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| Summary Notes PUPIL MENTAL HEALTH: WHEN TO WORRY AND WHAT TO DO NEXT |

## Introduction

* Throughout this course, we will identify what wellbeing refers to, consider the role of the mental health continuum and its contribution to our understanding of illness and wellness.
* We will briefly outline vulnerability as well as considering how to promote mental wellbeing.

Before starting this course, what is your understanding already of pupil mental health? When would you be worried and what would you do?

## What is mental wellbeing?

* We just embrace the sentiment of the phrase “there is no health without mental health” as Health and Wellbeing refers to a whole umbrella of areas.
* We need to consider the physical, cognitive, social, and mental wellbeing. Wellbeing and a general sense of being well can enable both students and staff alike to be able to have fulfilment in their lives.
* Health and wellbeing is also about ensuring that pupils are able to make the most of their educational opportunities regardless of their background or financial circumstances and through promotion of attendance at school.
* Mental wellbeing does not just refer to people who do not have mental illnesses neither is it merely the absence of disease or infirmity. The accepted definition is now much more all-encompassing. It is an indication of how well a person is from a social, emotional and physical perspective.
* Many things impact our mental wellbeing but four examples which relate to education might be the school and community environment, physical health and lifestyle factors, family background and home environment and social and emotional skills as they can alter perceptions of safety and belonging, the ability to be able to communicate clearly with others and generally feeling that we can copy with activities of daily living.

What does your school, college or service do to protect the general health and wellbeing of the whole school community?

## WHAT IS THE MENTAL WELLBEING CONTINUUM?

* The mental wellbeing continuum shows that we can slide between positive/optimum wellbeing through to mental ill-health which will have an impact on the daily lives of the individual.
* The green section reflects what is seen as healthy. It is healthy to experience changes in our moods, have a regular sleep pattern, be psychically and socially active and to deal with some stress. We want to keep people in this section as much as possible so that they are healthy and thriving. That will be achieved most likely through our usual offer but we need to ensure that wellbeing is a part of the daily routine in school.
* Are their reflective opportunities, regular wellbeing activities which might make up part of a more comprehensive wellbeing programme which is supported by every member of staff. Cake and chat sessions have been found to be effective with older students and perhaps something like mud painting for those in primary settings.
* Embrace the principles of kindness through both actions and activities also leads to students and staff reporting higher levels of mental wellbeing. You could try something like reporting on kindness which is also endorsed by a Place2Be. Students could write blogs which could be posted on your website or social media channels. This could reflect things that have been done that week which were kind.
* The yellow section of the continuum reflects an individual who is experiencing some reversible distress. We might look out for irritability, increased nervousness or worrying, trouble sleeping (falling asleep in class), changes to social activity levels.
* It is normal to experience some reversible distress or fluctuations away from our usual functioning particularly in light of stressors (big life events such as moving house). It is likely to be things that we can deal with in house perhaps through peer mentoring, use of mental health first aiders and so on. However, this can also cover natural reactions to difficult life events such as bereavement where a person may be coping but still struggling.
* We may want to consider seeking support from specific organisation that can provide a friendly listening ear for the individual.
* The Orange zone is referred to as significant functional impairment which is a complicated way of saying that the individual may be starting to struggle with coping, their usual coping strategies may not be working and it is starting to effect their daily functioning.
* We will want to be thinking here of our informal and formal referral routes and to intervene early so that we can try to mitigate against the individual going into the red section which signifies an individual who crossed over into mental ill-health. That means that they will be out of their depth and unable to cope.
* We will see significant changes in their thoughts, feelings and behaviours. They may be experiencing severe symptoms and will need support from professionals. This is when we will need to consider our referrals to mental health services and keep a watchful eye on the individual.
* Those who are struggling with their mental wellbeing or who might be experiencing mental ill-health may be experiencing a range of difficult life events such as trauma, they may have unhealthy coping mechanisms such as addictions or experience biological changes in the brain which can be caused from a number of things.
* To summarise, Mental health is everyone’s responsibility.
* We need to remember that some fluctuations in moods, emotions and feelings is normal.
* It is also normal to experience the full range of emotions especially when faced with significant life events. Early intervention is key to keep as many people as close to the green side of the continuum as possible.
* Individuals who are experiencing a deterioration in their day-to-day functioning will need professional support.

What do I know now about the mental health continuum?

## INTRODUCTION TO VULNERABILITY AND HOW TO PROMOTE MENTAL HEALTH

* Vulnerability within the mental health context refers to the likelihood of an individual developing a mental illness.
* Exposure to risk factors can increase an individual’s vulnerability whereas protective factors can minimise the effect that risk factors. The risk factors of each mental illness do differ and are myriad but here are some of the main ones to look out for:

Environmental risks:

Poverty

Natural disasters, war and violence in the community

Refugees/asylum seekers

Homeless

Family risks:

Attachment difficulties

Parental conflict

Family breakdown

Witnessing domestic violence

Abuse and neglect

Parental illness (mental and physical)

Inconsistent discipline and expectations

Individual risks:

