

Risk and Resilience

Mental Health for Teachers

This is an introduction to mental health, for educators and carers, to guide you in supporting the mental health of those in your school or early childhood setting. We will explore some definitions, the roles of those who work with children and young people, and how to recognise and respond to individuals who might need extra support.

What do we mean by Mental Health?

Health is more than just the absence of an illness, it means working toward our best possible state of emotional and physical wellbeing. **Mental health** and wellbeing is about thoughts, feelings and relationships. There are many related terms, such as social or emotional wellbeing, resilience, stress management or lifeskills. Mental health is a continuum, ranging from a state of optimal health, to having an illness which might affect our thoughts, feelings or behaviour. Most of us find ourselves somewhere in the middle of the continuum, just as we do for physical wellbeing, but our state of health can change over time.

A **mental health problem** occurs when someone's thoughts or feelings are troubling them, to the extent of affecting their day to day activities or relationships. This doesn't mean the person necessarily has a mental illness, but seeking support from others may help them through a difficult time. Some people with an unresolved mental health problem might go on to develop a mental illness.

A **mental illness** is a more serious or long-lasting problem, which can be diagnosed by a doctor or mental health professional, and may require medical treatment as well as support. There are many different types, just as there are different forms of physical ill health. Examples include schizophrenia and clinical depression.

Mental health promotion describes how people can encourage positive mental health. Those who work with children and young people promote emotional and social wellbeing by creating a supportive environment and teaching life skills, such as problem solving and communication to children in their care. Promoting mental health is also a form of **prevention**, as it is likely to decrease the number of people who develop a mental health problem or illness. Intervention refers to more specific action, such as introducing a program for a group of people or seeking help for an individual. Early intervention means picking up early signs of a mental health problem and providing support before the situation worsens. For example, a teacher may become concerned about a student's emotional wellbeing and refer them to the school counsellor.

The term intervention is also used about other mental health programs, some of which may be offered through schools or early childhood settings. A universal intervention promotes the mental health of everyone, such as a whole school program to prevent bullying.

A selective intervention aims to prevent mental health problems in a particular group which may be at risk - for example, a support program for people who have experienced bullying. An indicated intervention is about helping people who are showing early signs of a mental health problem, such as a program for children with behaviour problems.

How can those who work with children and young people promote mental health and wellbeing?

Educators and carers do not need to take on counselling roles, but they can help by referring troubled children and young people to other professionals for treatment and support. Schools and early childhood settings can also help children and young people develop resilience, which is the capacity to bounce back and keep going during difficult times. This helps individuals adapt and can protect them against developing emotional or mental health problems. Three key factors which foster resilience in children and young people are caring relationships, high but achievable expectations, and opportunities to participate in their family, school, centre or community. Schools and early childhood settings foster caring relationships by encouraging tolerance and by trying to prevent bullying, racism, stigma or harassment. Educators and carers can create meaningful relationships with their students by giving positive as well as constructive feedback, and by taking an interest in each child as an individual - even simple things, such as knowing them by name and saying hello can help. It is also helpful to invite children and young peoples' contributions to develop a feeling of connection and belonging.

In addition, the school or early childhood setting can promote mental health by providing pastoral care or support staff, by supporting professional development, and by including relevant skills in the learning activities (such as problem-solving or communication). A broad based range of experiences and learning activities gives children and young people an opportunity to excel and helps create a sense of achievement.

Promoting mental health also involves strengthening partnerships between the school or early childhood setting and the broader community, by consulting with parents and community groups, encouraging children and young peoples' participation, and developing links with support services and welfare agencies beyond the school or early childhood setting. It is important to take into account the culture and make-up of your own community, in considering both educational and mental health needs. For example, rural or remote communities must often deal with isolation, higher suicide rates, and issues of access to services. For Aboriginal and Torres Strait Islander people mental health encompasses the social, emotional, cultural and spiritual wellbeing of the whole community. People from other cultural backgrounds, including refugees and asylum seekers, will have their own beliefs and values and may have different life experiences from other people in your community.

