

Let's Talk – Recovery & Returning to Educational Settings

Prioritising the wellbeing & mental health of all

from the perspective of Trauma Perceptive Practice

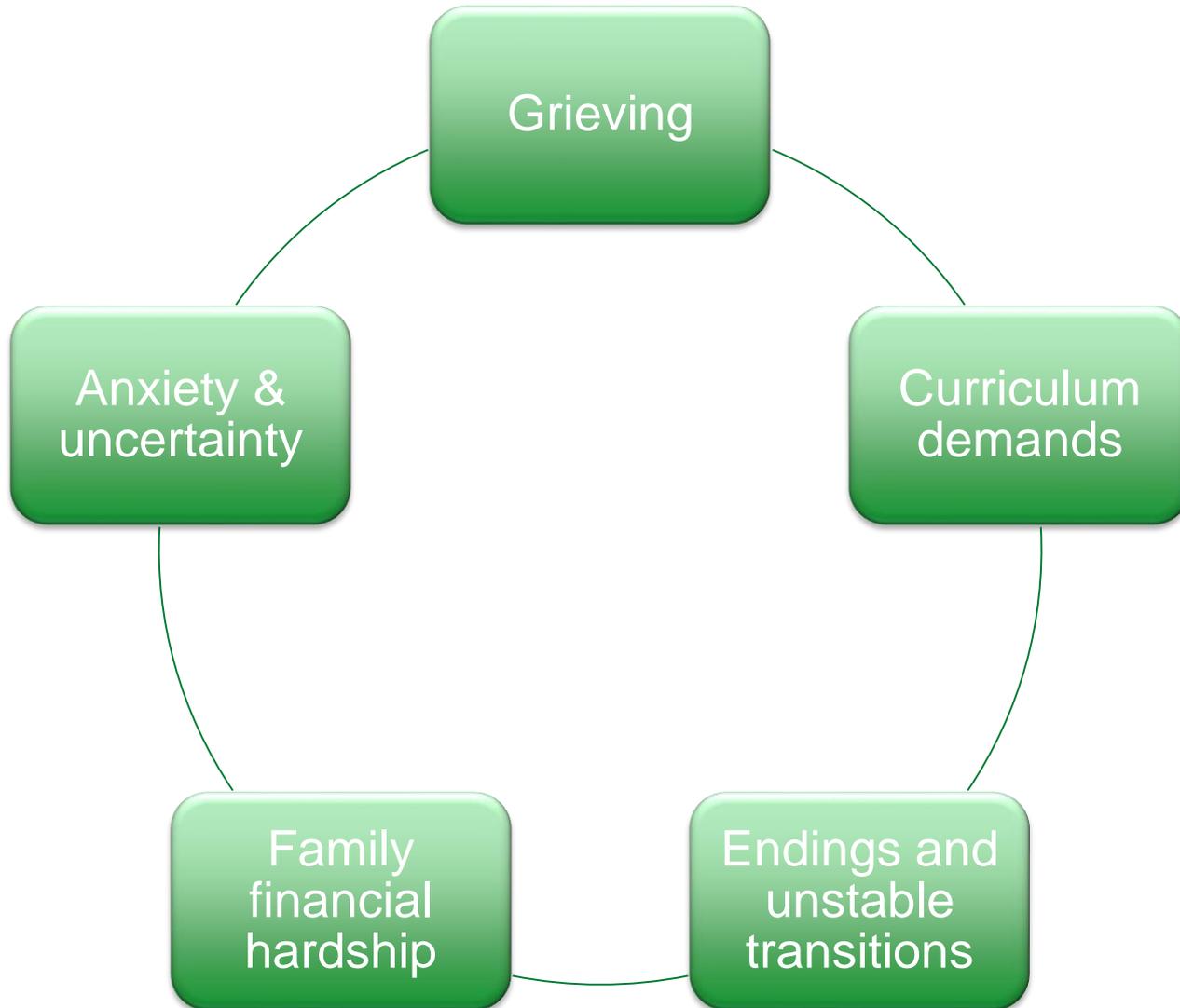


Aims

Restoring wellbeing and mental wealth in CYP, so that their aspirations for their future, can be a vision that becomes, one day, a reality.

1. Staff
2. Pupils

What's still happening as a result of Covid-19...



