

how are you feeling?



HAPPY SCHOOL

Mental Health Guide



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For whom is this course?



- For teachers, who are working hard, and hesitate to ask for help;
- For students who are angry, because they don't feel safe;
- For parents, who feel lost in the shadows of psychology



What is the goal of this course ?



To empower whole school community to support each other in healthy and constructive manner.

To develop core understanding about mental health.

To provide practical tools and tips how to cope with particular mental health challenges at school

To show big and systemic picture how your school can be a Happy school – supporting mental health.



Why mental health is important?

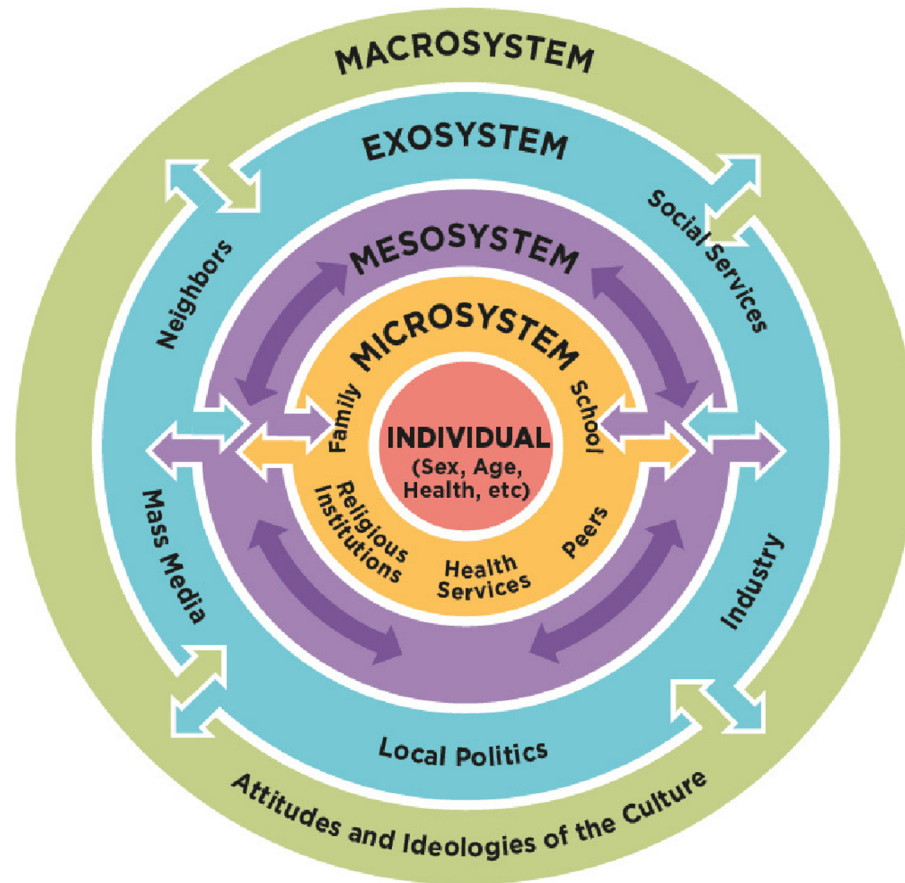
Approximately 1 in 5 children display signs of poor mental health and, at any given time, meet the criteria for a mental illness (Merikangas et al., 2010). About half of all mental illnesses begin in childhood and adolescence (Kirby & Keon, 2004).

- Rising rates of reported trauma, anxiety, depression, and substance use among young people are a concern for families and educators alike.
- Trauma and mental health challenges can impact child development, learning, memory, concentration, focus, optimism, energy, motivation, overall wellbeing, and goal-directed behavior.
- Mental health problems increase the risk of repeating a grade, truancy, and dropping out of school.

The risk of developing an internalizing or externalizing mental health problem can be lessened by changes in the school environment and by the implementation of evidence-based school programs. For example, there is strong evidence that bullying behavior has a significant and lasting impact on mental health. Therefore, anti-bullying prevention and intervention activities, along with other prevention and intervention practices, are key features of, and to promoting mental health for all.



System approach to mental health Bronfenbrenner's Ecological Systems Theory



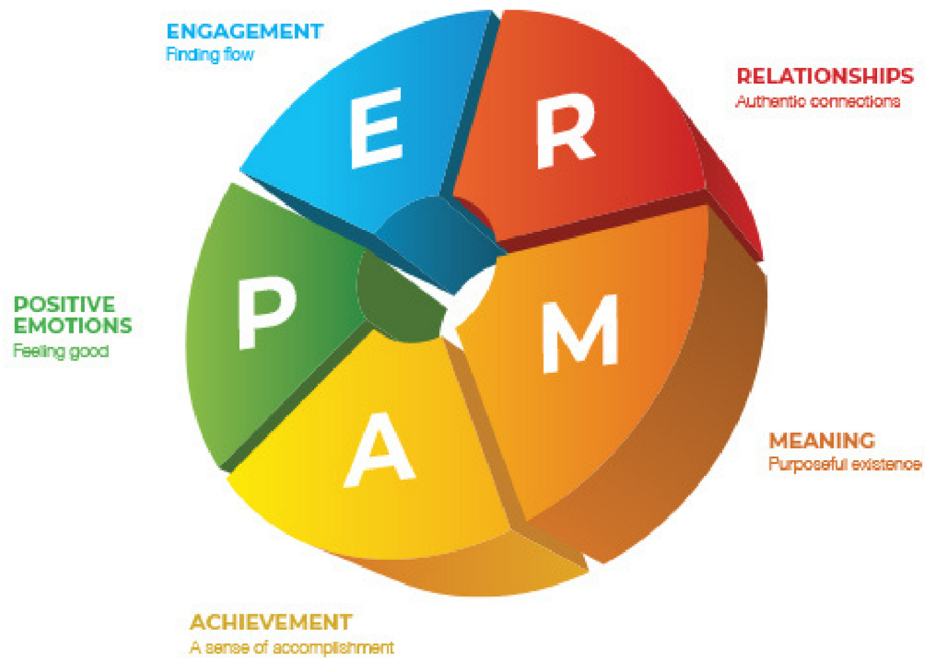
What is school mental health?

The term school mental health encompasses a continuum of policies, procedures, and practices that promote social, emotional, and behavioral development and the mental well-being for all persons in the school community.

