSE). 6 sessions.	FREE Donations welcome	0114 268 0580 ywhp@ywhp.org.uk

Overview

According to the World Health Organization's definition, sexual health is "a state of physical, emotional, mental and social well-being in relation to sexuality; it is not merely the absence of disease, dysfunction or infirmity. Sexual health requires a positive and respectful approach to sexuality and sexual relationships, as well as the possibility of having pleasurable and safe sexual experiences, free of coercion, discrimination and violence. For sexual health to be attained and maintained, the sexual rights of all persons must be respected, protected and fulfilled."¹

Sexual health therefore plays an important part in our overall physical and mental health and well-being.

Achieving positive sexual health requires support in maintaining equitable and healthy relationships; comprehensive and accurate sex education, information, and advice; and accessible services to prevent sexual ill health and to treat the consequences of sexual ill health.

Key sexual health indicators have been set by Public Health England to improve the sexual health of the population, and to reduce sexual health inequalities between the general population and defined vulnerable groups. These include:

- Reducing the under-18s conception rate.
- Reducing the percentage of HIV infections that are diagnosed late.
- Improving the chlamydia detection rate amongst young people aged 15-24 years.²

Key Facts

- The under 18 conception rate in 2015 was 21.0 conceptions per thousand women aged 15 to 17; this is the lowest rate recorded since comparable statistics were first produced in 1969.
- The estimated number of conceptions to women aged under 18 fell to 20,351 in 2015, compared with 22,653 in 2014, a decrease of 10%.
- The estimated number of conceptions to women aged under 16 fell to 3,466 in 2015, compared with 4,160 in 2014, a decrease of 17%.³
- In 2016, there were approximately 420,000 diagnoses of sexually transmitted infections (STIs) made in England, a decline of 4% compared to 2015.
- Over 1.4 million chlamydia tests were carried out and over 128,000 chlamydia diagnoses were made among young people aged 15 to 24 years.
- The impact of STIs remains greatest in young heterosexuals 15 to 24 years, black and ethnic minorities and gay, bisexual and other men who have sex with men (MSM).
- Young people experience the highest STI diagnosis rates. Compared to people aged 25 to 59 years, rates of STI diagnoses in the 15 to 24 age-group are twice as high in men and seven times as high in women; these higher rates are likely due to greater rates of partner change among the younger age-group.⁴

Best Practice

- Statutory, high-quality relationship and sex education in secondary schools will equip young people with the skills to improve their sexual health and overall wellbeing.
- Consistent and correct use of condoms can significantly reduce risk of STIs and unplanned pregnancy.
- Rapid, open access to treatment and partner notification can reduce the risk of complications and infection spread.
- Regular testing for HIV and STIs is essential for good sexual health.⁵

References

¹ Developing sexual health programmes: A framework for action, World Health Organization, Department of Reproductive Health and Research, 2006 updated 2010.

² Healthy lives, healthy people: Improving outcomes and supporting transparency, Public Health England, 2013.

³ Conceptions in England and Wales: 2015 Annual statistics on conceptions covering conception counts and rates, by age group, including women under 18, Office for National Statistics, 2017.

⁴ Sexually Transmitted Infections and Chlamydia Screening in England, 2016, Health Protection Report Volume 11 Number 20.

⁵ Sexually Transmitted Infections and Chlamydia Screening in England, 2016, Health Protection Report Volume 11 Number 20.

Resources

Brook is a sexual health charity that has online resources for young people and professionals, covering a variety of sexual health issues e.g. puberty, STI's and contraception:

<https://www.brook.org.uk>

The Sex Education Forum is a membership organisation and works together with its members and other stakeholders to achieve quality sex and relationships education (SRE). Members include schools, colleges, youth settings, local authorities, NHS trusts, local and national organisations and individuals:

<http://www.sexeducationforum.org.uk>

'Sex and relationships education (SRE) for the 21st century': Supplementary advice to the Sex and Relationship Education Guidance DfEE (0116/2000):

