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Understand mental health and wellbeing in learning communities

You play a central role in promoting and supporting good mental health and wellbeing within a learning community. Here’s why and how.

Child and adolescent development

From conception to young adulthood, a person’s physical, cognitive, psychological, and social development undergoes rapid change. Many factors, including genes and environment, influence this. Most children and young people will experience a positive developmental trajectory, and you can support this through your positive relationships with them. Positive relationships help children and young people better handle challenges, and learn skills that can improve health and wellbeing, resilience and learning outcomes.

Responsive relationships also support brain development. In the early years, these relationships, stimulating environments and play are crucial to the developing brain and, therefore, optimal development. These years are also when developing brains are most vulnerable to negative experiences.

Poverty, deprivation, toxic stress and trauma, and harsh or unreliable relationships, can compromise healthy development.

Mental health and wellbeing

Mental health and wellbeing are positive concepts and are not fixed – they exist on a continuum, with positive mental health at one end, emerging issues in the middle, and mental health conditions (clinically diagnosed) at the other end. People shift back and forth along this continuum. Mental health issues encompass various cognitive, emotional and behavioural issues that may cause concern or distress. They affect how a person thinks, feels and behaves.

When an individual has seen a health professional for their mental health, they might be diagnosed with a mental health condition. This is a clinical diagnosis (such as depression or anxiety) relating to a condition that significantly interferes with a person’s cognitive, emotional or social abilities. We know that almost one in seven children and young people will experience a mental health condition in a 12-month period. Mental health conditions are associated with lower NAPLAN results, more absences, poorer connectedness and poorer engagement.
Risk factors and protective factors

Risk factors for poor mental health include biological, psychological, and social factors, and experiences and events. The more risk factors that are present, the greater the likelihood that a child or young person will experience a mental health issue.

Protective factors help children and young people to be resilient and decrease the likelihood of mental health issues, even when risk factors are present. They include:
- family stability
- supportive and consistent parenting
- support available at critical times
- positive learning environments
- learning achievement
- an easy-going temperament
- good communication, problem-solving and social skills.

The family is central to many of these risk and protective factors. As an educator, you can seek to reduce the incidence or impact of risk factors as well as strengthen children and young people’s protective factors.

Mentally healthy community

A mentally healthy learning community is critical to children and young people achieving their best possible mental health, no matter their developmental stage.

Learning communities are a place of socialisation, where social and emotional needs, including the need for belonging and connectedness, can be met.

It’s helpful to appreciate the benefits of working within a collaborative whole learning community approach that brings together children, young people, families and educators to achieve systemic change. Promoting mental health and wellbeing in everyday practice is an integral step in creating a mentally healthy learning community. We know that the most effective way to achieve the aims of promotion, prevention and early intervention is by using a whole-school approach, where everyone is involved.

Your role

As an educator, you have a central role and can make a big difference in influencing children and young people’s mental health and wellbeing through positive mental health promotion.

Your learning community’s referral policies and referral pathways can provide advice about who can help with your concern – your main role is to observe and support children and young people. Rather than trying to diagnose or solve mental health issues or conditions, approach your work in a way that supports positive mental and health wellbeing. This could include having a conversation with someone you’re worried about, linking families to health professionals or support services, becoming involved in community-based mental health initiatives, and seeking support for yourself, if required.

Your wellbeing

Mentally healthy communities are as important for educators as they are for children and young people.

When educators are mentally healthy, it has a positive impact on the whole learning community. Self-care – your ability to look after yourself and seek extra support when you need it is critical to your ability to support others. Reach out for support when you need it – from colleagues, friends, family, your GP, a psychologist or an employee assistance program.
Connect through strong relationships

A mentally healthy learning community is characterised by strong, supportive relationships.

**Connectedness and belonging**

**Connectedness** is the sense of caring for and being cared for by others. Children and young people feel connected when they feel they belong, are an active part of their learning community, are treated equally, and feel safe, accepted, respected and included.

**Belonging** is the sense that you’re a valued member of a community. When children and young people feel like they belong, they’re more likely to develop a strong sense of identity, a positive sense of self, and strong relationships.

Connectedness and belonging are associated with positive mental health – both as protective factors and in assisting in recovery from mental health issues. On the flipside, when a child or young person feels lonely, isolated, unsupported or like they don’t fit in, a range of negative outcomes can occur.

