DIVERSE MINDS
LEARNING & LEISURE CIC

PARENT, CARER AND PRACTITIONER GUIDE

# Supporting the overwhelm toolkits

## How to offer activities, respond to concerns and follow up.

**A companion to real conversations and in-person support.**

Guidance for using the child and teen toolkits, responding to safety concerns and following up.

**Read alongside the toolkit. Keep this adult guide separate.**

USING THE TWO VERSIONS

# Keep support personal

Choose the version that suits the reader, their preferences and communication. There is no ability test or fixed age cut-off.

## Child toolkit

Shorter instructions, playful examples, drawing and help signals. Read aloud or offer one idea at a time if wanted. Do not expect a child to navigate all ten pages during distress.

## Teen toolkit

More mature examples and language, with the same activity choices and safety routes. Ask what feels appropriate rather than assuming based on age. Offer typing or the person's usual communication method.

## Connection comes first

Ask whether they want company, space or practical help. Reduce noise, questions or demands where possible. Activities support human contact and in-person outreach; they do not replace it. A quiet child may still need help.

Child and teen pages contain no adult instructions or detailed reference lists. Simple safety messages, help cards and routes to real people remain in both.

SAFEGUARDING

# Act before offering an activity

Do not use a calming task to delay protection, medical help or a response to bullying or harm. [6]

## Listen and explain

Take a disclosure seriously. Listen without leading questions or investigating. Reassure them that telling was right and harm is not their fault. Do not promise secrecy or confront the person named. Explain what will happen next. [6]

## Use the right reporting route

Practitioners should follow child protection procedures promptly and record the child's words accurately. Use an alternative reporting route if the designated lead is unavailable or involved. Parents and carers can contact local social work or police about safety concerns. [6]

## Urgent help

Phone 999 for immediate danger or a medical emergency. Do not assume severe symptoms are anxiety. For other urgent advice, contact a GP or NHS 24 on 111 in Scotland. [8,9]

Check that concerns reached someone able to act. Involve the young person and explain any necessary information sharing in a way they understand.

OFFERING ACTIVITIES

# Choice matters more than completion

The prompts are practical options, not a treatment programme. The combined toolkits have not been evaluated as a clinical intervention.

## Breathing is optional

Offer gentle, comfortable breaths with no holds or target pace. Short counts and line tracing are adaptations here. Stop with dizziness, breathlessness or increased distress; return to usual breathing and seek help as needed. Follow existing medical plans. [1]

## Adapt without adding pressure

Offer an alternative to touch, sound, looking around, movement or writing. Use familiar pictures, imagined patterns, spoken instructions or directing someone else. Keep mobility aids available. Ask before touching the person or their equipment. Use suitable materials.

## Keep creative work private if wanted

Drawing or invented scenes can be ordinary activities. Do not interpret them as diagnostic evidence or require the child to explain them. Avoid recreating distress. If an activity brings up a safety concern, respond to the concern rather than continuing the task.

If an activity makes things harder, stop and reconnect. Help must never depend on participation, a calm voice or an acceptable-looking reaction.

FOLLOW UP IN PERSON

# Change what is making life hard

An activity may help in a moment while the underlying problem still needs attention. Repeated worry affecting daily life warrants further support. [5]

## Notice with the young person

At an easier time, explore noise, crowds, rushing, uncertainty, pain or feeling unheard. Ask what they noticed and what they want changed. These are possibilities, not a checklist that explains every reaction.

## Agree one change and one follow-up

Agree who will make a practical change and arrange a check-in. Confirm who covers absences. If help is delayed, record the concern and try another route. The child should not have to chase support.

## Agreed change and responsible person

Include any access or communication adjustments.

## Check-in date and backup contact

Check whether the young person felt heard and whether help happened.

SHANARRI offers a shared way to consider safety, health, learning, care, activity, voice, supported responsibility and inclusion. It is not a score or a condition for help. [7]

EVIDENCE AND FURTHER READING

# Sources for all three booklets

These sources inform the general approach. Creative scenarios and activity wording are original prompts; each activity has not been individually tested.

**1. NHS: breathing exercises for stress**

nhs.uk/mental-health/self-help/guides-tools-and-activities/breathing-exercises-for-stress

**2. Childline: Calm zone**

childline.org.uk/toolbox/calm-zone

**3. Childline: getting through a tough time**

childline.org.uk/info-advice/your-feelings/feelings-emotions/getting-through-tough-time

**4. Childline: asking an adult for help**

childline.org.uk/info-advice/bullying-abuse-safety/getting-help/asking-adult-help

**5. NHS: anxiety disorders in children**

nhs.uk/mental-health/children-and-young-adults/advice-for-parents/anxiety-disorders-in-children

**6. NSPCC Learning: recognising and responding to abuse**

learning.nspcc.org.uk/child-abuse-and-neglect/recognising-and-responding-to-abuse

**7. Scottish Government: wellbeing and SHANARRI**

gov.scot/policies/girfec/wellbeing-indicators-shanarri

**8. NHS: when to call 999**

nhs.uk/nhs-services/urgent-and-emergency-care-services/when-to-call-999

**9. NHS 24: contacting 111**

nhs24.scot/111

Sources reviewed 29 October 2026. Guidance supports existing safeguarding procedures and individual care plans; it does not replace either.