



Kids Health Matters Transcript **Episode 4: CAMHS Crisis Connect part 1**

The Child and Adolescent Health Services respects and acknowledges the Whadjuk People as the traditional custodians of the land on which we work and of Elders past and present.

Hi and welcome to Kids Health Matters - a podcast where we meet experts from the Child and Adolescent Health Service, which includes Perth Children's Hospital.

Each episode will dive into a range of topics and issues affecting kids' health and wellbeing and provide you with information on how you can best support them through their journey of childhood and adolescence.

Host Dani Shuey (DS)

Hello, and welcome back to Kids Health Matters.

Today we are tackling a really difficult subject faced by many parents, carers and families, and that is supporting children and young people experiencing a mental health crisis. We are mindful of and understand the enormous stress and anxiety associated with this topic and we hope this episode will give you insights into the best way to support a young person in this situation, particularly by highlighting a specialised mental health service for young people experiencing distress.

Firstly, I'd like to put out a trigger warning ahead of this episode. If it raises any issues of concern for you or you need support, please contact lifeline on 13 11 14.

Nurse Danielle Englebrecht is here in studio once again.

Hello Dani.

Co-host Danielle Englebrecht (DE)

Hi, Dani.

DS

Dani, there is so much to unpack, in fact, I think we are going to have to do this over two episodes. It is an extremely important topic and I think this is going to shine the light on an amazing service available to so many people.



DE

Thanks Dani. Yes, this is a great opportunity for us to really raise the awareness of the important work that CAMHS Crisis Connect can do for our community and for our young people.

DS

Absolutely, and we are really looking forward to shining a light on the work of CAMHS in studio today and spreading awareness about just how important this service can be.

We are joined by Veronica Plej, a clinical nurse specialist at CAMHS Crisis Connect; CAMHS, of course, being the Child and Adolescent Mental Health Services. We're calling it CAMHS throughout this episode because that is a lot less wordy and easier to say.

Hello, Veronica.

Guest Veronica Plej (VP)

Hi Dani.

DS

Veronica, thank you so much for being here. Let's talk about what you do with CAMHS.

You are a clinical nurse specialist so can you explain a little bit more about your role and what that exactly entails?

VP

Sure, my role involves clinical responsibility to provide acute mental health support, both to young people and families around the Perth metropolitan region. I also provide mental health advice to organisations, clinicians, schools, other hospitals, private clinicians, general practitioners and specialists supporting young people in their care. I'm also involved in assisting staff through complex presentations and situations and I'm heavily involved in the CAMHS Crisis Connect Intervention Program.

DE

Veronica, you were saying before we started the show that you had a calling to do nursing from quite an early age and I was wondering if you could explain to everyone exactly what drew you to this particular area of nursing?



VP

Sure Dani, I'd say the first time I thought I wanted to be a nurse was around the age of eight or nine. I had a favourite aunty who I spent a lot of time with who unfortunately suffered from her own mental health issues for a long time and had several inpatient admissions to various psychiatric units around Perth. I was the youngest of three siblings by quite a lot and so my parents would take me with them to visit her; I'd wander off and see the other inpatients and was fascinated by what their stories were. So I spent a lot of time talking to them and that's how it all started.

I have two young children, well not so young anymore, 20 and 21, and when I was raising them I saw the struggles that some of their friends had, the challenges they were exposed to and I recognised that every young person wants the same thing really - to feel value connected, validated.

I'm very passionate about my work and find it very rewarding.

DS

Veronica, I imagine it would be extremely difficult to walk away from a situation where you meet a child who's suffering and needs help. That would be incredibly hard, once you've delved into the world of being a mental health nurse.

VP

Absolutely it is. I don't think you ever do truly do and I think if all you do is plant a seed in that young person's life, in their mind, support them and make space for them to go through their journey, then I think we've achieved a lot.

DS

You're working with our children when they're most vulnerable as well.

