Supporting mental health and wellbeing in schools

Working with others helps us have a much bigger impact on the lives of children and families than we would ever be able to achieve alone. We work with children, young people, families and organisations in the public, private and voluntary sector in order to achieve our vision.

The following pages explain how we talk about our work with others as part of our brand.
Introduction

Over 50% of mental illnesses start before the age of 14 and 1 in 10 children and young people has a mental health disorder. Schools are on the frontline when it comes to supporting children and young people’s mental wellbeing. Staff working in schools are ideally placed to recognise and respond to early signs of mental health difficulties in children and young people.

This booklet aims to support all staff working in school settings to understand how best to help the children and young people in their care. The booklet covers a range of mental health concerns, describes signs you might recognise and offers straightforward and practical guidance about what to do if you are worried about a child or young person. It explains how school staff can support children and young people by identifying mental health problems and by measuring and monitoring the mental health and emotional wellbeing of their pupils.

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What is anxiety?

While many children and young people worry about school or home circumstances from time to time, around 1 in 10 experience anxiety severe enough to make it hard for them to get on with the things they want to do in life. This may signal an anxiety disorder. Children and young people may feel anxious in particular situations, such as speaking in class or socialising with peers, and may want to avoid these scenarios. They may find themselves worrying a lot and not being able to stop. They may also experience physical and visible symptoms, such as panic attacks.

What can school staff do to support a child or young person who experiences anxiety?

1. Instead of reassuring the child or young person that nothing bad will happen, ask things like 'what has happened in this situation before?'

2. Stay calm but supportive and try not to get drawn into their emotions. It helps if you are supportive but stay practical.

3. Help the child or young person think through what they learned about their fears and about themselves (e.g. did their worry come true, did they cope?). Teachers can help pupils to rate their anxiety levels on a scale of 1–10, and notice that when they face their feared situation repeatedly the anxiety level goes down.

4. Praise and reward small (and big) successes when the child or young person faces their fears. It can help them if you remain positive.

5. We’re all different. Remember that anxiety can come and go, and that what helps one person may not work for another.
**What is attachment?**

An attachment bond refers to a relationship between a child or young person and their primary caregiver that is formed in the early years and is thought to have a long-term impact on development and growth.

A secure attachment helps children and young people feel safe at times of need. When caregivers are not able to provide sensitive, consistent and loving care, a child or young person may develop an insecure attachment to them. This early insecurity can affect their ability to learn and to form relationships with other adults and with peers.

**What can school staff do to support secure attachment in children and young people?**

1. **Undertake training** in attachment theory to help you respond to children and young people’s needs. Children and young people with insecure attachment tend to underachieve at school, find it difficult to manage their emotions, and may be less willing to take on challenges.

2. **Identify** children and young people with greater attachment needs. They may be unfocussed, disruptive, controlling, withdrawn or destructive. Often these challenging behaviours are their ways of coping and protecting themselves.

3. **Talk** to your pupils about how they are feeling. Children and young people are often very aware of their own feelings but may not be able to express them.

4. **Engage** with other adults who are involved in the child or young person’s life, whether that’s a parent or carer, grandparent, social worker or other professional.

5. **Help build** children and young people’s capacity for self-regulation, resilience and confidence. This could be through play, art, physical exercise and friendship building, as well as through classroom learning.

6. **Value** your input as a significant adult in the child or young person’s life, with the potential to be a safe haven and secure base for them.
What is a looked after child?

A looked-after child is a child or young person in the care of the local authority. Most looked-after children live with foster carers, with a smaller number living in secure units, children’s homes or hostels. Some children and young people are looked after because parents are struggling to cope, and others have been removed from the family home due to significant risk of harm. While looked-after children are more likely to experience mental health difficulties than their peers, it is important to remember that not all looked-after children will have a mental health problem.

What can school staff do to support the mental wellbeing of looked-after children?

1. **Avoid stigmatising children and young people** or making them stand out. Teachers need to be very sensitive and should not assume that everyone in the school, including their peers, knows that they are looked after.