How would I know if someone needed extra support?

Even in a school or early childhood setting that promotes resilience and wellbeing, you may notice some people who find it difficult to ask for help. There are several warning signs or risk factors which might indicate the need for additional support or professional advice. These include negative thoughts or feelings which are extreme or persistent, or, a change in someone's behaviour or their way of coping with life.

The table below provides a list of feelings, thoughts, behaviours and situations. Many of the feelings, thoughts and behaviours may be warning signs, indicating that a person may have a mental health problem. Several of the situations are considered risk factors; difficult circumstances which increase the probability that someone could develop a mental health problem. The presence of warning signs or risk factors doesn't necessarily indicate a mental health problem, but may suggest the need for extra support.

<p>FEELINGS</p> <p>Frequently feeling anxious, afraid or guilty Having bouts of depression and deep sadness Being unable to enjoy things they usually like doing Often feeling bad about yourself or your appearance Not wanting to do anything, go anywhere, see anyone Feeling distant, wooden, operating in 'slow motion' Being overly irritable, angry or aggressive Feeling tired and lacking energy much of the time Feeling extremely positive and full of energy Swinging between positive and negative feelings</p>	<p>THOUGHTS</p> <p>Thinking about dying, suicide or self-harming Having frequent negative or worrying thoughts Difficulty concentrating or making decisions Very rapid thoughts and ideas Hearing voices or seeing things that aren't there Thinking they're someone else (like a famous person or religious figure) or having special powers Believing without reason that someone is spying on them, plotting against them, or trying to harm them Believing they're being harmed or controlled against their will, for example by TV, aliens or the devil</p>
<p>BEHAVIOUR</p> <p>Becoming withdrawn, avoiding social contact Crying easily and frequently Showing a decline in academic performance Changes in behaviour, such as drug taking, alcohol abuse, aggression, crime, risk taking, promiscuity Changes in sleeping or eating patterns Going to extreme lengths to avoid certain situations Dieting all the time, refusing to eat in public Neglecting responsibilities or personal appearance Being very lethargic, or having a lot of energy Speaking rapidly and incoherently Spending extravagant and unrealistic sums of money Talking or writing about things that don't make sense</p>	<p>SITUATIONS</p> <p>Worrying about study pressures or school failure Being bullied, teased or ostracised Family conflict or breakdown of a close relationship Sexual, physical or emotional abuse or neglect Worrying or being uncertain about sexuality Work pressures, losing a job, being made redundant Having financial or legal worries Being a victim of crime or violence Surviving a disaster or traumatic event Having a parent or carer with a mental illness Having a serious or chronic illness Serious or chronic illness in a loved one Experiencing the death of a loved one</p>

How should I respond to a troubled child or young person?

If you feel a child or young person may have emotional or mental health problems, here is a guide to how you might respond. The same principles apply if you think a colleague or other adult may need extra support. Just remember the **G R I P** framework:

Gather

Gather and analyse information, to decide whether the person might need additional support. Look out for the warning signs and risk factors, such as changes in academic performance, behaviour, or relations with others.

Respond

Talk to the troubled person. Be compassionate and listen with empathy to their story - avoid getting too involved, being judgemental, or suggesting solutions.

Respect confidentiality, but be honest about your duty of care - you have to tell others if there is a risk of violence, abuse or self-harm.

Involve

Involve others, linking the child with services such as a counselling professional or youth worker.

Maintain a connection with the person and follow up a little later to see if things have improved.

Promote

Promote a healthy school or early childhood setting environment, supporting and enforcing relevant policies, and promoting positive values and life skills.

Be a model for children and young people - promote tolerance, don't allow put-downs, and encourage people to challenge their negative self-talk.

That's all very well but what would I actually say?

If you've never had to discuss a sensitive issue with someone, think about the language you might feel comfortable using and how to make your conversation natural. It might help to set up a role-play with another educator or carer to run through the GRIP guidelines. Here are some ideas you could keep in mind, when responding to someone who may be having personal problems.