School mental health is:

- a positive, safe, and supportive school climate and culture.
- adequate access to mental healthcare when students and their families need help





Positive Psychology focuses on the study and practice of the positive emotions, strengths, and virtues that make individuals and institutions thrive.¹

Martin Seligman, one of the founders of positive psychology, developed the PERMA Model that can help people work towards a life of fulfillment, happiness, and meaning.²

Seligman's PERMA Model³

P – Positive Emotion: ability to remain optimistic

E – Engagement: activities where we find calm, focus, and joy (ex: dancing, playing a sport)

R – Relationships: strong, positive connections with others

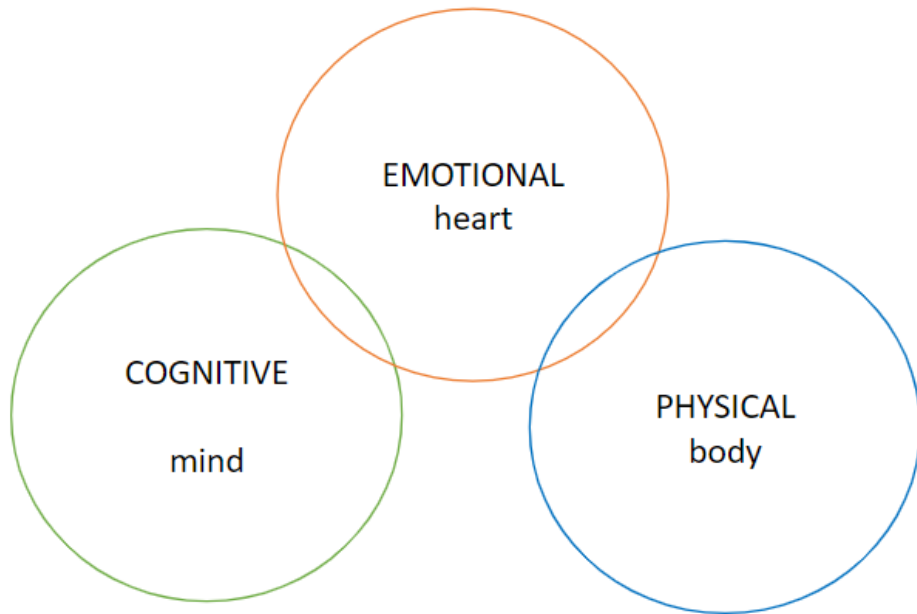
M – Meaning: purposeful existence (ex: religion and spirituality)

A – Accomplishments: pride in achieving goals

Positive psychology aims to increase aspects of wellness. The terms “wellness,” “well-being,” and “happiness” have often been used together or interchangeably by business, researchers, and the media.



Three Pillars of Happy school



Happy school model appreciate whole human approach to mental health. Happy school says that we can achieve sustainable mental health only if school environment equally cares about our physical well-being, emotional well-being and peaceful mind.

The World Health Organization (WHO) defines health as “a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity“. Indeed, “there is no health without mental health”.

Building components of school mental health

- Mental health literacy and promotion
- Early mental health prevention and intervention
- Building skills related to managing emotions, establishing and maintaining positive relationships, and making responsible decisions
- Suicide prevention, intervention, and postvention
- Positive youth development
- Positive behavior intervention and supports
- Grief-informed and trauma-informed practices
- Safe, supportive, and positive school climate.



Mental health promoting schools (promotion and prevention)

Mental Health Foundation (1999) has identified important characteristics of schools that promote the mental well-being of their students includes:

1. Having a committed senior leadership team that focuses on creating a culture based on trust, integrity, democracy and equal opportunity in which each child is valued and respected regardless of their abilities;
2. Creating a culture that values teachers, non-teaching staff and all those involved in the care and supervision of pupils;
3. School-wide policies on important issues such as behaviour and bullying that are clearly set out, accepted and implemented throughout the school.
4. It is important that school curricula take a holistic approach to, and keep a balance between, academic content and personal, social and moral development.



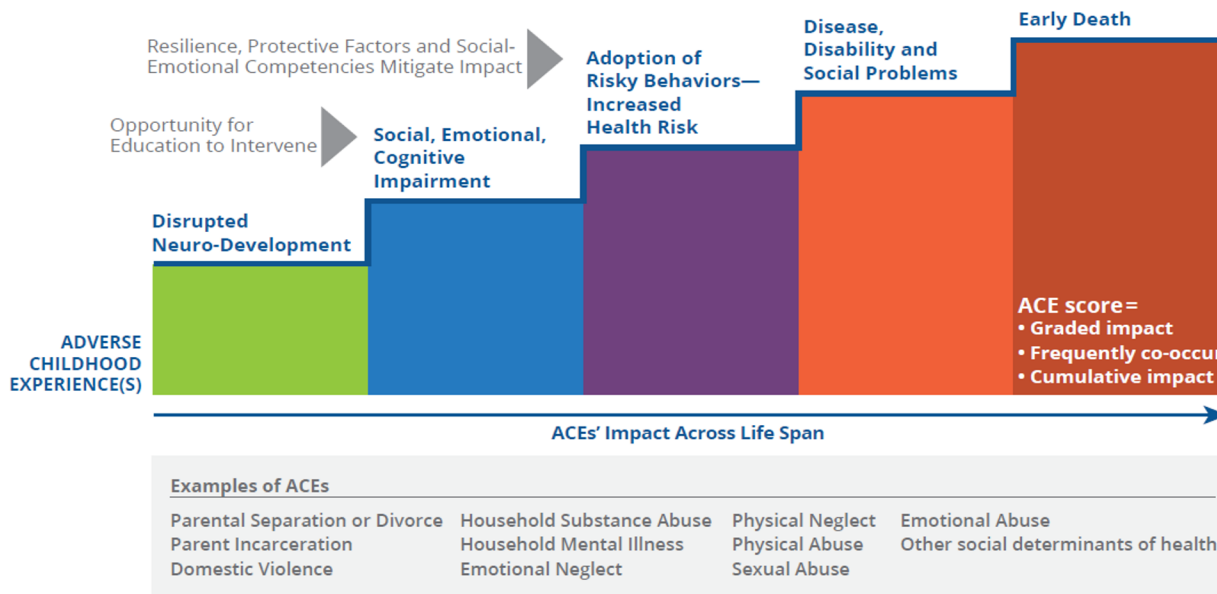
Adverse Childhood Experiences (ACEs)

Adverse Childhood Experiences (ACEs) are potentially traumatic events that occur in childhood. ACEs can include violence, abuse, and growing up in a family with mental health or substance use problems.

Preventing ACEs can help children and adults thrive and potentially:

- Lower risk for conditions like depression, asthma, cancer, and diabetes in adulthood
- Reduce risky behaviors like smoking and heavy drinking
- Improve education and employment potential
- Stop ACEs from being passed from one generation to the next.