<http://www.sexeducationforum.org.uk/media/17706/sreadvice.pdf>

Puberty and Sexuality for children and young people with learning disabilities': A supporting document for the national curriculum objectives:

<http://www.sexualhealthsheffield.nhs.uk/wp-content/uploads/2015/03/pubertySexualityForChildrenAndYoungPeopleWithALearningDisability.pdf>

Sexual Health

Local Offers and Providers

Provider	What they offer	Cost	Contact details
Sexual Health Sheffield (a service provided by Sheffield Teaching Hospitals NHS Foundation Trust)	For young people: Youth Clinics for young people aged 19 and under. Confidential access to information and advice on sexual health issues as well as a full range of contraception, testing and treatment for STIs (including HIV) and support for pregnancy options (including counselling and making arrangements for abortion or continuing pregnancy). STI self- screening kits also available at reception. Website providing information about sexual health, clinic opening times and access to STI self- screening kits: http://sexualhealthsheffield.nhs.uk PASH volunteer project – provides volunteers (aged 16-20 years) to deliver sexual health information sessions to young people in schools and other youth settings. Recruits and trains new volunteers once a year. Postal kits for STI self- screening available via the SHS website. Sexual Health Sheffield (SHS) can also provide STI screening sessions for age-appropriate students.	All SHS clinics are free of charge and confidential. PASH sessions are free. STI screening kits and screening sessions are free. There is a charge for some of the training and education resources. However, training to support schools to become 'Open Doors' providers is free. SHS also produces a range of materials promoting the service which are free of charge. All costings are available via the SHS website sexualhealthsheffield.nhs.uk under 'Training' or 'Resources'.	For information about training, education resources, PASH, 'Open Doors', and chlamydia screening please contact: sexualhealthadmin@sth.nhs.uk or phone 0114 271 1859 You can also find information about our service via the website: sexualhealthsheffield.nhs.uk You can also follow us on Twitter @SHSheffield or via our Facebook page 'Sexual Health Sheffield' or on Instagram at 'SexualHealthSheffield' 11a, B Road, Royal Hallamshire Hospital, Glossop Road, Sheffield, S10 2JF
Golddigger Trust	Golddigger Trust is a Sheffield based Charity, offering a variety of wellbeing projects, both within the school environment, and extra-curricular activities within the community, for young people aged 11-19. Services include: 1:1 Mentoring – Bespoke, flexible programmes of mentoring for students addressing specific needs identified. Minimum 6 sessions (usual course approx. 8-14 sessions). Students accessing Golddigger Trust services via school can also access additional free services outside of school hours, including drop in youth clubs, sexual health clinic, sports and music sessions and online support.	Cost varies based on service and available charitable funding, contact for most up to date costings. Community based services are free, accessed by community referral (MAST, CAMHS, Self-referral etc). There is no charge to young people.	0114 327 1191 Golddigger Trust Centre For Young People, 10 Psalter Lane, Sheffield, S11 8YN info@golddiggertrust.co.uk www.golddiggertrust.co.uk

Local Offers and Providers (cont)

Provider	What they offer	Cost	Contact details
Sexual Health Sheffield (a service provided by Sheffield Teaching Hospitals NHS Foundation Trust)	For staff: Provide a wide range of evidence based, high quality and well evaluated sexual health training courses for staff including 'Young People and Sexual Health', 'Beginners Guide to HIV' and 'Introduction to Sexual Health'. Also provide training and resources to support schools to offer 'Open Doors' sexual health services (i.e. condoms, pregnancy testing and chlamydia screening) Produce education resources on a wide range of sexual health issues including leaflets, posters, DVDs, demonstrators, and training manuals including our 'Puberty Pack', 'Contraception Choices Pack' and 'The Essentials training manual on the basics of sex and relationships education for secondary school age students'.	All SHS clinics are free of charge and confidential. PASH sessions are free. STI screening kits and screening sessions are free. There is a charge for some of the training and education resources. However, training to support schools to become 'Open Doors' providers is free. SHS also produces a range of materials promoting the service which are free of charge. All costings are available via the SHS website http://sexualhealthsheffield.nhs.uk under 'Training' or 'Resources'.	For information about training, education resources, PASH, 'Open Doors', and chlamydia screening please contact: sexualhealthadmin@sth.nhs.uk or phone 0114 271 1859 You can also find information about our service via the website: http://sexualhealthsheffield.nhs.uk You can also follow us on Twitter @SHSheffield or via our Facebook page 'Sexual Health Sheffield' or on Instagram at 'SexualHealthSheffield' 11a, B Road, Royal Hallamshire Hospital, Glossop Road, Sheffield, S10 2JF