Ask - Find a quiet moment to talk with them and ask open-ended questions, rather than those which can be pushed away with a simple yes or no. For example, rather than saying *Is everything okay?*, try a question which invites a more detailed response, such as *How are you feeling?* or perhaps *How are things going at the moment?*

Be approachable - If the person is not ready to talk to you, reassure them that they can choose to talk another time. *That's fine - if you did ever have things on your mind, though, you can always talk to me about them.*

Suggest someone else - If you're still concerned but the person doesn't want to talk to you, encourage them to find someone else. For example: *Sometimes it helps to talk about things ... if you did have something on your mind, who could you talk to?* You might suggest a brother or sister, a friend, another adult or a counsellor.

Listen - Listen with empathy but give them room to tell their own story. Avoid getting too involved, offering solutions, or reacting emotionally or in a judgemental way. Their values and situation may be different from your own. Reflect back what they say, to make sure you understand and to show empathy. *I can understand that - it must be hard for you when your parents are fighting.*

Talk about Confidentiality - Respect confidentiality, but be honest about your duty of care as a teacher or carer. You have to tell others (but only those who need to know) if there is a risk of violence, abuse or self-harm, to the person or someone else. Explain this in a firm but understanding way. *I want you to trust me and be able to talk to me. In general, I won't pass on things you tell me in confidence, but if I think someone's going to get seriously hurt, I may have to tell someone else about it so we can help.*

Involve others - If the situation is complex you need to refer a child to someone else, such as the school counsellor. Explain this in a helpful way, and offer to link the child with the right person. *I can see you're in a really difficult situation..... I think ...(name, eg the school counsellor)... might be able to help. Would you be able to tell him / her what you told me? I can come with you if you like.*

Maintain a connection - Keep in touch, even if other people have taken over the main task of trying to help. Observe the child or young person's behaviour and relationships, to see whether things have improved. Find a quiet moment to ask: *How are things going with ...* or *How have things been since you talked to ...?*

Keep trying - If the problem hasn't improved, encourage the child or young person to persevere. You might say: *I'm sorry to hear things haven't gotten any better for you ... did it help when you talked to ... ?* A long term or complex problem may need more work, so empathise and offer encouragement: *I know that must be frustrating ... but maybe this will take a while to work out ... will you keep working on it with ... ?* If no progress is being made, get the young person to think about other ways of approaching the issue: *It's a shame things didn't work out, but I guess there must be other things you can do What will you try next?* Again, don't get too involved and don't try to solve the problem yourself. If the young person didn't connect well with the first person they saw, perhaps someone else could help. Encourage the young person to keep trying. For example: *That must be really disappointing ... still, you don't have to give up. It might help to talk to someone else, like (suggest another person) ... Can I introduce you to him / her?*

Promote - Ask yourself what the school or early childhood setting can do as a whole. This might mean reviewing policies or procedures after an incident has occurred, or working together on how to re-integrate a child or young person back in to the setting, after some time away. Perhaps you can encourage other educators or carers to take a more active role in creating a supportive environment, or raise issues about professional development. While your response to a troubled individual is important, don't forget your role as a member of the wider school or early childhood setting community.

What if a student becomes upset in the classroom?

Some issues, like relationships, grief or illness, may be distressing and confronting for children and young people. Here are a few guidelines to keep in mind if you're talking about sensitive issues.

Be prepared. Talk to a counsellor before seeing the child or young person and find out the support that is available. Think about whether any of the children in your care might be at risk of becoming upset, because of their own experience or background. Talk to your colleagues about the topic. They may offer useful suggestions, and later you may want to share your experiences with someone else.

Introduce the Topic. If possible, tell children in advance about what you will be discussing at your next meeting, for example grief and loss, or emotional wellbeing. Tell them that these topics may cause some people to become upset, and that the group will need to be supportive and show respect for others. Invite children to come and see you or a counsellor in private if they have any worries about the topic.