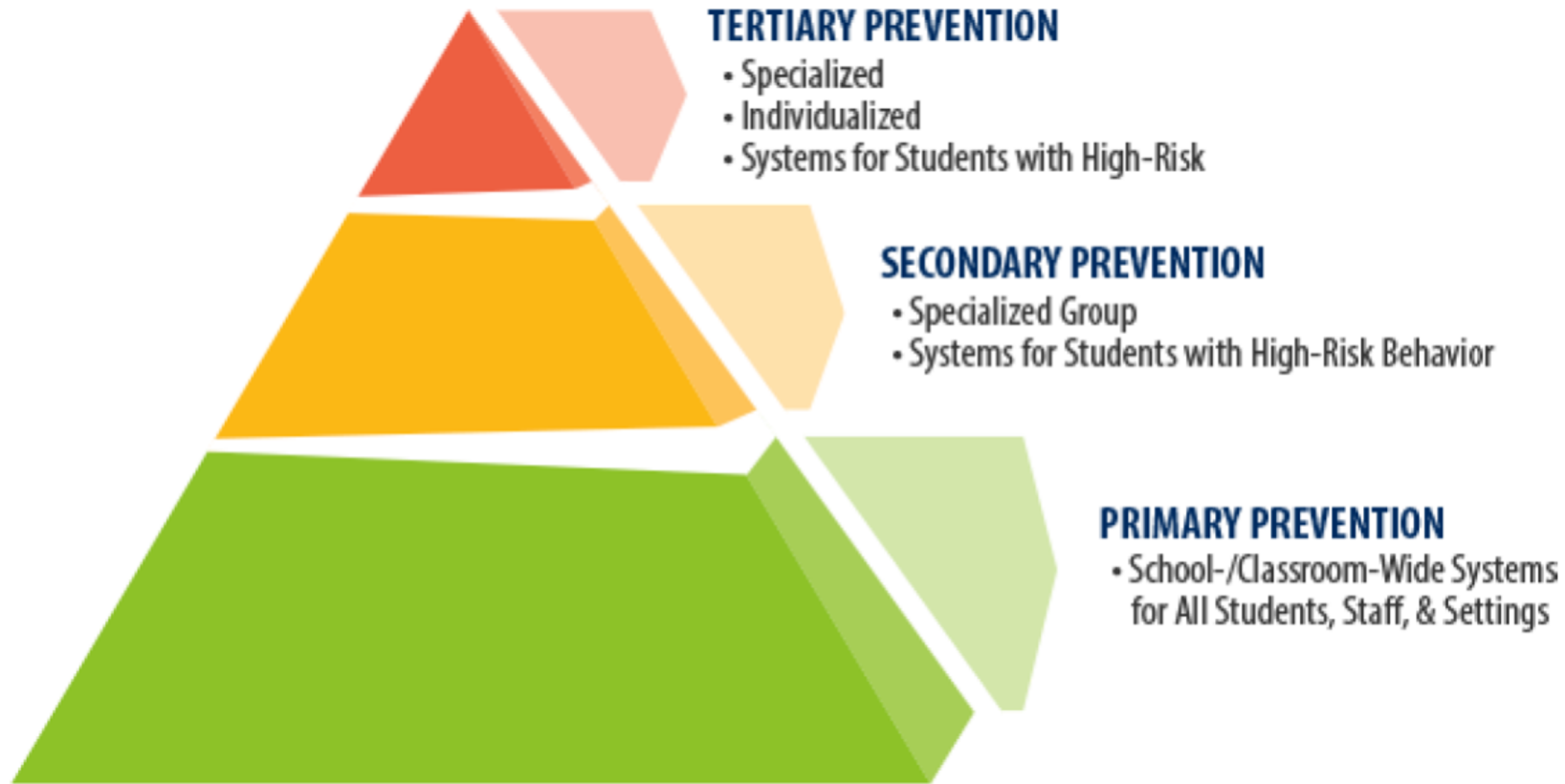
Adverse Childhood Experiences (ACEs)



Stress from ACEs can change brain development and affect how the body responds to stress. ACEs are linked to chronic health problems, mental illness, and substance misuse in adulthood. However, ACEs can be prevented. Researchers estimate that 61 percent of adults have at least one ACE, and 16 percent have four or more ACEs.



Multitier approach to prevention



School intervention can...

Schools are the primary mental health service provider

60-80% of children who receive mental health service do so in schools

Youth 6 times are more likely to complete mental health treatment in schools than in other settings.



Schools afford a great opportunity not only to identify and support children who are experiencing emotional difficulties but more importantly to promote overall emotional well-being and social and moral development. Schools are imperative in mental health promotion and prevention.



What Are the Benefits of School Mental Health?

School mental health practices can result in improved academic outcomes and related assets for students, families, educators, schools, and communities, such as:

- Increased social and emotional knowledge, understanding, and access to supportive community resources
- Strengthened relationship-building and relationships to support learning
- Strengthened school engagement with children being better prepared and able to concentrate on learning
- More families participating in their children's education
- Preparation of school staff to address students' mental health needs
- Reduced educator stress and strengthened educator wellness
- Early identification of mental health challenges
- Early and adequate access to counseling and treatment through school-connected and community-based services
- Suicide prevention
- Improved school attendance, dropout prevention
- Substance use and misuse prevention
- Response, and recovery in crisis situations
- A positive, safe, and supportive school climate
- Reduced stigma associated with mental illness
- Reduced symptoms of mental health conditions including anxiety and depression
- Enhanced emotional wellbeing, overall health and wellness
- Improved school safety



Benefits for life

- School experiences are vitally important in both children's intellectual development and their psychological well-being, and evidence increasingly illuminates the close connection between emotional health and academic achievement; hence, schools enhance school achievement by attending to issues such as self-esteem and social well-being (Hattie, 2008; Rutter, 1991).
- In addition to school success, children and adolescents who experience positive emotional and social well-being report greater satisfaction with their family and their relationship with friends (Gutman & Feinstein, 2008). Conversely, children with emotional problems are more prone to academic failure and quitting school, making them vulnerable, targets for child labour, substance abuse, criminal involvement and violence, as well as unemployment. Thus, schools have a critical role to play regarding student mental health.



What skills do you need for students... and for adults



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Core values of a mental health-promoting school

Caring for all

- It is important to foster a culture of understanding in which students who have difficulties are viewed as being in need of help rather than as a burden.
- Communicating through actions that all students are valuable, for example by spending time highlighting different students' talents and achievements and how each of them is unique.
- Creating an environment that doesn't discriminate between students, where each student is treated equally and fairly independent of their disability status or any other factor.
- Creating a mechanism to deal with complaints that includes clearly designating who a student can go to if they have a concern and a chain of command.

Core values of a mental health-promoting school.

Valuing diversity

- Help students appreciate how diversity (ethnic, religious, disability status) contributes to the education, understanding and appreciation of all. Teachers need to communicate positive attitudes towards children with special needs so that other students recognize how best to respond to children who may seem different. For example, a student helping another child using a wheelchair to move around the school.
- Practical steps to promote diversity include:
- Establishing a buddy system.
- Having students with special educational needs in mainstream classrooms, which can have a positive impact on other students, particularly in the area of developing social skills.
- Helping students develop pride regarding their backgrounds, heritage and culture as they bring them up during school activities.



Core values of a mental health-promoting school.

Building self-esteem

- Schools play a fundamental role in students' self-esteem, and staff have a substantial impact on how students see themselves and how they are shaped for the future. Being in situations where they consistently experience failure at school usually has a detrimental impact on self-esteem in students. Similarly, when students have success at school, when they correct their mistakes, it builds self-esteem.
- Children responsibility and leadership roles whenever possible (look for tasks that students can do). Have children complete chores in the classroom (these can be rotated) or display leadership in activities such as organizing field trips.
- Foster cooperation rather than competition between students. Recognize when students work well together and produce something stronger than just individual parts. Notice and respond to students who help others and who are good “team members”.
- Older students can mentor or “big brother/big sister” younger students to help the younger students play with others, learn to read, etc.



Core values of a mental health-promoting school

Building relationships

- Good relationships between students and their teachers and among students are very important for students' emotional development because they learn many skills and values including core social skills, such as the ability to trust and be responsible for their own actions.
- Greater cognitive and affective achievement has been linked to more cohesive relationships and less tension within the classroom. Schools with poor relationships tend to lead to depression and absenteeism not only in students but also among teachers (Weare, 2000).
- Teachers model relationships for their students through their interactions with other teachers and with students, so the more collaborative, constructive and beneficial those relationships appear, the more students will be attracted to those behaviours.
- Liaising with parents is of paramount importance. Parental involvement is positively associated with student success, higher attendance, greater teacher satisfaction and overall improved school climate (Hornby, 2000). Staff contact with parents should always model respect for parents but still provide parents with additional helpful and effective options at home. Making school and home similar also increases student anchoring of useful skills.
- Group work and activities provide a good opportunity for alliance building. Opportunities should be provided for children to develop social skills through role-play and other activities. The saying "if it's not good for both, it's not good for long" has relevance. Tasks or activities that are mutually enjoyable or beneficial are more likely to create better, more stable relationships.
- Procedures should be in place for teachers to manage potential differences with colleagues and students in a constructive manner.