Grieving

- Loss
- Death
- Bereavement
- Rites of passage & rituals

Family financial hardship

- Diet affected
- Recovery from families financial hardship and tensions
- Increased caregiving responsibilities

Unstable transitions and endings

- Changes in home life and routines
- Lack of exercise, outdoor space and fun
- Resentment and anger of losing things they liked about being in locked down
- How will I manage seeing someone I have fallen out with during lockdown?

Curriculum demands

- Will I have tests as soon as I go back to school?
- Have I been taught what I need to know?
- Am I going to be behind my peers?
- Have I forgotten everything?
- What skills have I lost or forgotten?

Anxiety & uncertainty

- What if I become ill?
- Have I been working hard enough?
- Will teachers think I have been working hard enough?
- Do teachers know how difficult it has been for me?
- What if I miss my family?
- Are my friends still my friends?

Why are mental health professionals worried?

- Social interactions are recognised to be a basic human need, analogous to other fundamental needs such as food consumption or sleep
- feeling insufficiently connected to others is associated with profound and lasting negative consequences on physical and mental health, even leading to increased mortality.
- Current efforts to contain the spread of COVID-19 have required sudden and commonly mandated physical distancing, removing many regular sources of social connection from people's lives.
- It is possible that the effects of such deprivation of social contact will extend beyond the period of physical distancing and might affect the population for years to come.

What can Senior Leadership do to help their staff



- Prioritise wellbeing and mental health
- Reassure their staff through clear communication
- Encourage with sensitivity and manage expectations

Mental Health at Work

A bank of resources for senior leaders and managers to support mental health at work.

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



**Your first stop
for better
Mental Health
at Work**

Paying attention to workplace mental health has never been more important. Mental Health at Work is here to help you find what you need.

It's fair to say, we're in an unprecedented situation. The usual ideas don't seem to apply. If you're worried about coronavirus, maybe we can help.

Browse everything ↓

Coronavirus toolkit

What can staff do to help themselves



Five Ways to Wellness



TALK & LISTEN,
BE THERE,
FEEL CONNECTED



DO WHAT YOU CAN,
ENJOY WHAT YOU DO,
MOVE YOUR MOOD



REMEMBER
THE SIMPLE
THINGS THAT
GIVE YOU JOY



EMBRACE NEW
EXPERIENCES,
SEE OPPORTUNITIES,
SURPRISE YOURSELF



Your time,
your words,
your presence

What can staff do to help each other



- Be aware of others
- Talk to each other
- Offer protected time and space for a daily debrief

The concern about young people

1) Kessler et al (2005) found that 50% of mental health problems are established by age 14 and 75% by age 24.

2) Loades et al (2020) have researched the question of how does social isolation or loneliness impact on the mental health in children and adolescents.

“The rapid review indicates that loneliness that may result from disease containment measures in the COVID-19 context could precipitate mental health problems in young people. Strategies to prevent the development of such problems is an international priority.”

3) The Lancet Child and Adolescent Mental Health (2020)

The Lancet

The effects of social deprivation on adolescent development and mental health

Adolescence (the stage between 10 and 24 years) is a period of life characterised by heightened sensitivity to social stimuli and the increased need for peer interaction.

The physical distancing measures mandated globally to contain the spread of COVID-19 are radically reducing adolescents' opportunities to engage in face-to-face social contact outside their household.

Adolescence is a sensitive period of social development

- In parallel with the hormonal and biological changes associated with puberty, adolescence is a time of profound psychological and social transformation. During adolescence, the social world and the peer interactions it enables become increasingly important. Compared with children (aged <10 years), adolescents spend more time with peers than with their family and form more complex peer relationships
- The importance of obtaining peer social approval increases and peer influence is heightened in adolescence.
- Indeed, adolescents are markedly more sensitive to peer acceptance, rejection, and approval than are children or adults.

Many questions that remain unanswered.

It is unknown how long the physical distancing measures will be in place and whether or how they will affect development and mental health in the longer term. Even if physical distancing measures are temporary, several months of physical distancing represents a large proportion of a young person's life during a sensitive period of development, so it is possible that the effects will be more potent than for adults.