Substance Use/Misuse

Overview

Substance use/misuse can have an impact on young people's lives - for some it is experimental and short term use, while for others it is more long term and can cause some problems for them.

Firstly, it's important to recognise that as young people grow and develop through their teenage years, experimentation around substances can be involved, and will not always develop on to further issues. For education providers it's vital to keep an eye on the impact that substance use is having and provide education and support if issues arise. This might involve external support if they feel that a young person is going beyond experimentation and putting themselves or others at risk.

A young person doesn't need to be addicted to alcohol or drugs to have a harmful relationship with them. Alcohol and drug use can be thought of as a spectrum, ranging from use that is occasional and low risk (in the case of alcohol for example) to use that is out of control and which can have serious effects on someone's physical and mental health.

People often think they should only get help for their drug or alcohol use if it's affecting their day-to-day life. In fact, many people use alcohol or drugs in a 'high functioning' way and are able to continue with their normal routine, such as going to school, work or college. If not recognised harmful substance use could have a big impact on a young person's life and future.

An open and non-judgemental forum for discussion around issues such as substance use is vital in education. This gives room for young people to talk through any questions/concerns or issues they may have – as many questions about drugs and alcohol either get

answered incorrectly by peers or not answered at all.

It is important that all members of a school community (staff, volunteers, parents / carers and pupils / students) have a good understanding of drugs and alcohol and the impact they can have on young people and their families, relationships and their future.

Other people's substance misuse can also have an impact on young people, and Sheffield has a strategy to ensure these young people are supported. It's always important to consider how someone else's substance use can affect a young person as it can have far reaching effects if left unrecognised.

Good Practice

Think about how you can incorporate Drugs and Alcohol information and education in:

- curricular or non-curricular activity.
- your code of conduct and school policies.
- PHSE provision.
- sex and relationship education or your equivalent.

Substance Use/Misuse

Local Resources

The Safeguarding Children Board's procedures that apply to all organisations working with Children and Young People in Sheffield can be found here:

<http://www.safeguardingsheffieldchildren.org/sscb>

- These include sections on children and young people using substances or living with substance use.

Training for professionals around substance use is available free of charge from The Corner, this includes basic drug awareness and Novel Psychoactive Substance information. Please visit **www.thecornersheffield.com** for more details.

Bite size and full length training from Sheffield Children's Safeguarding Board is available also:

- Please see the SCSB Website for more details: Specific policies for Schools and colleges can be provided from the local young people's substance misuse service, The Corner:
- This includes a drugs policy for school s - including New Psychoactive Substances (NPS)

A screening toolkit has been created in Sheffield to support workers to assess a young person's substance use and decide the most appropriate support required:

- The Screening Toolkit is available through The Corner – please contact the service for more details.

Good Practice Resources

RCGP Practice Standards for Young People with Substance Misuse Problems (2012):

<http://www.rcpsych.ac.uk/pdf/Practice%20standards%20for%20young%20people%20with%20substance%20misuse%20problems.pdf>

Young people's specialist substance misuse treatment: Needs assessment good practice guidance (NTA, 2009):

http://www.nta.nhs.uk/uploads/ypssmtp_needs_assessment_2010_11.pdf

NICE Guidance Substance misuse interventions for vulnerable under 25s (NICE 2007):