Learning communities can build connectedness and belonging through:

- **Relationships**: Developing connections based on warmth, empathy, and respect is crucial. The perception of having somebody to talk to about things that matter is strongly correlated with positive mental health.
- **Active participation**: Providing opportunities to take part and contribute. When children and young people are listened to and their contributions are valued, it supports the development of a positive self-image and sense of connection to the learning community.
- **Inclusion**: Everyone in your community needs to feel that they fit in, and that they have a unique part to play. Educators can actively find ways to respect differences, model positive attitudes and value diversity.

**Positive and respectful relationships**

Positive and respectful relationships occur when all parties feel respected, secure and supported in their interactions with one another.

To strengthen relationships with children and young people, you can do the following:

- **Show interest**: When trusted adults value the contributions of children and young people, and celebrate their achievements, it helps to build the confidence and courage to participate fully in social and learning activities.
• **Role model**: Everything you do has social influence. Show empathy and kindness, communicate clear, developmentally appropriate expectations, and apologise when you’ve made a mistake or forgotten something.

• **Praise** respectful behaviour to positively reinforce it.

• **Encourage participation**: Provide choices and opportunities to suit diverse learning styles, and set individual and realistic goals for each child.

• **Set high but achievable standards**: Research shows that high expectations give children and young people the sense that educators care about them.

• **Value, respect and celebrate diversity**, and promote inclusion.

To strengthen relationships between peers, you can:

- develop strategies to help children and young people join in with others
- help them to solve day-to-day difficulties (for example, disputes about turn-taking)
- teach social and emotional skills, inclusive behaviour and culturally respectful attitudes
- encourage kindness, helpfulness, acceptance, and collaboration
- notice and respond to social withdrawal.

To strengthen relationships with families, you can:

- communicate clearly, positively and regularly
- use a strengths-based approach
- include all families (be aware of cultural differences that may affect communication, ask families for input, and ensure forms are accessible and inclusive to all)
- share resources (for example, consider allowing children, young people and their families to use early learning service or school buildings outside of hours for recreational programs).

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### Bullying

**Bullying is damaging, common and complex.**

A person is bullied when they are intentionally and regularly exposed to negative and harmful actions that aim to embarrass, threaten, intimidate or exclude them. Approximately one in four children and young people in Australia are affected. There are serious psychological and social consequences of bullying, including an increased likelihood of developing mental health conditions. Without the right support, bullying can have significant long-lasting effects.

### Healthy transitions

**Transitions are a period of adaption to new circumstances, expectations, people, environments or routines.**

Belonging and connectedness supports children and young people’s adjustment during transitions. Successful transitions are more about positive relationships than perfect procedures. You can support positive transitions by:

- understanding how transitions might affect children and young people at different developmental stages
- being aware of how they might communicate their feelings
- noticing when they may need additional support
- creating opportunities for small, positive transitions to promote learning
- partnering with families to understand and address children and young people’s needs
- providing families with resources about mental health and wellbeing during times of transition, to empower them to support their child or young person.
Inclusive practice for educators relates to creating opportunities for everyone in a learning community to be who they are and to achieve their best mental health.

**Inclusion and diversity**

*Inclusion* is about removing barriers to make sure everyone, including your colleagues, can fully participate and has equal access to opportunities. Inclusion occurs when everyone in your learning community feels valued and respected, has access to opportunities and resources, and can contribute their perspectives and talents. If people feel invisible or experience bullying, harassment or discrimination, this can affect their sense of self-worth. It can also interfere with learning and may impact on their mental health and wellbeing. It also empowers people to contribute their experiences, skills and perspectives so that everyone can benefit.

*Diversity* is about different ways of thinking and being. Differences can include age, religion, gender and gender identity, socioeconomic status, sexuality, ethnicity and culture, education level, family arrangements and circumstances, personality, interests and abilities, mental health status, disabilities and physical attributes.

**Core inclusion principles**

Educators should aim to provide children and young people with a sense of belonging and connection within a safe environment (emotional, social and physical). This, in turn, can motivate them to participate actively in their learning and the broader life of their community.

Core principles your learning community can use to build an inclusive community include:

- building resilience across the community
- building and maintaining strong connections with families
- creating and maintaining safe learning environments
- following policies and procedures that acknowledge diversity
- adopting targeted strategies to reduce discrimination.

**Attitudes and barriers**

The World Health Organization defines *stigma* as:

*a mark of shame, disgrace or disapproval which results in an individual being rejected, discriminated against, and excluded from*
participating in a number of different areas of society”.