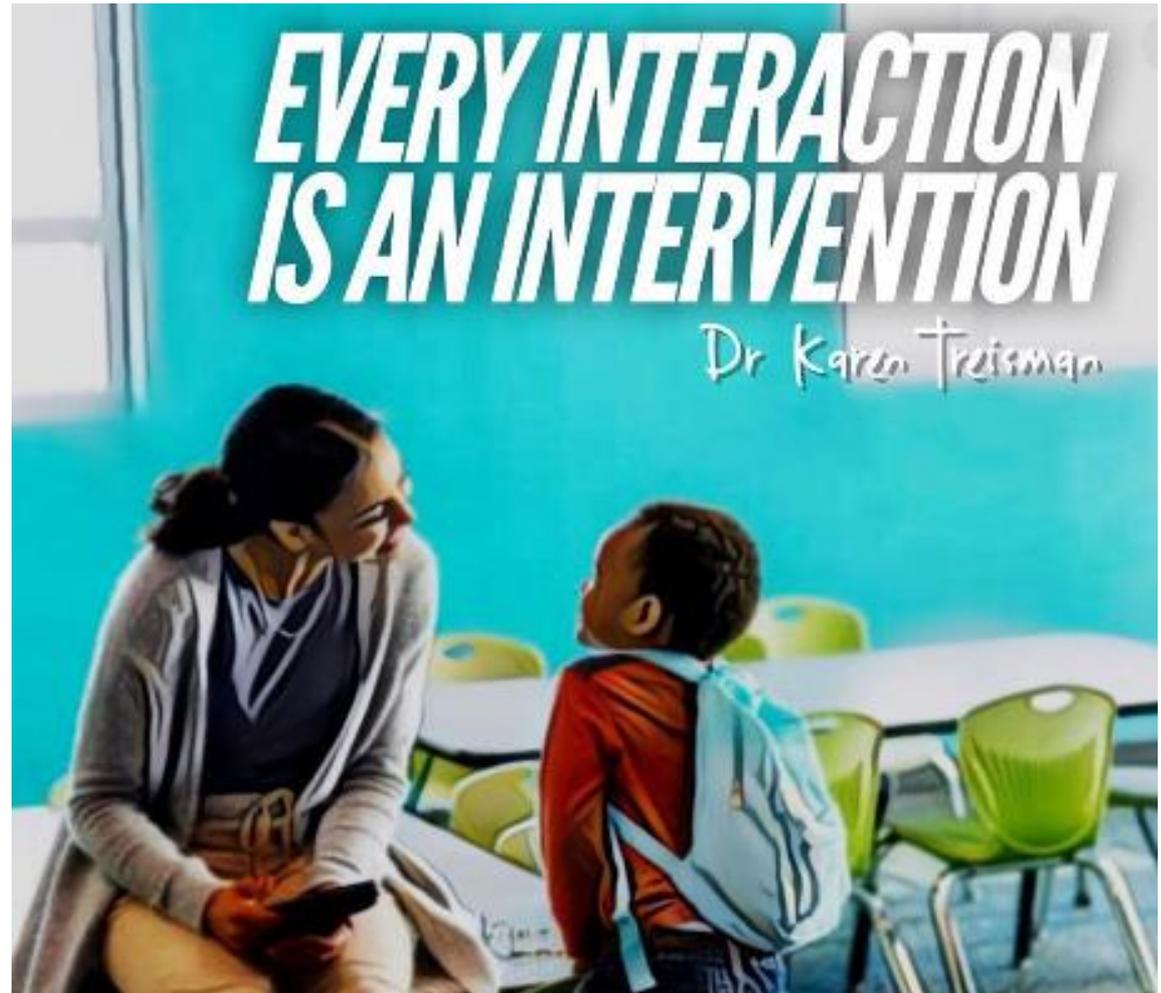
Furthermore, there is little understanding on how the consequences of physical distancing compare with other stressors experienced by adolescents during the COVID-19 crisis, including economic pressures, uncertainty, and loss of public events marking key life stages and rites of passage.

Key messages

- Physical distancing measures to contain the spread of COVID-19 have removed many sources of face-to-face social connection from people's lives, which might affect people's mental health, particularly in adolescence, a period of life characterised by a heightened need for peer interaction
- Adolescents' use of digital technologies and social media might mitigate some of the negative effects of physical distancing
- The authors call for an increased sensitivity during the COVID-19 response to the needs of adolescents, for whom peer interaction is a vital aspect of development

Trauma Perceptive Practice (TPP) Values

- Compassion and Kindness
- Hope
- Connection and Belonging



Pillars for Recovery

Creating a resilient and well-being focused educational setting

compassion &
kindness

hope

connection &
belonging

Relationships providing...