Genetics/inherited illnesses

Developmental delay, low IQ

SEND

Communication difficulties

Low self-esteem

Poor attendance and academic achievement

* Those experiencing stigma and discrimination perhaps with regards to protected characteristics such as gender, sexuality, ethnicity, religion, disability and more.
* We are well-placed as educators to decrease vulnerability and contribute to the protective factors which can help to keep everyone on the healthy side of the continuum.
* Mindfulness refers to the power of being present in the moment-a time to take a breath and pause from the busy school day. Some schools have found techniques such as buddy breathing useful (script included in the notes section.
* Ensure every child knows the ‘5 Ways to Wellbeing’ which are to ‘Connect,’ ‘Be Active,’ ‘Take Notice,’’ Keep Learning’ and ‘Give.’ Provide regular opportunities for this to happen in the school day. We should help all children to fill their bucket. This refers to gratitude and what we can be grateful. This can be done in several ways but might start with children drawing their own bucket and labelling it with things that they are grateful for.
* In the secondary and further education settings, Peer mentoring/peer listeners are an easy system to set up with some staff supervision. It can provide opportunities for young people to talk through their concerns with a peer which is something that many young people prefer. It is useful in situations of lower-level distress and can be a way of flagging up more serious concerns. The mentors will need some training around not promising to keep secrets if someone is in danger and how to report concerns to members of staff.
* Teaching resilience: Resilience is the capacity to adapt well when faced with adversity or stress. Resilience helps students stave off potential negative psychological effects of challenging experiences. Resilience involves more than continuing to persist despite difficulty. Resilient students interpret academic or social challenges in a positive way (such as increasing effort, developing new strategies, or practising conflict resolution).
* Ask children and young people, “What are you saying to yourself?” and “What are you thinking inside your head?”, and if necessary, help them to reframe these thoughts.
* Teach students to think “What’s wrong with this situation?”, not “What’s wrong with me?” or “Why me?”.
* Schools can help by trying to encourage good relationships with friends, teachers and other members of staff. It is important that students have somewhere they feel they belong (clubs, activities and favourite places in school) and that they meet people who are good influences, who can help them make sense of where they have come from and their place in the world.
* Helping your students to develop talents, interests and life skills, encouraging them to learn how to cope, how to express their emotions, understand boundaries and have aspirations, are crucial parts of helping them become more resilient. Each time a student faces a learning problem they’re happy to share publicly, write it on the board. Then, have students brainstorm the best ways to solve the problem, experimenting with different strategies.
* Teaching help-seeking: Help students identify situations that make them feel distressed, anxious or angry, and talk about ways of dealing with these feelings and identifying these feelings in other people. This can help them to also understand that asking for help is a strength and also would provide opportunities to know who is available incised and outside of school.

What ideas do you now have about how you can promote the mental wellbeing of your school community?

## WHEN TO INTERVENE

* We need to spot changes within a young person and be curious about those changes.
* We need to decipher where a young person might be on the continuum and the level of risk they are in. There is lots that we can do in school for young people experiencing difficulties such as anxiety, exam stress and more.
* ‘Watchfully support’ all young people that we have concerns about, monitoring their day-to-day coping and how long they are experiencing the difficulties.
* In situations of medium risk or individuals in the orange zone of the continuum, we will want to start to use a range of voluntary/specialist organisations to provide further support, making use of in-school counselling or other in house offers.
* For individuals in high risk, showing the signs of mental illness, significant self-harming or suicidal thoughts/intention, an active suicide attempt, we will need to refer to CAHMS or follow our emergency protocols e.g. calling 999.

What referral mechanisms do you have in your school

## Continue your learning

### Courses

Links to other on demand training:

This course is designed to offer an introduction before you consider our more indepth course such as our spot and support & meeting the needs pathways.

You can find the spot and support pathway here: <https://www.creativeeducation.co.uk/courses/mental-health-issues-spot-support/>

You can find the meeting the needs pathway here: <https://www.creativeeducation.co.uk/courses/mental-health-meeting-the-needs-series/>

Making appropriate and effective internal and external referrals for children:

<https://www.creativeeducation.co.uk/courses/making-appropriate-and-effective-internal-and-external-referrals-for-children/>

Making appropriate and effective internal and external referrals for adults:

<https://www.creativeeducation.co.uk/courses/targeted-support-and-appropriate-referrals-pathway/>

### Resources

## Clare Erasmus (2019) [The mental health and wellbeing handbook for schools: transforming mental health support on a budget](https://www.amazon.co.uk/Mental-Health-Wellbeing-Handbook-Schools/dp/1785924818/ref=sr_1_36?dchild=1&keywords=eating+disorders+teachers&qid=1629035164&sr=8-36).

# Pooky Knightsmith (2019) The Mentally Healthy Schools Workbook: Practical Tips, Ideas, Action Plans and Worksheets for Making Meaningful Change: Practical Tips, Ideas and Whole-School Strategies for Making Meaningful Change.

Mind have useful strategies, a list of supportive services and information:

<https://www.mind.org.uk/information-support/types-of-mental-health-problems/self-harm/useful-contacts/>

Mentally Healthy schools offer a range of resources:

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

# Promoting and supporting mental health and wellbeing in schools and colleges

<https://www.gov.uk/guidance/mental-health-and-wellbeing-support-in-schools-and-colleges>