Core values of a mental health-promoting school

Ensuring safety

- Essential for children to feel physically and emotionally safe in the school setting. This is even more important for students with disabilities (physical and emotional).
- Aggressive behaviour, even if not directed towards the more vulnerable students, may threaten students and cause them to withdraw (Skiba & Peterson, 2000).
- Establish a school-wide policy for bullying and disruptive behaviours. All bullying, directly or through social media, requires attention. Prepare students for how to respond to bullying, whether as a victim or a bystander, through discussion and by providing practical, developmentally-attuned tactics for students to employ.
- Any form of threatening behaviour needs to be dealt with rapidly and effectively. Sometimes the “system” allows this by allowing teachers to threaten/frighten students, or through sports/activity teams that attempt to intimidate others.
- Ensure that teachers and staff are approachable. Staff need clarity on how to respond to student comments and preferred staff responses (listen, get the facts, help the student manage the situation quickly or identify who else needs to be involved to fix it).



Core values of a mental health-promoting school

Encouraging participation

- Most effective schools are the ones that create a positive atmosphere based on a sense of community and shared values.
- Effective participation is facilitated when a head teacher leads a staff team that actively consults with students and their parents regarding school affairs (Weare, 2000).
- Students are more likely to cooperate with regulations they had a role in developing.
- Allow students a say in running the school, such as through student councils or student input on school policies (through student representatives or voting on appropriate policy matters).
- Ensure parental involvement. Parent communication about student activities and successes (rather than just problems) increases parental involvement.
- Display students' work throughout the school and call attention to their achievements, even in helping others or in improving the school (e.g. cleaning up, painting a mural, or creating groups to play chess or other activities).



Core values of a mental health-promoting school

Fostering independence

An important role of schools is to empower students to become independent. Learning is more effective when students are encouraged to think for themselves (Weare, 2000). The most significant variable affecting academic achievement is the student's ability to monitor and assess their own work and determine how to further develop and apply a skill. Constructive teacher feedback is very helpful in developing student independence and responsibility for their own learning (Hattie, 2008).

- Practical steps for fostering independence at schools:
- Give students age-appropriate responsibilities within the class and the school.
- Offer structured opportunities to provide feedback and share views.
- Provide programmes that develop leadership, encourage debate and improve negotiation and public speaking



Practical tools for teachers in the classroom

- To help educators understand the importance of mental health in a school setting;
- To enhance educators' understanding about child development;
- To incorporate mental health into healthy schools initiatives;
- To provide age-appropriate behavioural management strategies including disciplining and management of disruptive behaviours;
- To help identifying the warning signs of mental illness in schoolchildren and distinguishing them from emotional distress;
- To provide further resources that can be accessed by educators.



Roles and responsibilities within the school in regard to mental health

- **Teachers** are trained to educate students and their experience working with children with difficulties varies greatly. Teachers do not and should not diagnose children with mental illnesses, but do have a large role to play in maintaining a healthy classroom environment, early identification of children with difficulties and referring when needed.
- **Parents** are active partners in promoting the mental health of their children in a school setting. Parents know their children more than anyone else, the home environment is important for learning and working collaboratively together with schools when their children are having difficulties is of paramount importance.
- **Social workers** are concerned with helping individuals, families and communities to enhance their well-being. A social worker helps people develop their skills and their ability to use their own resources and those of the community to resolve problems. Some social workers with specialized training are able to provide therapy/ counselling services. In many schools, if a social worker is available they would be first in line for consultation by teachers if a child is having a problem.
- **Child and adolescent psychiatrists** are physicians who specialize in the diagnosis and treatment of emotional, behavioural and psychological challenges affecting children, adolescents and their families. They have a medical education and can prescribe medications.
- **Psychologists** are trained professionals who evaluate and treat a range of emotional, behavioural and psychological challenges, conduct research and perform testing.
- **Community leaders** such as politicians and religious leaders have an active role to play in improving mental health in school settings. Community leaders can help raise awareness about the importance of school mental health and also provide advocacy for providing school staffing and resources for mental health.



The role of parents in the child's education

Klepfer (2001) identified the following areas where parents can support their children:

- Attendance: ensuring that their children are attending school to be able to learn;
- Attitude: parents' attitude towards school may influence that of their children;
- Support: parents need to offer support and help their children when in need;
- Providing an environment that is conducive to learning at home: maintaining a calm and quiet environment;
- Providing adequate nutrition and encouraging physical activity;
- Limiting the use of electronics;
- Maintaining structure and insuring adequate sleep;
- Encouraging reading and doing homework.
- Communicating with school and ensuring their child's academic attainment, emotional well-being and social development: maintaining active communication between schools and parents (essential);
- Regular parent-teacher conferences to discuss the child's progress and coordinate efforts at home and at school;
- Parent-teacher associations (organizations intended to facilitate parents' involvement in schools).



Practical steps for supporting and training teachers and avoiding burnout

- Identifying problems early and creating a culture that encourages teachers to discuss difficulties they may be having in the classroom setting.
- Establishing teacher support groups allowing peer-to-peer consultations or consultations with the school psychologist or social worker if available.
- Helping teachers identify and reconnect with the reasons that they decided to be educators and promote these aspects in their daily work.
- Creating a school environment that is positive and fosters the professional and personal development of teachers.
- Training in behaviour management techniques
- Helping teachers understand that difficult behaviour by children may be a cover-up for other difficulties that may be too painful or too embarrassing for a student to discuss (i.e. domestic violence, divorce).



how are you feeling?