Openness & understanding providing...

Time and space to be, freedom and fun providing...

Pillar 1: Compassion and kindness



Relationships providing
compassion and
kindness

- Loss and bereavement
- Listening & talking
- Be mindful of the loss and bereavement

Pillar 2: Hope



Openness and understanding providing the **hope**

- Re-evaluate and reaffirm core values
- Rules, expectations, structure and routines and safety measures
- Building resilience
- Transitions
- Co-regulation and self-regulation restoring a sense of control and personal efficacy

Pillar 3: Connection and belonging



Time and space to be, freedom and fun providing the **connection** and **belonging**

- Celebrating the positives
- Time and space to be
- Helping wellness
- Freedom and fun

Other things we need to consider



- Vulnerable groups
- Family financial hardship
- Responding to concerns
- Additional resources & signposting

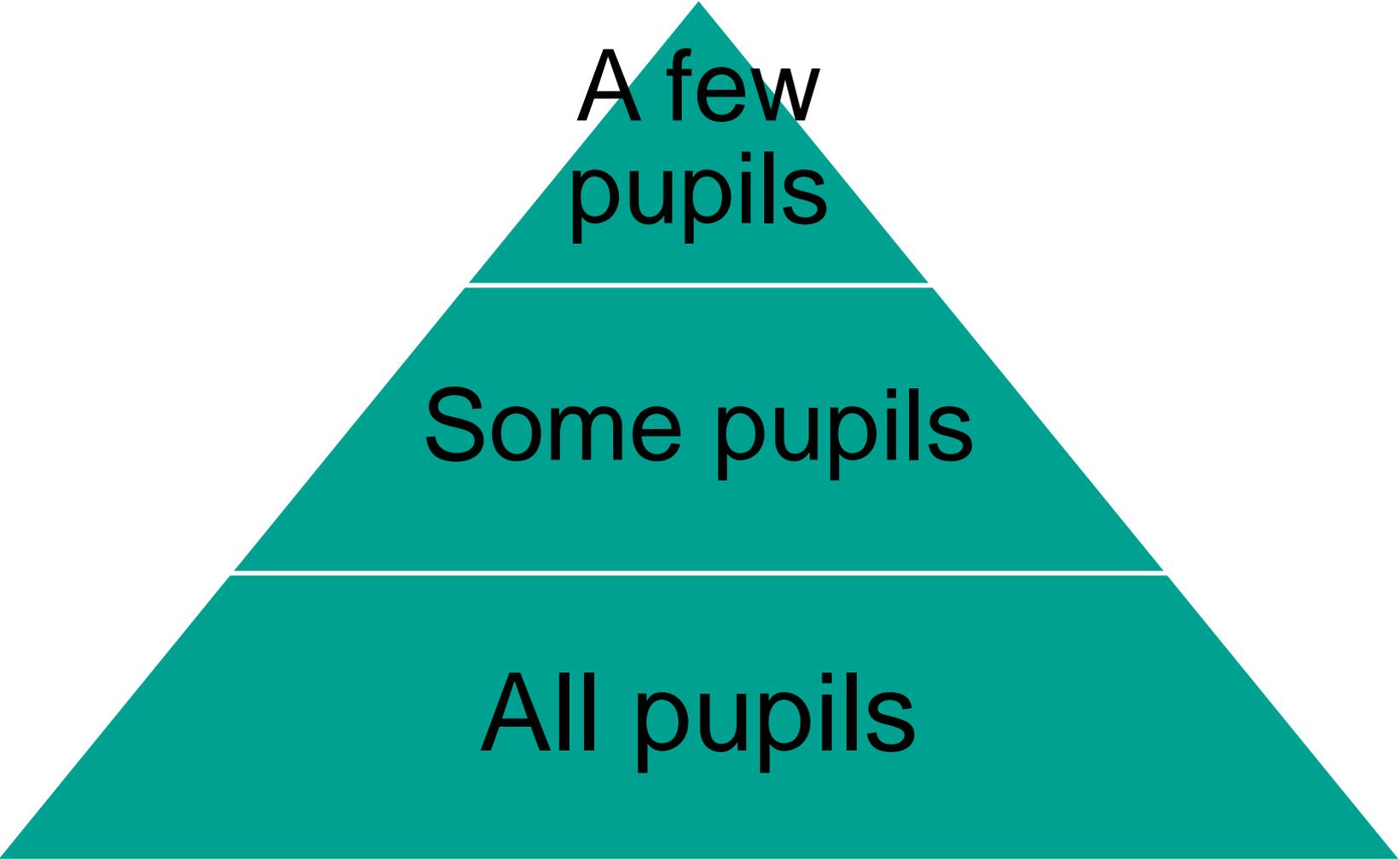
Be mindful of vulnerable groups

Some groups to be especially aware of are:

- Those who have experienced **significant loss or bereavement**.
- Those who have been **shielding** during the pandemic as a result of **underlying health conditions**, and siblings of those who have been shielding, whose experience of lockdown will have been even more restricted.
- Those with **existing social, emotional and mental health needs** (some might have EHCPs that identify this as an area of special educational need that requires intensive support -needs to link to the reasonable endeavours work).
- Those with **other known special educational needs or disabilities**.
- Those from **disadvantaged** backgrounds
- Those who are currently or previously **Looked After, Children in Need or subject to a Child Protection Plan**

Planning your support for pupils

What will you do for...



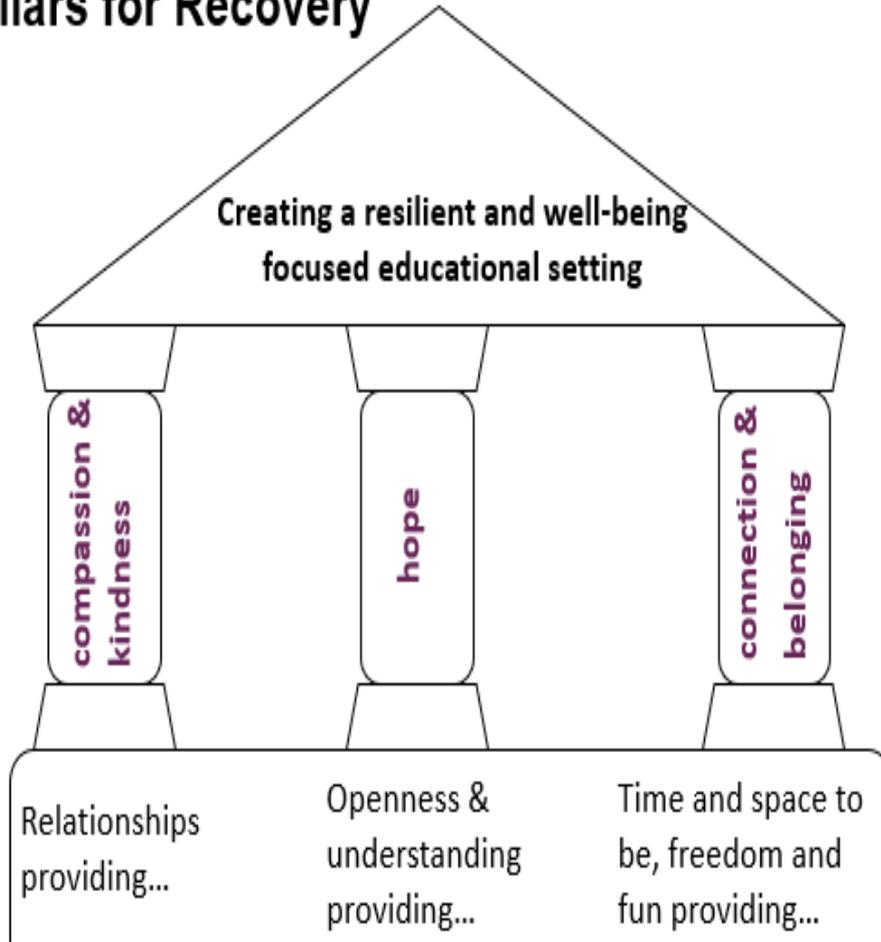
A few
pupils

Some pupils

All pupils

What to do now; the next steps

Pillars for Recovery



- Commit to a plan which prioritises emotional wellbeing and includes short, medium and long term goals
- Communicate your approach to wellbeing with pupils and families
- Have attendance at cluster meetings and seek support organised by SEND Quadrant Teams

more

**Let's Talk Recovery & Returning to Educational Settings:
Looking after the adults**

**Let's Talk Recovery & Returning to Educational Settings:
Children and Young people**

Available at:

<https://schools.essex.gov.uk/admin/COVID-19/Pages/default.aspx>