Guide the Discussion. Establish and enforce rules for the session, which create a supportive environment where issues can be discussed safely. Children and young people may not agree with each other, but they will need to respect the views and feelings of others. Be prepared to interrupt the discussion and guide it in a more positive direction. Challenge any comments which might be upsetting for others, such as abusive language, jokes, or negative stereotypes.

Be supportive. If someone does become upset, set a task for the rest of the group and speak quietly with the individual. Offer the person a chance to leave the room and go to the nurse, school counsellor, or an agreed quiet space, until they are ready to come back to the group. Suggest that a friend can go with them. Always follow up with people, to see if they need further support.

Looking after Yourself

Emotional and mental health problems can affect anyone - young people, parents, teachers, others in the school or early childhood setting community. Like other helping professionals, educators and carers take on a number of important responsibilities and their own share of frustrations and worries. Promoting mental health in your school or early childhood setting means not only caring for children and colleagues, but also looking after yourself. Learn how to effectively manage stress. Look after yourself physically as well, with a good diet, regular exercise and plenty of sleep. Above all, if your thoughts or feelings are worrying you, or you are going through a difficult time, reach out for support. Talk to friends, family, colleagues, your GP or another health professional. You will be much better able to help others in the workplace if you remember to look after your own mental health.

What causes Mental Illness or Mental Health Problems?

The causes are not always well understood, and can be quite complicated. Often there is more than one factor, with interplay between genetics, personality, and life experiences. Some mental health problems can run in families and some people have an imbalance in their brain chemistry when they are ill. Personality and coping styles, and the way people look at life, can also affect their risk of developing a mental health problem.

Challenging our own negative self-talk is something we can all do to promote good mental health. Other people may experience mental health problems because of a series of negative life experiences, such as stress, relationship breakdown or the death of a loved one.

What is it like to have a Mental Health problem or illness?

It can be frightening and distressing to have a mental health problem, in which your thoughts, feelings and behaviours are not in line with what you normally experience. People may also suffer because of stigma and misconceptions in the community. For example, some people believe that those with a mental illness are dangerous or unpredictable. This is generally not the case; most are more likely to harm themselves, or to be victims of violence, than to hurt others.

Another misconception is that those with a mental illness should be in hospital, or in an institution. However, with modern treatment, most people recover quickly and do not need hospital care, or have only brief stays. Many are treated by local health services, and remain at home where they benefit from familiar surroundings and the support of family and friends. Unfortunately, stigma and misconceptions make it harder for people to reach out for the help and support they need. We can all help reduce these problems by challenging negative stereotypes and promoting tolerance. Apart from suffering from stigma, people's experiences will also vary depending on what type of mental health problem they may have. Here are a few examples:

Depression is more severe and long lasting than normal sadness and is one of the most common mental health problems in adolescents. People can feel deeply unhappy, hopeless and withdrawn. Some people may develop more serious or long-lasting depressive illnesses, maybe with changes in sleep or appetite, aches and pains, anxiety and poor concentration. In adolescents, feelings of depression sometimes occur as irritability or disruptive behaviour, rather than sadness.

Anxiety is normal when a person feels stressed or threatened and many young people feel temporarily anxious about relationships, special events, or school pressures. However, persistent or severe anxiety may indicate a disorder such as social phobia, panic disorder or obsessive-compulsive disorder. Around one in twenty people experience an anxiety disorder at some stage in life, often occurring for the first time in early adulthood.

Eating or Body Image Problems are often seen for the first time in young people. There is a preoccupation with control over food, eating and weight, with unrealistic body image ideals. Many young people have mild or transient difficulties with body image, but around two in every hundred teenage girls will develop anorexia nervosa, while up to three in a hundred experience bulimia. Increasingly, young men are also affected by unrealistic ideals and may become overly concerned with diet and exercise.