Child development features and emerging issues



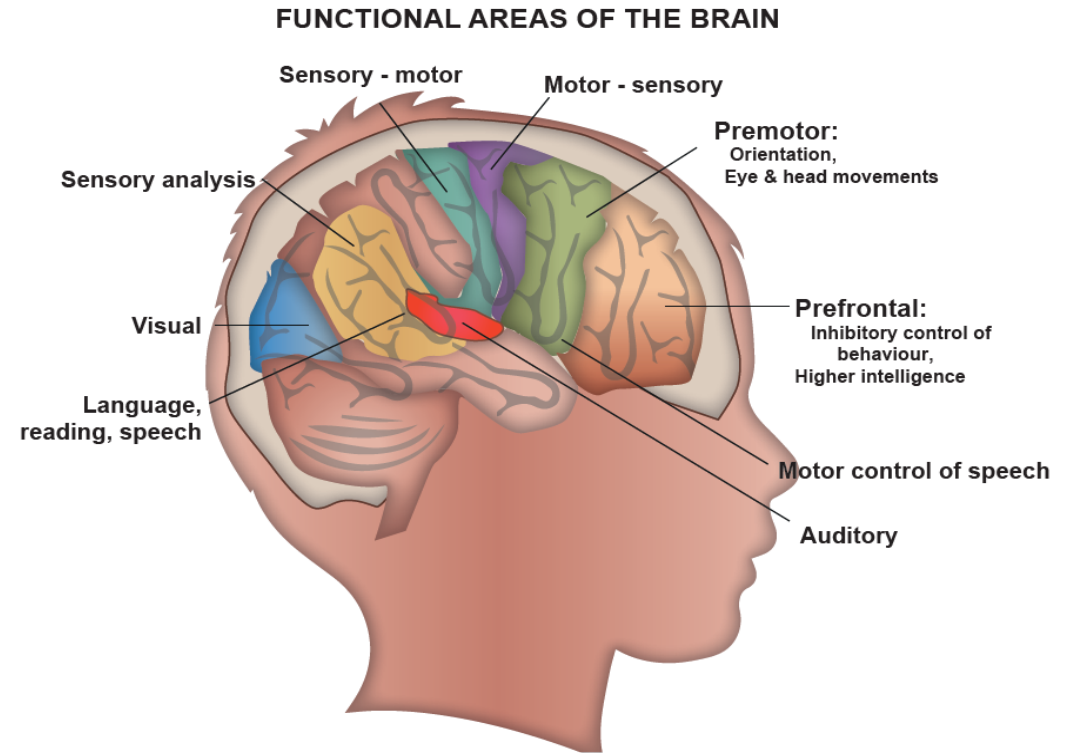
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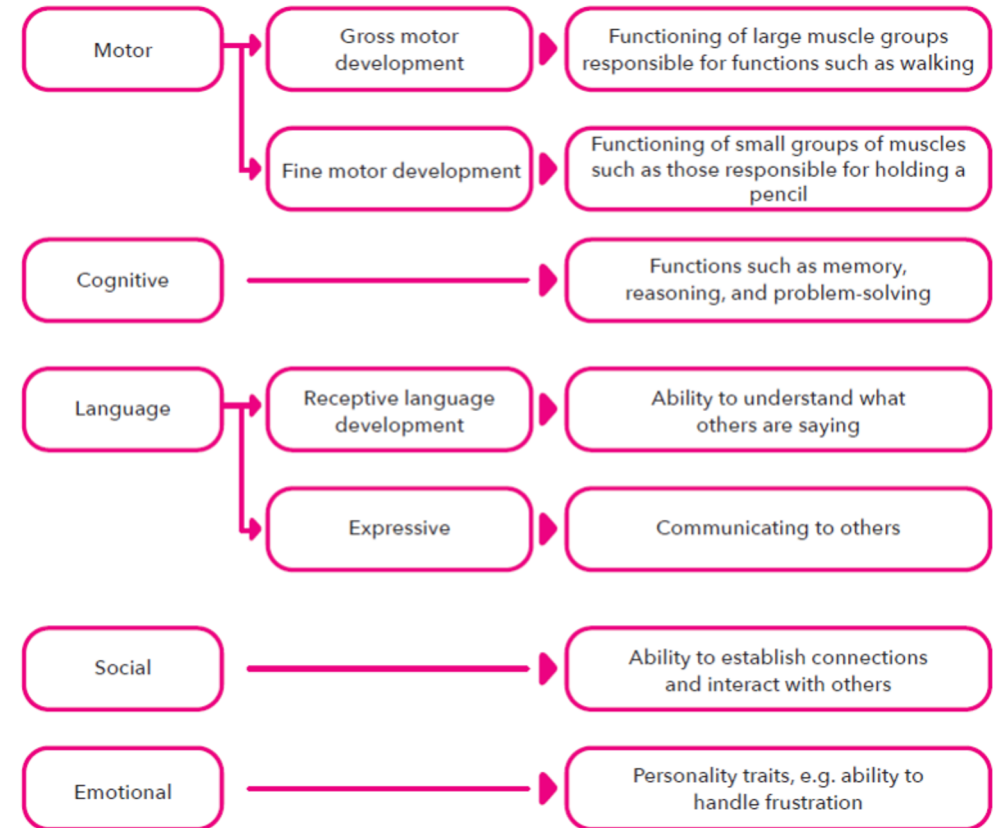
Brain development and schooling

Different areas of the brain serve different functions such as controlling speech, vision, hearing and language/reading. Many areas of the brain can impact behaviour seen in the classroom.



Domains of child development

Teaching and classroom management techniques attuned to the unique students of each year are important for optimizing school success. Understanding child development is also very helpful in differentiating typical from atypical development and hence understanding typical versus atypical behaviour.



Milestones for primary school children 6-8 years

Social and emotional milestones

- Growing independence
- Common fears – problems in the family, failure, rejection
- Friends often from same neighbourhood and same sex as child
- Showing more nurturance to others
- Commanding to younger children but follow after older children
- Start seeing the point of view of others more clearly
- Defining themselves in terms of appearance, activities, possessions
- Fewer angry outbursts and more frustration tolerance
- Learning how to resolve conflict with peers
- More self-conscious
- Tattling is a common action to get adult attention
- Inner control is being formed and practised every time a decision is made
- May still be afraid of the dark or monsters

Strategies to promote healthy development

- Help set individual goals
- Give lots of positive attention
- Let children help define the rules
- Talk about self-control and making good decisions
- Talk about why it is important to be patient, share and respect others' rights



Milestones for children 9-15 years (1)

Social and emotional milestones

- To win, lead or be first is valued (e.g. to be the “boss,” unhappy if they lose a game)
- Often attached to an adult other than their parent (teacher, club leader, coach)
- Quote their new “hero,” try to please the person and strive for attention from them
- Influenced by both peers and family
- Feelings get hurt easily and mood swings are normal
- Sensitive to negative feedback
- Difficulty dealing with failure

Strategies to promote healthy development

- Teach them to learn from feedback. Ask: “How could you do that differently next time?”
- Always be alert to the feelings associated with what is said
- Give positive feedback for successes
- Offer activities that help children feel proud of who they are and what they can do
- Balance activities between high energy and quiet activities



Difficult behaviours

Difficult behaviours of primary school-age children

- Arguments/fights with siblings and/or peers
- Curiosity about body parts of males and females
- Testing limits
- Limited attention span
- Worry about being accepted
- Lying
- Not taking responsibility for behaviour

Atypical difficult behaviours of primary school-age children (warranting further investigation)

- Excessive aggressiveness
- Serious injury to self or others
- Excessive fears
- School refusal/phobia
- Frequent excessive or extended emotional reactions
- Inability to focus on activity even for 5 minutes
- Patterns of delinquent behaviours
- Fire fixation/setting



Milestones for children 9-15 years (2)

Social and emotional milestones

- Heightened level of self-consciousness
- Believe that no one else has ever experienced similar feelings and emotions
- Exhibit the “it can’t happen to me” syndrome (invincibility)
- Become very cause-oriented
- Exhibit a “justice” orientation
- Establishing an identity
- Establishing autonomy
- Establishing intimacy
- Becoming comfortable with one’s sexuality

Strategies to promote healthy development

- Create an atmosphere of respect, trust and honesty
- Be considerate of students’ privacy
- Empathize with the students’ perspective; put yourself in the students’ shoes!
- Pick your battles – is this battle really worth fighting?
- Maintain your level of expectations. Don’t write off negative behaviour as typical teenage behaviour
- Know the warning signs when behaviour becomes dangerous
- Notice changes in students’ behaviour

Identifying Post-trauma problems

Students with post-trauma problems may:

- feel anxious or irritable;
- have drastic mood changes or appear unusually sad;
- act younger than their age;
- be clingy and/or whiny;
- be impulsive and/or aggressive;
- be unable to perform previously acquired skills, even basic functions like speech;
- have difficulty concentrating;
- be preoccupied and become easily confused;
- lose interest in activities;
- become quiet and/or sad and avoid interaction with other children;
- not show feelings or appear “numb”;
- avoid activities or places related to trauma;
- exhibit repetitive play with themes related to trauma;
- have nightmares/flashbacks;
- display an exaggerated startle response;
- have difficulty sleeping.