2. **Treat children and young people as individuals.** Not all looked-after children will have had a traumatic early upbringing. A school’s response should identify and respond to children and young people’s individual needs.

3. **Trust is very important.** It is important not to label children and young people because of their behaviour or previous experiences. Remember you may be one of very few adults in their lives that they feel they can trust.

4. **Be aware of the risk factors.** Looked-after children are four times more likely than their peers to have a mental health difficulty. The more risk factors a child or young person has been exposed to, such as poor housing, poverty and maltreatment, the higher the likelihood of significant delays in cognitive and emotional development.

5. **Children and young people may misread** certain situations and emotions. For example, if a teacher’s expressions are very serious, some pupils may interpret this as threatening and react in a disproportionately hostile or aggressive way.

6. **Teaching emotional literacy around social skills can be beneficial, especially if this is part of the class lesson plan, and not just for specific children or young people.**
What do we mean by low mood?

Low mood can mean an absence of feeling, irritability, lack of pleasure, and/or lack of motivation. Most people have experienced this at times. However, low mood means that people feel this way persistently. Doctors define low mood as feeling this way for over two weeks.

It is not always easy to spot low mood. Signs include changes in behaviour and relationships with friends and school staff, becoming more withdrawn and fluctuating attendance. Low mood may be related to challenging home circumstances, bullying or difficult peer relationships.

What can school staff do to support a child or young person who is experiencing low mood?

1. **Ask** the child or young person how they are, and let them know that how they feel matters to you.

2. **Express concern** but ensure they don’t feel as though they are being judged for feeling this way.

3. **Arrange to ‘check in’** with the child or young person about how they are feeling in a few days’ time. As well as helping to monitor the way the child or young person is feeling, this will show that you take how they feel seriously.

4. Think about **which staff members** the child or young person feels the most comfortable with; they may be best placed to offer support.

5. **Share your concerns** with the pastoral care team. It may be appropriate to consider referring the child or young person for counselling. However, it is important not to assume that they want or need counselling. Take a lead from the child or young person as to what would be helpful for them – this may involve discussing with them the types of support that are available.
What is self-harm?

Self-harm usually means cutting or injuring oneself deliberately. It gives a visible sign that something is ‘not OK’. A child or young person may self-harm to feel more in control, to help them cope with negative feelings, or to punish themselves.

What can school staff do to help a child or young person who is self-harming?

1. **Say something.** Doing nothing is the worst thing you can do – talking about the problem won’t encourage more self-harm.

2. **Listen.** It may take a few invitations to talk before the child or young person feels able to risk sharing with you. The most important thing you can do is offer to listen.

3. **Make a plan.** This might be as simple as making another time to listen, or it might be making a referral to child and adolescent mental health services (CAMHS). What’s important is that you and the child or young person discuss and, ideally, agree the plan.

4. **Share.** Speak to colleagues, to CAMHS professionals for advice, and to the pupil’s parent/carer. Explain why you are doing this and give the child or young person choices about how you might tell a parent/carer.

5. **Act.** Do what you’ve agreed. Let the child or young person know what you have done and what you haven’t managed to do yet, and why.

Remember...

Although wanting to tell a child or young person to stop self-harming is understandable, this is often less helpful at the beginning. It’s more useful to show concern for how the child or young person is feeling.

Most self-harm isn’t linked to suicidality but if a pupil tells you that they have thoughts about wanting to die it is important you share this information with the pastoral care team. A referral to CAMHS would be appropriate in these circumstances. If you are worried about a child or young person’s immediate safety, call 999.
Research suggests that the engagement of parents/carers has a bigger impact on a child or young person’s academic learning than any other factor, including the quality of the school. By bringing parents/carers and teachers together, it is possible to provide a child or young person with a trusting circle of adults who will support them.

