

# MindMatters Plus: INFO SHEET NO.1

## WHO ARE THE STUDENTS WITH SUPPORT NEEDS IN MENTAL HEALTH AND WELL BEING?

**Use:** Building Student Capacity

**Audience:** Executive Team and Support Teachers and Student Services

**Intent:** Intervention

### Information from mental health literature

Most young people in Australia experience good physical health and living conditions with the notable exception of young people from Aboriginal and Torres Strait Islander communities (AIHW, 2005A)

Indeed, in a study conducted by Australian Institute of Health and Welfare (AIHW) in 2003, eighty percent of young people rated their lives as mostly satisfactory to delighted, while 4% rated their lives as unsatisfactory to terrible.

In 1998 the Australian government commissioned a survey on the mental health of young people.

This survey identified that around 14 % of children and adolescents aged from 4 to 17 years, have mental health problems (Sawyer et al., 2001; Zubrick et al., 2000). Alarming, only a quarter of young people who were identified as needing help were receiving it.

More recent research indicates that between the ages of 12 and 26 years there is an increasing prevalence of mental health problems and mental disorders and these are the major health concerns for young people along with sexual health issues and drug and alcohol use problems (Rickwood, 2005).

To determine the most effective ways to support students it is important to understand the terms mental health, mental health problems, mental health disorders and behavioural problems.

It is important to remember that definitions can vary across culture and sub groups. For example, hearing a voice may be considered delusional in some cultures and a mark of awe and respect in others.

### Mental health, mental illness

The MindMatters suite of initiatives including MindMatters Plus has adopted the following definition of mental health:

*Mental health is a state of emotional and social well being which allows people to undertake productive activities, experience meaningful interpersonal relationships, adapt to change and cope with adversity (WHO, 1999).*

It is a strengths-based, holistic approach which recognises that health is affected by a complexity of factors including individual characteristics, family and social issues, the school environment and peer relationships and that all staff and students benefit from a whole school approach which promotes social and emotional well being.

The way in which we define mental health and identify students with support needs in mental health and well-being will be influenced by the context in which we work.

Schools tend to define mental health support needs according to the degree of risk for students staying engaged and fully participating in school.

Traditionally, mental health workers such as clinical psychologists, mental health nurses and doctors tend to focus their support more in the area of mental health disorders and mental health problems (illnesses).

Mental illness or disorder is a health problem that significantly interferes with a person's thoughts, feelings or social behaviour. It is diagnosed according to standardised criteria.

For example, in any one year, around 3 – 12% of adolescent students may experience significant problems (diagnosed depression and/or anxiety, eating disorders, suicidal ideation).

In seeking ways to strengthen support for students with mental health problems or disorders schools have engaged with mental health services which provides the raft of interventions and treatments available to the 3 -12% of students. The school counsellor in turn will work with the treating professional to put in place school based strategies and processes to support the treatment.

A mental health problem is temporarily experienced as a reaction to the stresses of life.

For example, in any one year, 20-30% of students may be experiencing problems such as loss and grief issues (eg break up with a girlfriend, divorce), or distress because of upcoming exams and may need additional help individually or in small school run support groups with programs based on personal insight and cognitive behavioural therapy.

Mind Matters Plus has engaged schools and community partners to work from the strengths of both perspectives to provide additional support for students with support needs in mental health and wellbeing.

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### Supporting students with support needs in mental health and well being in the school

Schools are well placed to promote wellbeing for the majority while preventing escalation of difficulties for those students already experiencing problems since evidence suggests that “success in school is associated with future life success” (AIHW 2005).

The project has struggled with the concept of how to describe students with genuine support needs around mental health. The term support needs is familiar to schools in areas of disability and learning difficulties and indicates the degree of likely support needed for the student to function effectively in the school.

A definition was needed which is relevant to schools and legitimate from a mental health perspective and which indicates the nature of support needed rather than focusing on the level of deficit of the child.

The terms “students with support needs around mental health and well being”, “students with mental health support needs”, “students with support needs”, and “additional and specific needs” have been used interchangeably in educational settings.

### What demonstration schools say

Demonstration schools have seen their chief role in supporting mental health for all students to provide psycho social and emotional competency (skills and attitudes) through a universal MindMatters curriculum ([www.mindmatters](http://www.mindmatters))

They understand that all students, whatever additional mental health issues they might have, require a strong foundation of pastoral care which is supported through mental health literacy for all teachers, parent and students. Continued professional development and support for staff is fundamental. Indeed a key learning from the project has been that without this foundation the efficacy of additional resources and programs is compromised.

Key elements which demonstration schools have refined through the project to support students with mental health support needs are:

- Documented and agreed referral pathways with communication about roles of students, teachers, parents and external support services.
- School Case Management for individual students in which the student has a transparent and authentic role backed by school policy and documentation.
- clear identification strategies which involves coordinated planning for all students to ensure students are not overlooked
- a range of strategies to support the individual learning needs of students

## CASE STUDY

One of the MM Plus schools (Coomabah) has developed a process of selection across student year levels to identify and provide targeted strategies for students with support needs in mental health and wellbeing.