Psychosis is an experience which can occur in a number of mental illnesses, including schizophrenia. It involves false beliefs or sensations which are not shared by others, called delusions and hallucinations. Examples include hearing voices, seeing things, or believing (without reason) that someone is controlling you or trying to harm you. This is very real and distressing to the person who is ill and may cause them to behave in ways that others don't understand, creating fear and misconceptions in the community.

Schizophrenia is not a split personality, but is an illness in which people can experience psychotic symptoms. Schizophrenia and related diseases often occur for the first time in young people, causing them to lose touch with reality and suffer from hallucinations or delusions. This can be very frightening for the young person, and their family and friends.

Bipolar Mood Disorder was previously called Manic Depression. It is a mental illness in which people experience periods of elation and energy (mania), during which they may do everything in a 'larger than life' way, such as spending lots of money or making impulsive decisions. This mania is usually followed by depression and fatigue, and the illness is very disruptive for the person and their family.

Other elements of people's behaviour can interfere with their functioning in day to day life and are sometimes characterised as mental health problems. These include Attention Deficit Hyperactivity Disorder, Conduct Disorder and antisocial behaviour, or the misuse of drugs and alcohol. Sometimes there are other underlying physical or mental health issues. In fact, it is not uncommon for an individual to experience more than one mental health problem.

Some people become so unhappy that they try deliberately to hurt or even to kill themselves, in acts of self-harm or suicidal behaviour. In many cases these people are depressed, or have some other form of mental illness. Most people in this situation can be helped by a counsellor or other professional. Some people believe that someone who talks about suicide will not attempt it, but this is a myth. Research shows that many people who exhibit suicidal behaviour do express their thoughts and feelings (by talking, writing, art or some other means), so any suggestion that a person is thinking about suicide should be taken seriously.

People who work in a school or early childhood setting may be concerned about how they should respond to a young person who seems to be having suicidal thoughts. Here are some suggestions to keep in mind:

- Don't panic, ignore the situation, act shocked, try to make them feel guilty, threaten or be angry with them, or dismiss their problems, and don't promise to keep the situation secret.
- Do ask if they have a plan to act on their thoughts, take them seriously, stay calm; if they seem very distressed or close to hurting themselves, remove weapons, car keys or other items they might use, and make sure someone stays with them.
- Get help - seek professional support for the person by linking them with a school counsellor, GP, mental health worker or other professional. If there is an immediate risk, contact a mental health crisis team or emergency department at your local hospital.

The good news is that many people recover fully from mental illness, particularly when treated appropriately and early. Like physical health problems, some mental illnesses require ongoing treatment or may recur in people's lives, but everyone's case is different. Many people with mental illness are well much of the time and live very full and productive lives.

Where can people go for support and information?

If you or someone you know is experiencing a problem with thoughts, feelings or relationships, there are a number of professionals who may be able to help. Whenever you go to a new setting, develop a relationship with people who can help and find out about local services. Here are some people you should put on your resource list:

- * The School Counsellor
- * General practitioners
- * Youth centres and services (government or non government)
- * Youth Health services (often part of local Area Health Services)
- * Gay, lesbian or transgender support groups
- * Local drug and alcohol support groups or services (government or non government)
- * ARAFMI - Association for Relatives and Friends of the Mentally Ill
- * Public health services (many hospital services have a Child and Adolescent team)
- * Psychologists or counsellors (many operate privately in the community)

- * Psychiatrists (doctors who have specialised in mental illness)
- * Lifeline (13 11 14) or Kids Help Line (1800 55 1800)

If you or someone you know would like more information about mental health, particularly the mental health of young people, here are some suggestions:

- Reach Out! a website about mental health for young people: www.reachout.com.au
- The ResponseAbility website: www.responseability.org
- The MindMatters website: www.curriculum.edu.au/mindmatters/
- The Department of Health and Aged Care website: www.mentalhealth.gov.au
- Health Insite, Commonwealth Government website for health information:

www.healthinsite.gov.au

- SANE Australia: www.sane.org
- The Australian Network for Promotion, Prevention and Early Intervention for Mental Health website: <http://auseinet.flinders.edu.au>

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