<https://www.nice.org.uk/guidance/ph4/chapter/1-recommendations>

NICE Interventions to reduce substance misuse among vulnerable young people evidence update April 2014 (NICE 2014):

<https://arms.evidence.nhs.uk/resources/hub/1034184/attachment>

Substance Use/Misuse



Educational Toolkits

<http://mentor-adepis.org/preventing-cyp-mental-health-problems/>

<http://www.starsnationalinitiative.org.uk/content/activities-and-resources>

http://www.adfam.org.uk/families/Publications_for_family_use



Resources for Young People

<http://www.talktofrank.com/>

<http://knowthescore.info/>

<http://www.crew2000.org.uk/>

<https://www.lookoutzone.co.uk/default.aspx>

<http://www.drugsand.me/>



Local Offers and Providers

Provider	What they offer	Cost	Contact details
Golddigger Trust	Golddigger Trust is a Sheffield based Charity, offering a variety of wellbeing projects, both within the school environment, and extra-curricular activities within the community, for young people aged 11-19. Services include: 1:1 Mentoring – Bespoke, flexible programmes of mentoring for students addressing specific needs identified. Minimum 6 sessions (usual course approx. 8-14 sessions). Students accessing Golddigger Trust services via school can also access additional free services outside of school hours, including drop in youth clubs, sexual health clinic, sports and music sessions and online support.	Cost varies based on service and available charitable funding, contact for most up to date costings. Community based services are free, accessed by community referral (MAST, CAMHS, Self-referral etc). There is no charge to young people.	0114 327 1191 Golddigger Trust Centre For Young People, 10 Psalter Lane, Sheffield, S11 8YN info@golddiggertrust.co.uk www.golddiggertrust.co.uk

Substance Use/Misuse

Local Offers and Providers (cont)

Provider	What they offer	Cost	Contact details
The Corner	Sheffield has a specific substance misuse service for Young people called The Corner (cgl), they provide a wide range of support for young people and professionals: The Corner is a free and confidential drug and alcohol service for young people aged 10-18 in Sheffield. They offer advice and support to young people in the Sheffield area who are experiencing problems with drugs and alcohol. One-to-one work for young people who want support around their substance use Targeted Group Work for vulnerable young people in SheffieldBespoke drugs and alcohol training for professionals working with young people in Sheffield. Telephone advice and consultation for young people and professionals. We offer specific telephone advice, 1-2-1 support and group work for concerned parents and carers. WAM – What about me? (cgl) is a confidential service to help children and young people, between the ages of 8 to 19 years (and up to 25 where appropriate), who are affected by drug and alcohol use in their family. Group work sessions which are age appropriate and individual one-to-one work, both of which include creative activities, education, problem solving and confidence building.	Free	0114 275 2051 thecorner.sheffield@cgl.org.uk www.thecorner.sheffield.co.uk www.thecorner.sheffield.com
Addaction	The Amy Winehouse Foundation Resilience Programme was first launched in 2014 thanks to funding from the BIG Lottery Fund and is provided in over 200 secondary schools across England. Through the delivery of universal and targeted education sessions, our aim is to help pupils better manage their emotional wellbeing and enable them to make healthy decisions about the use of drugs and alcohol. The programme is delivered in partnership between the Amy Winehouse Foundation and Addaction and is available to all schools in the Sheffield area.	Free	0114 253 6830 www.amywinehousefoundation.org www.addaction.org.uk

Overview

The term 'young carer' refers to a child or young person who provides substantial unpaid care for relatives who have long term physical or mental illnesses, disabilities, and/or substance misuse issues.

1 in 12 children are young carers but many remain hidden until a crisis hits. This may be due to a number of factors:

- The young person may not realise that they are a carer or that their life differs from that of their peers.
- They don't want to be perceived as different from their peers and therefore are afraid of drawing attention to their caring role .
- They're worried about bullying.
- They want to keep their identity at school separate from their identity as a carer.
- They're worried the school will show no interest in their situation.
- They're worried about their family being split up.
- They're worried about letting their family down by admitting they need support.