Stigma can result from both actual and perceived differences. It can be any form of difference, including gender, race, religious belief, sexuality or mental health status. Discrimination based on stigma may be obvious and deliberate, or it may be subtler and more unintended.

**Discrimination** happens when a person, or a group of people, is treated less favourably than another person or group because of their background or certain personal characteristics. Discrimination is against the law if it’s based on a person’s age, disability, race, pregnancy, marital or relationship status, sexual orientation, gender identity or intersex status.

**Diversity of experience**

As an educator, you have contact with people from many different settings and circumstances. Evidence shows there are a number of groups within Australia at increased risk of mental health issues and conditions. It’s likely at least some of these groups are part of your community, as they include:

- rural and remote communities
- people impacted by trauma
- older people
- people impacted by eating disorders
- people with disability
- veterans
- people impacted by substance misuse
- Aboriginal and Torres Strait Islander communities
- multicultural and culturally and linguistically diverse people
- gender and sexually diverse people.

**Inclusive early learning services and schools**

At its heart, inclusion is about encouraging everyone to participate. As an educator, you can do the following:

- **Get to know children, young people and their families.** Trusting relationships and partnerships can help you notice when a child or young person doesn’t seem to be connected or their behaviour changes. Ask families how they wish to be involved.
- **Support self-esteem.** When you show respect for a child or young person’s uniqueness, you reinforce their sense of belonging, support identity development and boost their self-esteem.
- **Empower all children and young people to participate.** Some individuals need extra help to access everything on offer. Identify and make appropriate adjustments to ensure people with a particular need can participate like everyone else.
- **Actively teach inclusion.** Talk with children and young people about the way they understand difference. Support them to recognise and respect its value. You can start this process by celebrating key dates of significance for various groups.
- **Challenge prejudice, assumptions, generalisations and discriminatory comments.** Be attuned to subtle as well as overt exclusion.
- **Consider the environment** and what it looks and feels like to all children, young people, families and educators.
- **Facilitate connections.** Find opportunities to encourage relationships between children and young people who identify as different from each other.
- **Be aware of policies.** A whole learning community approach to inclusion should, for instance, promote cultural competency training and professional development, and develop targeted strategies to reduce discrimination.
Partnering with families is considered a key factor supporting positive mental health outcomes. Working with families helps to support children and young people’s social and emotional wellbeing, learning and development opportunities during unplanned activities and conversations.

**What partnerships look like**

A partnership is a collaborative relationship between people who agree to share responsibility and work together towards a common goal. Effective partnerships are based on:

- mutual trust and respect
- open communication
- sharing ideas, knowledge and expertise
- valuing each person’s unique perspectives and contributions
- making decisions together.

Family involvement in education is a known protective factor for children and young people’s mental health.

The benefits of strong educator-family relationships are clear, with research consistently showing their importance to social and emotional wellbeing and academic achievement, regardless of other factors.

Many learning communities have a long history of family involvement – families may assist in the classroom or canteen, help with fundraising, or participate in various committees. This type of involvement supports family-educator relationships and offers a valuable community and governance function. There’s a distinction, though, between involving families and engaging with them.

The goal of engagement is to develop an equal partnership around the child or young person’s everyday experiences.

Engaging families motivates them to contribute to learning and mental health and wellbeing outcomes in the home as well as at the early learning service or school. Though there are barriers to partnerships from time to time, barriers can be overcome.
Developing partnerships with families

It takes time to build partnerships and may take longer with some families than others.

Although effort is required – such as planning, gathering information, preparing staff and promoting the learning community as a place of support – the benefits of this work are significant. The building blocks for developing positive partnerships between educators and families include:

- **Building trust**: You and the families you partner with need to value each other’s knowledge of each child or young person, as well as each other’s contributions to, and roles in, each child or young person’s life.

- **Family-centred practice**: Draw on family knowledge, resources and strengths. Share information in an open, respectful and collaborative way.

- **Communication**: Honest, respectful communication and a genuine interest in one another helps to build trust, which, in turn, allows people to be open about their thoughts and feelings. Effective communication involves sharing of information, which helps everyone in the learning community to be aware of a child or young person’s strengths and challenges, and to work together to support one another.

- **Empathy**: Try to see things from a family’s point of view – for example, when a family is too busy to stop and chat at pick-up time, being understanding of how stressful it can be when time is limited.