Identifying Anxiety problems

Students with anxiety problems may:

- feel afraid, anxious, angry, irritable and/or frustrated;
- cry excessively, have tantrums;
- experience symptoms such as chest tightness, stomach aches, headaches, shortness of breath and sweating.
- “freeze” or be unable to participate in activities;
- demonstrate clinginess with caregivers and teachers;
- be afraid to talk, avoid talking or not say what they want because they are afraid they will stutter;
- fidget;
- be easily frustrated;
- worry so much about getting everything right that they take much longer to finish their work;
- refuse to begin out of fear that they won't be able to do anything right;
- avoid school out of fear of becoming embarrassed, humiliated or failing;
- get behind in their work due to numerous absences.



Identifying depression or sadness problems

Students with depression may:

- cry easily, look sad, feel alone or isolated;
- appear anxious or afraid;
- act angry or irritable;
- demonstrate marked changes in school behaviours;
- find it harder to stay on task, lose concentration;
- have frequent absences from school;
- experience change in academic performance;
- lose motivation;
- abandon favourite hobbies or sports, show decreased interest in being with peers, become withdrawn;
- change eating and sleeping habits;
- have changes in feeling, thinking and perceiving;
- express inappropriate guilt;
- express feelings of not being good enough, worthlessness, failure;
- express hopelessness: nothing to look forward to;
- speak in a monotonous or monosyllabic manner;
- be irritable, e.g. snapping at people for no apparent reason;
- be restless or slowed down;
- misuse drugs;
- eat/sleep too much or too little.



Identifying mood stability problems

Students with mood stability problems may:

- cry easily, look sad, feel alone or iso
- show fluctuations in mood, energy and motivation (these fluctuations may occur hourly, daily, in specific cycles, or seasonally);
- alternate between fearfulness and recklessness;
- appear angry, irritable and/or frustrated;
- have episodes of overwhelming emotion such as sadness, embarrassment, elation or rage;
- have difficulty concentrating and remembering assignments, understanding assignments with complex directions, or reading and comprehending long, written passages of text;
- demonstrate poor social skills and have difficulty getting along with peers.



Identifying hyperactivity, impulsivity and inattention problems

Students with hyperactivity and impulsivity problems may:

- have difficulty paying attention or staying on task;
- not complete tasks and make careless errors;
- make choices without thinking them through;
- blurt out answers before the teacher finishes a question;
- interrupt teacher and other students;
- talk too loudly;
- fidget/have difficulty remaining still and staying in seat.
- Other children may easily get frustrated with them and they may become frustrated with peers and themselves.

Students with inattention problems may:

- not listen when spoken to;
- have difficulty paying attention or staying on task;
- not complete tasks and make careless errors;
- forget tasks and materials (jackets, books, pencils, homework);
- daydream or appear “spacey”;
- have a very messy/disorganized desk area;
- lose objects;
- avoid activities that require sustained mental effort.

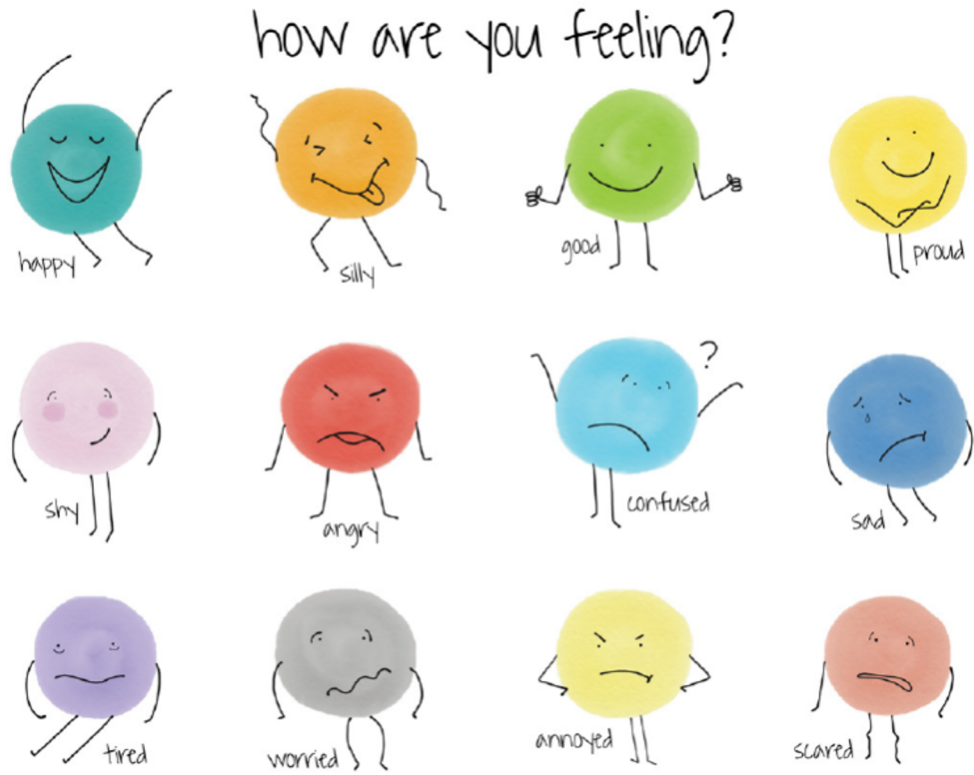


Oppositional problems – conduct problems

Students with conduct problems may:

- refuse to do assignments;
- lose their temper;
- argue or fight with other students;
- argue with the teacher;
- deliberately try to provoke people;
- disobey rules and directions;
- intentionally create conflict with peers;
- blame others for their actions and behaviours;
- interpret motives and behaviours of others negatively;
- seek revenge for perceived wrongs.
- engage in power struggles;
- react badly to direct demands or statements such as: “you need to ...” or “you must ...”;
- consistently challenge class rules;
- create disruptions in the class;
- blame others and not take responsibility for their behaviour;
- steal from others;
- destroy property in the classroom;
- disrespect adults and other students;
- endanger the safety and well-being of others