CAMHS is the Child and Adolescent Mental Health Service for children under 18 yes, is that right?

VP

That's right, up to 18 years old.



DE

From your experience as a mental health nurse can you describe the difference between going through a rough patch, because many of our young people do go through a rough patch, and can you tell us what CAMHS provides for young people, and what constitutes a crisis for our children?

VP

Sure, yes, it can definitely be difficult to differentiate.

Broadly speaking a crisis this could be a higher-level severity of symptoms and a decline in daily functioning and in their mental health, whereas a rough patch could self-resolve with support from family and friends. A crisis sometimes needs more professional support.

DS

So when do we know a child has actually reached crisis mode?

VP

So crisis mode can be when families are not able to support their young person safely at home or in the community. They might be suffering their own burnout and they're reaching out for help.

There are plenty of resources available if they call the CAMHS Crisis Connect number our clinicians can talk on the line to them and explore this further.

DS

So what can parents or carers do when this happens, or when they suspect it might be happening, and they have a child or young person in distress?

VP

By reaching out to us on our Crisis Connect number our staff will follow a therapeutic approach that reflects the overall values of our health service.

By this approach we recommend that the adults stay calm because an adult's emotions will have a huge impact on the young person. Provide them with a quiet space where the young person feels comfortable; give your full attention to the young person, actively listen to them without interrupting, provide ample opportunities for them to vent, let the child speak, explore their feelings, be gentle and be curious about what's been happening to them.



There could be issues at school, they may have had a falling out with a peer or a friend, there could be several underlying reasons for this crisis.

This will also give you an opportunity to build a closer relationship with your child.

DS

We are all mums here in studio, and you both have older children than me, but we understand that when you're trying to help a young person sometimes you jump into counsellor mode, don't you? You try to solve the issue for them and you ask lots of questions.

But Veronica, you are saying that it's actually less about talking and more about listening.

VP

Yes, that's right. You may need to remove them from the current environment if there is a lot going on or if it is really noisy and take them into a lower stimulus environment where they've got quiet space to think. Simple things like offering them a warm drink, putting on their favourite music or, giving them an item - that comfort can be enough to take away those escalated emotions.

DS

Yes, keep them calm before you seek the professional help that you might not be equipped to do yourself, which a lot of us really aren't.

DE

Veronica, some of these signs are quite obvious but what about some of those subtle signs that show that our child is in emotional distress?

VP

I guess anything that stands out differently from their usual self; a change in behaviour. For example, spending too much time on their own where previously they were very social, not wanting to go to school despite being physically well, changes in their sleep or eating patterns, difficulty keeping up with activities they regularly enjoy like sports, or difficulties in academic performance.

DE

I often hear from friends and colleagues about their children starting to not want to go to school. What kind of things can we do in terms of getting our children to school or exploring some of those reasons as to why they might not want to go to school?



VP

We would recommend digging deeper to seek out what the underlying cause could be, but in a gentle, curious manner, rather than making it become larger than life.

Has there been a change in school recently? It may be a transition from primary to high school, a change in class or teacher. Are they finding the subject particularly difficult? Are they worried about their grades? Is there any bullying going on?

They are all factors which could influence a child not wanting to go to school.

DS

I was reading about this recently. This might be a little bit off topic here but I think it still relates.

Let's say my young son is saying mum, I don't want to go to school; it's coming from a place of anxiety but you just can't put your finger on what it is and at that age, they can't really tell you the reasons why they don't want to go.

And they've had your attention the whole weekend; fun with lots going on and then on Monday, it's like we're separating. As parents or carers just knowing where that's coming from sometimes really helps us make sense of it, and then we're better equipped to be able to help them and acknowledge what they're feeling.

DE

Yes and Dani we've talked about anxiety before so that is probably a good segue to start talking a little bit about what the signs of depression are.

DS

Before we went on air Veronica, I was asking you about the difference between anxiety and depression.

For our listeners, could you just give us a brief overview of the difference between the two?