- **Respect for diversity**: Review your environment with inclusion in mind. Respect differences when discussing backgrounds, values and beliefs. This helps you to find common ground and work together to achieve shared goals.

**Connect, collaborate, communicate**

Connecting, collaborating and communicating are all key to working with and partnering with families.

Children and young people benefit when the significant people in their lives collaborate. This boosts the outcomes for children and young people’s mental health, as well as their learning and development. As an educator, think about the naturally occurring opportunities for conversations with families about development, social and emotional learning and mental health and wellbeing.

The development of positive relationships between families and educators takes effort from all parties and typically develops over time rather than over a single event.

Increasingly, families are becoming more complex and have varying expectations of what early learning services and schools can provide. Continue to reflect on and develop communication skills to ensure you’re well prepared and ready to communicate effectively with families. Communication is a two-way process where educators and families share information with each other and commit to work together in an ongoing way. Review policies and procedures so that you know what to do when families raise concerns.

**Partnerships and SEL**

By partnering with families, you can strengthen the network of relationships essential for children and young people’s mental health and social and emotional learning (SEL).

SEL occurs throughout childhood and into adolescence, and individuals develop SEL skills through their relationships with family, educators and peers. They also observe relationships between their family and educators. When you partner with families, it can make a positive difference. Keep in mind that SEL develops over time and may vary for different individuals.
You can help families to understand the importance of mental health and wellbeing, and to develop appropriate strategies at home. You can also collaborate with families to support children and young people experiencing mental health issues and conditions.

Acknowledging the role of the family

Families are central to development and long-term wellbeing.

For most people, the home environment and family relationships have the biggest impact on later life outcomes. Children and young people who grow up in a nurturing family environment are more likely to experience better health outcomes in adulthood.

Protective factors within the family include strong and stable relationships, supportive parenting, and consistency in routines and limits. Families can boost protective factors by taking the time to listen, helping children and young people to feel understood and loved, taking time to have fun, and helping children and young people learn coping skills.

In healthy family relationships, people communicate well and trust and rely on each other for support, love, affection and warmth. Conflicts, which are a normal part of family life, are dealt with in a safe and respectful way. Children and young people can also be exposed to risk within the family, such as family conflict, inconsistent parenting, family violence, child abuse, neglect, mental health issues, substance abuse or financial difficulties.

Your role

Understanding your role in supporting the mental health of children, young people and their families is essential to providing the right support at the right time.

Keep in mind that there are boundaries around your role as an educator and your interactions with families in providing support. If a family comes to you with concerns about their child or young person, think about whether you’re the best person to discuss the issue. You might need to refer them to a member of the wellbeing team or a member of the leadership team. Together you can work with the family to clarify areas of
concern and make decisions about possible referral options.

By partnering with families, you can direct them to information and services that will help them support their child. Families may not be linked to other organisations in the community, and often look to an early learning service or school for guidance on services and resources, or to connect with other families. Being prepared for these scenarios, and understanding your role within this process, will help you provide effective and timely support — and allow you to look after yourself.

Support families and parenting

When you support families in their parenting role, children and young people benefit.

Families who have a greater understanding of child development and mental health and wellbeing are better able to meet the needs of children and young people, and to recognise the early signs of mental health issues or conditions.

Support families by:

- providing information such as age-appropriate behaviour and developmental milestones
- providing options for families to choose from when and if they want information and services
- being open, approachable and understanding: Many people are reluctant to seek help because of the stigma associated with mental health issues. Families may also fear they’ll be blamed for not ‘doing enough’ for their child or young person. You can listen empathetically, build and maintain positive relationships, and respond to concerns quickly and appropriately.

Self-care and stress management

Supporting the mental and physical health of families is just as important as looking after that of children and young people.

You can do this by encouraging families to practise self-care. When families are supported to look after themselves, they are more likely to provide their own children with the best care possible, helping them to feel secure and relaxed, and to learn how to manage life’s difficulties.

Respond to concerns

All questions from families require a response and a follow-up, but you don’t have to offer a complete response straight away. You may not feel you have the knowledge, expertise or availability to answer questions in some instances, and that’s OK.

Simply listen and acknowledge what’s been said, and inform the family that you’d like to consult with colleagues about the concern. However, knowing where to find appropriate information and support is one of the best ways to prepare for questions from families.