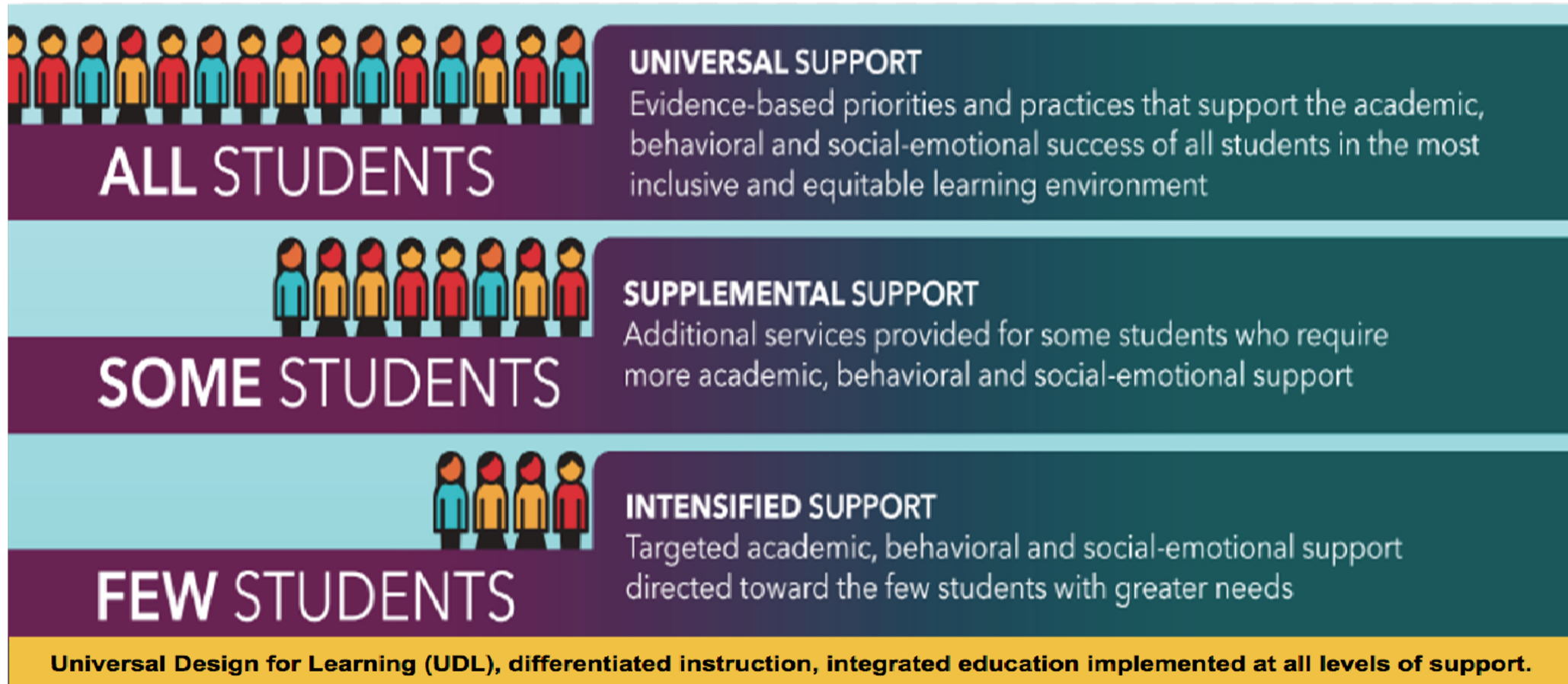




Behavioural management strategies for schools



Multitier approach. Levels of support



Behavioural management strategies for schools

Counselling skills for teachers

- Relationship-building . Establishing a relationship based on empathy, trust and respect
- Active listening. Using skills such as maintaining eye contact, appropriate use of body language, nodding one's head, modulating tone to indicate empathy
- Interviewing skills:
 - Asking open-ended questions, e.g. “Can you tell me more about ... ?”
 - Ask questions in a neutral, non-judgmental way
 - Using questions appropriate for the child's age
 - Reflective listening, that demonstrates that the teacher has accurately understood the child's experience, e.g. “So you are saying you felt sad after the incident?”
- Observations skills. Observing the child's verbal and non-verbal behaviour
- Providing information. Providing factual information and challenging misconceptions



Actions when facing trauma, disasters and very stressful situations: distress, crying and irritability

- Make the school a safe, predictable place with normal routines (however, academic demands may need to be decreased for days to weeks depending on the severity of the trauma)
- Allow the students to deal with traumatic reminders at their own pace
- Consider school events to minimize trauma (avoid unnecessary fire drills or discussion of historical events that force the students to recall the trauma)
- Teach relaxation techniques to diminish escalating distress; teach students to tighten and loosen their fingers, toes, etc.; teach students to breathe in slowly and deeply through their nose and hold as they count to 5, and slowly exhale
- If a student shows distress, help them identify what triggered their distress (do this outside of class and consider alternatives e.g. reading different material, doing something to distract themselves while in class)
- Identify with the student “signals” such as raising a finger to allow the student to be excused if distressed
- Identify coping skills such as alternative activities that the student can do such as independent projects or activities for outside class
- Help students recognize and think through their options and the likely consequences when something distresses or reminds them
- Allow the student to write reactions in a journal that can be put away or reviewed with the teacher or other staff later
- Allow the student to go see other staff to regroup and then return to class



Behavioural management strategies for schools

Circle time

- A facilitator (teacher or school counsellor if available) encourages students to explore issues of importance to the group (for example respecting the rights of others, bullying, substance abuse).
- Students sit in a circle to give them a feeling that they are in a safe and equal environment.
- Allowing each student a chance to participate;
- No one is forced to share their opinion but participation is encouraged;
- Respecting each other's confidentiality.
- The agenda for each meeting should be defined clearly with students suggesting issues they would like to discuss.

Session structure: beginning: reviewing the rules and presenting the topic of discussion;

- middle: key issues are discussed;
- closure: counsellor summarizes the discussions.

Behavioural management strategies for schools

Discipline and management of disruptive behaviour

- Set reasonable and fair limits (rather than arbitrary and constantly changing limits and expectations).
- Redirect or distract behaviours when possible;
- Help students develop decision-making.
- Reward successes during the school day. Praise them for calming down after disruptive behaviours;
- Teach and reinforce positive strategies like sharing, negotiation and cooperation.
- make transitions from one activity to another easier. For instance, announce when there are 5 minutes left, 4 minutes, etc.
- When the student resists following direction, shift the conversation to student choices and consequences.
- Set limits against aggression at the beginning of the school year
- Teach children to control anger by giving them “information” about how anger is aroused
- If a student becomes oppositional or upset, first recognize the reaction and then invite the student to consider alternatives
- Use “time outs” by removing the student from the class or difficult situation
- Send positive notes home if the child was able to maintain good behaviours
- Use nouns that indicate belonging to a group when giving instruction (“We need you to stay calm so we can finish the maths exercise”).



Actions to take in case of difficulties in maintaining attention

- Posti a sedere preferenziali: far sedere lo studente all'inizio della classe
- Affiggere le regole, la routine quotidiana e il calendario scolastico in un luogo regolare (ad esempio davanti alla classe, nel frigorifero di casa) e ripassarli ogni giorno
- Suddividere i passaggi e chiedere al bambino di ripeterli.
- Lasciare del tempo in più per completare i compiti (non durante la ricreazione, perché spesso lo studente ha bisogno di scaricare le energie)
- Fornire allo studente una copia degli appunti o della registrazione audio
- Sottolineare, cerchiare o evidenziare i termini chiave del materiale di lettura per lo studente
- Chiedere a un membro dello staff di aiutare lo studente a scrivere le risposte



Actions when facing hyperactivity and impulsivity in the classroom

Hyperactivity

- Provide breaks for the student to move about
- Break tasks down into 10–20 minute segments so that the students can move within the classroom
- Provide alternative outlets for physical activity; have the child raise a hand, count to five, then raise the other hand; have the student wiggle fingers/toes to relax (not be disruptive)
- Provide goal-directed tasks such as distributing papers

Impulsivity

- Clarify rules of personal space (stand one floor tile/three arm lengths apart, use your inside voice after other person has stopped speaking, etc.)
- Allow the child to have a designated place in lines with children (between two pro-social peers)
- Allow the student to leave early with another staff member or peer to the next place/class