Detailed information about the process can be found in discussion sheet no.7 “How do we know who needs additional support: the identification process” and the accompanying DVD and workbook on [www.mmplus.agca.com.au](http://www.mmplus.agca.com.au)

Data on student needs was gathered from three sources:

1. Subject teacher interviews: teachers were encouraged to identify any concerns about students in their classes. About half of each year level was identified this way.
2. Administration records: This identified student who’s concerning behaviour had been brought to the attention of the school Administration/welfare team through the internal school referral processes, contact from parents, family friends or peers
3. Self report surveys: Students rated themselves on feeling scales such as the CES-D administered by the teachers.

The District Education school psychologist assisted with this process. Cross-referencing between the three sources identified the 20 – 30 % students with mental health problems.

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### What schools are doing to support students with support needs in mental health and wellbeing

Questions have been raised by the demonstration schools such as:

- Is the term meant to cover young people who might be vulnerable including
- loss of a parent ,
- refugees and asylum seekers,
- gay and lesbian young people,
- young people with parents or carers with problems such as alcohol or drug abuse
- clever and hard working children
- children under care and protection order or
- are we only talking about students with established and diagnosed problems such as anxiety or conduct disorders

We know that poor mental health cannot be ignored because it is a significant risk factor for poor academic performance, alienation and social problems.

Research evidence such as “ interventions for children and young people who are beginning to show signs of distress are more likely to be successful when undertaken as part of a whole school approach to children’s mental and emotional health “(Department of Education and Further Skills) can lead to teachers feeling that they are not doing enough.

However, teachers are not expected to be experts outside of their realm of expertise. They are already putting in a significant effort in terms of increasing a sense of student belonging ness, student voice, inclusive curriculum as part of the whole class experience. This is what teachers do well.

Teachers are particularly good at identifying students at risk of school failure

There are some behavioural and physical signs of possible mental health problems that are particularly likely to be evident to teachers in the school setting. (Rickwood,2005) The following signs or combinations of them can be indicators to the teacher that a student might be experiencing mental health problems and need extra support (Lavalla Catholic College and Central East Gippsland DGP Partnership, 2004)

- behavioural problems over a sustained period of time
- withdrawn behaviour and lack of concentration
- fatigue and tiredness over a period of time
- irritability
- declining grades that are unusual for the student
- history of family problems, recent separations, death of family member
- absenteeism
- problems with peers and social isolation

Whatever the root cause, there is evidence that students can move in and out of vulnerable situations, depending on the support, or lack of support they receive at school, at home and in the community (DET, 2003).



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## Conclusion

There are some clear mental health disorders that have onset in adolescence and life experiences that make young people more vulnerable.

The descriptive term “students with support needs in mental health and wellbeing “ has emerged during the course of the MindMatters Plus project to emphasise that support for young people with additional needs is shared between the health and education sectors. It also acknowledges that all students need support in mental health and wellbeing but at times some students need additional support which can be catered for within the school or in conjunction with outside providers.

Together the focus is on the young person, health and education practitioners, parents and school support staff working together to SUPPORT the student. This term is consistent with the health promotion approach.

The role of this initiative has been to empower schools about the strategies and processes they can put in place to build the capacity of schools to respond more effectively .That might mean engaging in processes with people who are treating the young person but might also mean reviewing ways within the school to build a stronger foundation of support through curriculum and pastoral care.

The initiative has allowed through increased knowledge of mental health and mental illness, staff to be better informed about how things can go wrong, and be more aware of the signs, processes, and strategies to support mental health

The learning from the three year demonstration initiative reinforces that schools which support emotional and social competency for staff and students are better able to provide targeted and meaningful additional assistance for students with support needs in mental health and wellbeing.

The MindMatters Plus partnership between the two sectors (health and education) has allowed staff working within different paradigms to better understand how the mental health needs of young people are supported within a context of care for staff, students and parents.

Any attempt to support young people that focuses only on a problem resting within the young person, recognised through a label based on a set of standardised criteria, cannot adequately inform school staff about what they need to do.

A diagnosis of a condition does not draw direct relationship to the functioning of the child within the school setting or degree of support needed at any one time. For example, a student with good family support, doing well at school and who identifies as being same sex attracted in a school which is inclusive and which celebrates diversity, who moves to a single sex school with a history of homophobia may suddenly feel anxious and depressed. The only thing that has changed is the environment/context.

Students with support needs in mental health and wellbeing is a term developed to help the two agencies work better together to focus on ways that each agency can use its strengths to support young people.

### Relevant learning MindMatters Plus initiative:

“Building staff knowledge and insights into mental health and its relationship to behaviour can:

- increase the confidence of staff to relate to and assist individual students with support needs in mental health and wellbeing
- assist in building a common language and understanding of mental health so that the implications for school planning in areas such as discipline
- and the curriculum can be discussed more easily lead to planned identification and collaborative intervention for students with additional needs.”

[http://mmplus.agca.com.au/key\\_learnings.php](http://mmplus.agca.com.au/key_learnings.php)

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