VP

Sure, depression can present in different ways but things like young people withdrawing to their rooms, remaining in bed, finding it really difficult to get out of bed, refusing to get engaged in their normal activities or not wanting to go to school can be a sign of depression; not wanting to participate in things they previously participated in and were happy to do are all signs of



depression; as well as interruptions in their sleep and a loss of appetite, these are all signs of depression.

DS

So it's attributed to low mood and just no zest for life at that point in their life.

VP

Yes that's right; they can usually be linked to what is going on in the child's environment.

We recommend a curious approach, gently prompting the child, asking them with kindness, having a conversation with them, and maybe putting it like 'I've missed spending time with you the last week' or 'I've noticed you haven't gone for a walk like you normally do'. Opening a conversation with these sentences would help the child feel secure and supported and they will often reach out then.

DS

Is anxiety something that's a little more common, and experienced by more people, young people as well?

VP

Absolutely, I'd go so far as to say that everyone experiences anxiety to some level. The differences is how crippling and how debilitating it is, and early intervention is known to have best outcomes for anxiety.

So someone might be a bit nervous about going to school; that's a form of anxiety and these symptoms can be felt in the body, so obviously saying 'mum, I've got a sore tummy' can often be somatic symptoms due to anxiety, and things like headaches, can set up a whole other level as well.

So yes, we support parents to know when to actually do something more and when to use techniques to manage the anxiety.

DS

We've come a long way in society talking more about things like anxiety and depression and I think you hear about it more and I think a lot of young people are probably more comfortable with saying yeah, I have anxiety. Now we're going in the right direction of seeing people recognising symptoms;



being able to speak up and get themselves help when needed. That goes for carers and parents who hear what their young people are saying and referring them to the right people.

VP

I think once upon a time saying you had anxiety was looked at as a sign of weakness whereas now people can say I've got anxiety and I'm managing my it so I'm able to go through everything.

DS

So there is so much we want to ask about the work you do with CAMHS Crisis Connect, so can I ask exactly what it is you do?

VP

CAMHS Crisis Connect is a team of dedicated and expert mental health professionals who are an excellent source of support for young people and their families in the community who are struggling with their mental health.

Our staff have the best interests of patients at heart and often go that extra mile to support them. We will spend time lots of time on the phone with them, listen to their concerns and provide validation. They also provide mental health advice to families, carers and professionals guiding them in the right direction to appropriate mental health support for the child.

We are Perth metropolitan wide service. WA Country Health has an equivalent service so if you're listening from outside the Perth metropolitan area they can be contacted for any concerns you have.

DS

It is a really great service, and to have it statewide as well is pretty incredible.

How can CAMHS Crisis Connect help?

VP

We've got a crisis line and [1800 number](#) so anyone can call that number, including parents, young people, teachers, school support staff, carers, medical professionals, friends, and that can provide urgent mental health support and advice for children and adolescents.

It runs 24 hours a day and you can call, even if you wake up in the middle of the night and you're struggling. The only criteria is that the young person you're discussing needs to be 18 and under.



DS

We have discussed a little why people might come to CAMHS Crisis Connect in the first place if they're worried about their child under the age of 18 but I think it deserves its own episode.

We might do this in two parts because we want to delve into CAMHS Crisis Connect, the work they do, the services they offer, and a bit more information so we'll give the listeners that in part two of this episode.

Veronica Plej, a clinical nurse specialist for CAMHS, thank you so much for joining us in studio today. And nurse Daniel Engelbrecht, thank you for being here once again.

CAMHS is a free service, [1800 048 636](tel:1800048636) – call 24 hours a day, seven days a week.

Thank you so much for listening to Kids Health Matters. We'll catch you in part two.

Thanks for listening to Kids Health Matters - a podcast produced by the Child and Adolescent Health Service. You can find more information and links to useful resources in the show notes for each episode. You can also email us with any feedback at kidshealthmatters@health.wa.gov.au.