Actions when there is a breach of social rules

- Describe rules in positive language for students (walk in a line, speak after the other person finishes, keep your hands to yourself, etc.)
- Point out in stories, movies, television shows, etc. how people stand, look at each other and start, cue and stop conversations appropriately
- Practice having students listen to another student and to ask 1–2 questions rather than change the topic or talk about themselves; this is sometimes easier when students identify particular interests and can be matched up
- Explain nonverbal communications (facial expressions for happiness, anger, disgust, surprise, etc.) to help students accurately recognize emotions of others
- Identify peers the student can work, play and eat snacks/meals with
- Provide signals and time for students to transition
- Substitute acceptable behaviours for unacceptable ones (touching a piece of fabric instead of pants, squeezing a soft ball instead of flapping or waving a pen, etc.)
- Provide students with examples of acceptable social behaviours (e.g. squeezing a soft ball instead of flapping)
- Provide a “social story” of events to the student to help them prepare for different social situations (<https://carolgraysocialstories.com/>)
- Position the student in a social skills group at lunch or other times to practice asking questions and speaking conversationally
- When available, have another staff member familiar with sensory devices (e.g. occupational therapy) help the student identify alternative sensory experiences to calm down (deep joint compression, weighted blankets/clothes, headphones to block out noise, etc.), and identify school tasks (lifting, being in quiet places) that enhance learning



Actions when facing disorganization in the classroom

- Praise/reinforce the child for doing the “right thing” when they follow steps, organize their desk and other goals prioritized for them
- Keep extra materials (pencils, books when possible) at school and at home
- Help the child organize desk and work space, e.g. papers in coloured folders
- Allow the child to start by completing sentences already started, or paragraphs structured for them (“I am in favour of _____. The first reason supporting this is _____ ”)
- Have the child use a daily assignment book and check it before they leave for home
- Identify a “coach” staff person for the student to meet with at the end of each day to prepare materials before going home



Actions when facing bullying in the classroom

- Intervene immediately, separate the children involved and make sure everyone is safe; it is OK to get another adult to help
- Stay calm, listen without blaming and model respectful behaviour
- Support children who are bullied and makes sure they are safe; rearranging classroom or bus seating plans may be needed
- Conduct classroom activities to educate about bullying (lead a class discussion about how to be a good friend, write a story about the effects of bullying or benefits of teamwork, role-play a scenario, read a book about the topic)
- Involve students in sports and clubs to enable them to take leadership roles and make friends without feeling the need to bully
- Maintain open communication between schools and parents



Actions addressing suicidal thoughts and behaviours in the classroom

- Strengthen protective factors against suicide, including good relationships with classmates and teachers and access to supports inside and outside the classroom
- Identify students who may be at risk for suicide (sudden or dramatic changes in behaviour or performance, giving away material possessions)
- Establish dialogue with a distressed and/or suicidal young person; it is important to understand that the teacher is not alone in this communication process
- Respond to students who may be at risk for suicide (talking or writing about dying, feeling hopeless or having no reason to live or killing them self, looking for ways to kill them self) by taking necessary action
- Supervise the student identified to be at imminent risk constantly (or make sure they are supervised by an adult) until they can be seen by a professional
- Escort the student to see a professional and provide additional information to help in the assessment; a professional should notify the parents



Actions when facing refusal in the classroom

- Provide the student with a few appropriate choices (“You can do this work during lunch, or I’ll help you do the first problem now”) #
- Use “I need you to” rather than “you need to” statements
- Use consistent cues, words and signals to identify inappropriate behaviours; state what you want instead of what you do not want; model politeness (“Please walk down the hall on the right side seeing if you can be the quietest you’ve ever been”)
- Slowly think through the student’s alternatives and the likely consequences when refusal occurs; allow the student to consider and choose option
- Acknowledge the student’s frustration or disappointment when something doesn’t go as they want and then invite the student to figure out another solution for now
- Identify the student’s good efforts even if the results are not successful
- Focus on fixing problems rather than who is to blame; reward collaborative efforts between the student and others
- Have students describe how they think others feel when a conflict occurs
- Have students role play how to resolve conflicts
- Confront lies/distortions outside of class
- Allow the student to correct mistakes or misdeeds
- Identify a “time-out” space in the classroom where the student can go to calm down
- Minimize escalations by speaking softly and sparsely and demonstrating patience to allow the student to do the right thing
- Identify a staff member to walk or talk with the angry student to process the event outside of class
- With parents, identify prosocial events/activities or other helpful peers and students for the student to spend more time with them



Actions when facing separation anxiety/school refusal

- Make school more magnetic (something to look forward to on arriving, such as playing with peers, etc.) and home less magnetic (no sleeping in, watching television or playing video games, etc.)
- Allow parents to send notes in the student's lunch (rather than phone the student while at school) Have the student use "strength" cards (e.g. superheroes, etc.) to recall strengths and powers to manage stress
- Allow the child to spend time at first in the library or with other staff to ease them into the building (and reward efforts to get to the classroom)
- Introduce the student to next year's teacher and have parents visit next year's classroom during a vacation interval
- Identify a hierarchy of staff to meet the child on arrival at school and other staff to whom the child can go if distressed during class time

Actions when child suffers from anxiety

- Speak slowly and calmly, encourage breathing slowly
- Break tasks down
- Help the students consider the probability of events (“I’m afraid to get on the bus because it will crash.” “Hmmm...What are the chances it will crash? How many buses do you see driving out there that are not hitting other cars.”)
- Help students evaluate all the evidence for their conclusions (“I’m no good at maths.” “Hmmm....what have your maths grades been for the past week? All good except today? Wonder why you had one hard day and the others all went well?”)
- Model and practice positive self-talk (“I can do this.” “Even though I missed the last problem, I can get the next one correct.”)
- Have students use a fear thermometer to identify what most frightens them and what to do when they are at different levels
- Encourage student to utilize relaxation techniques (e.g. deep breathing, guided imagery, muscle relaxation).
- Use successive approximations: if the child is afraid to speak in class, allow them to speak alone in front of a mirror ... record and play self ... speak in front of a few classmates ... speak in front of the class



Actions when facing trauma, disasters and very stressful situations: intrusive thoughts or flashbacks

- Help the child recognize that their current situation is safe so they are grounded and not afraid in the classroom
- Provide “a minute” for the student to think of other things or do something else (get a drink of water, do a different task, etc.)
- Encourage the student to identify friends who help support them and protect them in that moment
- Allow the child to write down an intrusive thought or flashback to discuss with other staff
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Actions improving student's mood and mood regulation

- Check in with the student to quantify his/her mood (on a 10-point scale, with 10 being happy) and identify pleasurable activities to engage in (take a walk, listen to music, exercise, seek out a positive peer)
- Identify activities or class projects where the student can work with supportive peers
- Help students evaluate all the evidence for their conclusions (“I’m no good at maths.” “Hmmm ... what have your maths grades been for the past week? All good except today? Wonder why you had one hard day and the others all went well?”)
- Model and practice positive self-talk (“I can do this.” “Even though I missed the last problem, I can get the next one correct.”)
- Allow the student to do alternative tasks or to be in other parts of the room if weepy or sad
- Have the student start with familiar, previously successful tasks to get going and then move to new and/or more challenging tasks
- Identify study partners who can support and assist with assignments
- Have the student write in a journal about moods and write songs or poems



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