**What is a Multi-Family group and how is it run?**

- Multi-family groups are set up and run by a member of the school staff and a suitably qualified psychologist, social worker or mental health professional.
- Six to eight families meet weekly in school with the two group leaders.
- Children and young people’s progress is monitored daily against emotional wellbeing or behavioural targets and every six weeks overall progress is measured against goals, such as improved attendance, behaviour and independent learning.
- A family group has a clear structure based on targets, planning, action, reflection and transfer.

**Why is family engagement important?**

Introduce non-stigmatising opportunities for collaborative involvement of parents/carers in a child’s learning. The **multi-family groups in schools** approach brings parents/carers, teachers, children and young people, and mental health professionals together in school settings, with the aim of helping to change and improve the children and young people’s emotional wellbeing and behaviour. This helps children and young people to be more settled and better able to engage with teaching and learning opportunities. A family group allows parents/carers to share experiences and ideas with others who may have struggled with or suffered from similar difficulties to their own. It has been shown that changes initiated in the group transfer very well into better behaviour and learning performance in the classroom.

**What can school staff do to encourage family engagement?**
What is mentalization?

Mentalization means trying to see things from somebody else’s point of view. The key question to ask is ‘what is it like to be you?’ Mentalization is not a specialist skill and research suggests that being able to see things from the pupil’s perspective is a key principle of good teaching. Mentalizing is particularly important when you are concerned that a child or young person is not achieving as well as they might, or is not enjoying school.

When a child or young person is not thriving at school as well as they might, it may be helpful to try to understand what it is like for them to struggle compared to their peers.

How can school staff mentalize in the classroom?

1. **Empathise.** If you suspect a pupil in your class has worries which they are not talking about, you could begin a conversation with them by saying something like ‘sometimes it seems there is a lot on your mind. Maybe things that you worry about?’

2. When a pupil is struggling with a task, as well as supporting them, make sure that you show genuine interest in the person and how they are feeling. For example: ‘Sarah, it seems as though you find this a bit hard’ or ‘tell me how you are finding it?’ rather than ‘how are you getting on with your work?’

3. **Be open to discovery** about their thoughts and feelings rather than expressing certainty about them.
Mental wellbeing is not simply the absence of mental illness; it is a broader indicator of social, emotional and physical wellness. It is influenced by a range of factors, including a child or young person’s family, their community and school environment, their physical health and their social and emotional skills.

Mental wellbeing can be defined as feeling good, feeling that life is going well, and feeling able to get on with daily life.

What is mental wellbeing, and why should schools measure it?

Schools are important settings for supporting children and young people’s wellbeing. Schools may decide to measure mental wellbeing to:

- Get a snapshot of pupil mental wellbeing across the school population.
- Identify individuals who might benefit from targeted support.
- Evaluate the impact of the whole-school approach, as well as targeted approaches, to supporting mental wellbeing, finding out what has worked well and what has worked less well.

What should school staff do to measure and monitor wellbeing?

1. **Choose the right measure.** Measures are tools (such as questionnaires) that can be used to collect information about wellbeing across a range of areas. Choosing the right measure to collect the information you need will help you to meet the objectives of your measuring/monitoring exercise.
2. **Introduce the measures to your pupils,** explaining why they are being asked to complete the measure, who is being asked to complete it and who will see the information.
3. **Think about where** the measure will be completed, ensuring that pupils feel comfortable and have privacy.
4. **Think about how you will respond to risky issues** such as self-harm or suicidal thoughts.
5. **Have a plan in place for recording and using the data.**
Schools in Mind is a free network for school staff and allied professionals hosted by the Anna Freud National Centre for Children and Families. We provide a trusted source of accessible information and resources that teachers and school leaders can use to support the mental health and wellbeing of their whole school community.

The network shares academic and clinical expertise regarding mental health and wellbeing issues for schools, and enables members to access:

- Termly events, newsletters, trainings, and resources
- Ideas to support school staff mental health and wellbeing
- Opportunities to take part in ground-breaking research

Further information

For free sign up, further information and access to Schools in Mind accompanying resources (e.g. online multi-family groups in schools training, mental wellbeing toolkit, and expert support videos) please visit www.annafreud.org or contact schoolsinmind@annafreud.org

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