Due to the prevalence and hidden nature of the issue, it is vital that schools take an active role in the identification and support of young carers within their school community. The key to doing this effectively is through raising awareness and being proactive in their support: allowing these children the chance to recognise their caring role and feel safe enough to discuss it and seek help.

Best Practice

Guidelines taken from page 3-5 of 'Gaining an understanding of young carers' found at: https://professionals.carers.org/sites/default/files/step_1_gaining_an_understanding_about_young_carers.pdf

- All staff need to be aware of the identifying signs of a young carer.
- Pupils with caring responsibilities may in fact self-identify and present themselves to a teacher or member of staff with whom they feel comfortable.
- All staff should be aware of the schools process of sharing information about the carer- in order to ensure proper confidentiality and privacy, and to prevent the carer having to explain themselves several times. They should also know not to discuss a pupil's caring role in front of their peers.

Key Facts*

- 1 in 12 children provide mid-to-high level care for someone in their family. This means there are at least 7000 young carers in Sheffield alone.
- According to a 2010 study, 39% of six to 18-year-olds questioned said that not a single teacher at their school was aware of their caring role .
- Young carers have significantly lower educational attainment at GCSE level, the equivalent to nine grades lower overall than their peers e.g. the difference between nine B's and nine C's.
- Young carers miss or cut short many school days every year. The average was 48 school days missed or cut short because of their caring role.
- 68% of young carers are bullied in schools, often for the disabilities or appearances of their parents, and 38% had mental health problems .
- Young adult carers aged between 16 and 18 years are twice as likely to be not in education, employment, or training (NEET) .
- Young adult carers appear to be four times more likely to have to drop out of their college or university course than other students.

Ofsted

Young carers are a named group in the Ofsted Common Inspection Framework (pg 6).

Resources

Sheffield Young Carers: www.sheffieldyoungcarers.org.uk.
Website which includes information on:

Films made by young carers sharing their experiences:
<https://www.sheffieldyoungcarers.org.uk/watch-our-films>

An extensive resource library for professionals:
<https://www.sheffieldyoungcarers.org.uk/resources-for-professionals/>

How to apply for £300 grants for young carers:
<https://www.sheffieldyoungcarers.org.uk/young-carers-activity-fund/>

How to access SYC support for young carers and their families:
<https://www.sheffieldyoungcarers.org.uk/join-syc/>

Young Carers in Schools:
<https://carers.org/young-carers-schools>

The Children's Society including a link to 'Molly's Story' from:
<http://www.childrenssociety.org.uk/helping-young-carers>

Legislation

Under the Care Act 2014 and Children and Families Act 2014, young carers are now entitled to an assessment. In Sheffield, this is a booklet which schools or other workers can complete with young carers to explore ways to reduce their caring or the impacts of caring. For more information, see: <https://www.sheffield.gov.uk/home/social-care/young-carers-assessment>.

Sheffield School Improvement Strategy

Under the Inclusion priority, we will **“identify all young carers and provide them, and their families, with appropriate support”**.

References

* Information from the BBC, The Carers Trust, The Princess Royal Trust for Carers and The Children's Society. For local information, see reports from the Sheffield Every Child Matters survey.

Local Offers and Providers

Provider	What they offer	Cost	Contact details
Sheffield Young Carers (SYC)	Support for young carers and families: SYC offer one year of support to young carers aged 8-25 from Sheffield to offer respite and build resilience. This includes four x one-to-one sessions (in schools where possible), a term of after-school groups, and holiday activities all year. Family support is also available for adults with mental health issues and/or substance misuse issues being cared for by their child. Waiting lists apply. Support for schools: SYC coordinate a Young Carers Schools Network and offer member schools a menu of activities and support to identify young carers and develop school practice to support their emotional wellbeing. They can provide free template assemblies, staff training, lesson plans, and identification tools, plus group work and one to one materials for identifying and supporting young carers in your school.	Free services - funded until March 2019 and we will seek to secure further funding to continue our service after this.	sara.gowen@sycp.org.uk laura.selby@sycp.org.uk 0114 258 4595

Overview

Over the past decade, national youth crime figures have been falling steadily. In January 2015, the number of children in custody was at an all-time low of 981 - the first time on record that the figure had fallen below 1,000. That said, youth crime and anti-social behaviour is still a threat to the overall well-being of young people and the opportunities they have access to. Schools may provide an initial intervention in helping to limit these unhelpful behaviours however this is not always sufficient. As for those who are already offenders, re-offending rates remain consistently high therefore support for these students is crucial.

Furthermore, of those who offend, a significant number have been the victim of abuse or experienced bereavement, and around half of young people in custody have been in care at some point in their lives. In addition to this, one third of young people in custody have a mental health disorder which is three times higher than that of the general population. Offending is therefore prevalent among the most vulnerable young people in our society, with a combination of difficult circumstances often forming a basis for the identification of potential offenders.

There are a number of different measures in place to help prevent youth offending, to identify those at risk of involvement in anti-social behaviour and offending and rehabilitate those already convicted.

Resources

Overview of government youth crime prevention programmes:
<https://www.gov.uk/youth-crime-prevention-programmes/mentoring>

Best Practice

If schools have concerns about a student at risk of getting into trouble with the police, they can be referred to the Community Youth Teams (CYT) for support. CYT will work with the school to provide a whole family approach to diverting the young person from offending behaviour, addressing any risk factors like substance misuse or mental health needs, and engaging them in constructive activity.

Education and speech and language therapists are integrated into the Youth Justice Service, schools cannot refer but can liaise with staff to support management of students in the justice system, which also has specialist staff to support with education, substance misuse, housing, physical and mental health.

Key Facts

- 60% of children in the youth justice system have significant speech, language or communication difficulties, and around a quarter have a learning disability.
- Approximately half of young people in custody have at some point been in care, and a fifth are still subject to care orders.
- Isolation is a big struggle for young people placed in custody as they face separation from family and friends, as well as isolation from their community as a whole.
- Many face great difficulties in re-entering education after such an interruption, as well as difficulties with employment or training.
- 72% of children released from custody re-offend within the year.

Key Facts (cont)

- 11% of all children in prison have attempted suicide.
- Less than 1% of all children in England are in care, but children in care make up 33% of boys and 61% of girls in custody.

Local Offers and Providers

Provider	What they offer	Cost	Contact details
Sheffield Youth Justice Service	Assessments and interventions on referral from police and courts for young people age 10-18 to prevent re-offending.	Free	0114 228 8555 youthjusticeservice@sheffield.gov.uk
Community Youth Teams	Community Youth Teams (CYTs) support young people aged 10-18 who need extra support to help them make the most of their lives. We aim to steer young people away from crime and anti-social behaviour, helping them to stay in school and post-16 education, work or training. https://www.sheffieldfutures.org.uk/about-us/our-services/	Free	0114 201 2800 enquiries@sheffieldfutures.org.uk
Remedi	Restorative justice interventions, mediation between young people who have committed an offence or anti-social behaviour and victims.	Free	www.remediuk.org 0114 253 6669 Referrals through YJS or CYT
Golddigger Trust	Golddigger Trust is a Sheffield based Charity, offering a variety of wellbeing projects, both within the school environment, and extra-curricular activities within the community, for young people aged 11-19. Services include: 1:1 Mentoring – Bespoke, flexible programmes of mentoring for students addressing specific needs identified. Minimum 6 sessions (usual course approx. 8-14 sessions). Students accessing Golddigger Trust services via school can also access additional free services outside of school hours, including drop in youth clubs, sexual health clinic, sports and music sessions and online support.	Cost varies based on service and available charitable funding, contact for most up to date costings. Community based services are free, accessed by community referral (MAST, CAMHS, Self-referral etc). There is no charge to young people.	0114 327 1191 Golddigger Trust Centre For Young People, 10 Psalter Lane, Sheffield, S11 8YN info@golddiggertrust.co.uk www.golddiggertrust.co.uk