Tips for responding to concerns from families:

- Provide quality information: Have current parenting resources available. Arrange information sessions with guest speakers such as local health professionals.
- Familiarise yourself with sources of support including information, resources and specialised staff within your learning environment, local community or nationally. Think about whether you’re the best person to discuss various issues – you might need to refer them to a more specialised colleague or a member of the leadership team.
- Link families to support: This may be internal resources, a related community program or a mental health professional.
- Use a strengths-based approach: When concerns are raised, it can be easy to forget about the strengths of the individual and focus only on problems and negative behaviours. A strengths-based approach doesn’t mean issues or concerns are not raised; rather, it includes strengths in the conversation. Often solutions to problems can be found when strengths are identified.
- Problem-solve: When a family or educator raises a behavioural concern, it can be helpful to acknowledge the times when the child or young person behaves well. This assists in identifying more clearly where the problem may lie and helps the child or young person to maintain a sense of self-worth.
Learning Resilience
Learning how to manage feelings, manage friendships and solve problems supports mental health and wellbeing.

**Social and emotional learning**

Social and emotional learning (SEL) refers to learning the values, knowledge and skills that help children and young people relate to others effectively and contribute positively to their environments. Children and young people who have developed these skills find it easier to manage their emotions, relate to others, make decisions, resolve conflict, and feel positive about themselves and the world around them. They’re also likely to have enhanced motivation to engage and achieve.

**The developing brain**

Social and emotional development is associated with brain development.

The brain’s architecture (or structure) provides a foundation for children’s SEL and motor skill development. Brain development is a dynamic process that’s influenced by genes and the environment. While genes provide the biological basis for the formation of neural connections, these connections are reinforced by a child’s environmental experiences.

Many of these experiences occur within a child’s family relationships or with other significant adults, including educators. In your daily interactions with children and young people, you can help to influence their brain architecture and social and emotional skills to develop in a positive way.

**Developing social and emotional skills**

Children are born communicators – from infancy, they’re motivated to relate to other human beings and develop socially in the context of relationships.

However, a person’s ability to understand others and take their needs and views into account develops over time. Young children are naturally self-focused. As they get older, they learn that others may see things differently to them. Then, as their thinking skills develop, they’re more able to understand another person’s point of view, and, finally, to appreciate multiple ways of looking at the same event or situation. Children and young people develop socially in the context of relationships. Warm, responsive and trusting relationships help them feel safe and secure to explore the world around them.
As an educator, you can affirm children and young people’s SEL skills related to the following:

- **Development of social values**: Children and young people learn to make ethical judgments by practising putting themselves in other people’s shoes and being encouraged to reflect on social values. You can work with families to help children and young people understand and learn to act on values like respect, responsibility, caring for others, honesty, cooperation and acceptance of people’s differences.

- **Development of emotional skills**: Emotional development is a complex task that begins in infancy and continues into adulthood. It involves learning about feelings, understanding how and why they happen, recognising one’s own feelings and those of others, and developing effective ways of managing these emotions. Families and educators have an important role to play in supporting emotional development by responding effectively, talking with children and young people about feelings and how to manage them.

- **Development self-concept**: Children and young people base their self-concept on feedback they receive from others as well as their own judgments. It’s very important for strengths and efforts to be recognised to support the development of a positive self-concept and to motivate children to be positively engaged in relationships. Poor self-concept can contribute significantly to emotional and behavioural difficulties.

- **Puberty**: An added complexity for older children and young people is the onset of puberty, which can impact the development of social and emotional skills and sense of self due to hormonal, physical and emotional changes.

**Developing resilience**

Resilience shares a close relationship with mental health because being able to bounce back from challenges or adversity is a significant protective factor that supports children and young people’s mental health.

Resilience is not something a person is born with – it can develop and change over time, and is best expressed on a continuum. People may have more or less resilience to draw on at any given time depending on their circumstances. We also know that some children and young people experience more significant challenges, and, in those cases, resilience takes on quite a different meaning. For some individuals, particularly those subjected to abuse or neglect, life can be uncertain and threatening and their basic human needs may not easily be met.

Children and young people develop resilience through a combination of individual, family, community and societal factors. Building a child’s resilience involves both improving their skills and capabilities and improving the environments around them.

**Supporting social and emotional learning**

SEL is an effective way to foster resilience and promote children and young people’s mental health.

Children and young people benefit from having plenty of opportunities to learn and practise these skills in their everyday experiences, but they’ll develop these skills at different paces due to having different temperaments, skills, opportunities, experiences, and a variety of risk and protective factors, in their lives. Regardless of what they’re capable of right now, they’ll continue to develop and learn these skills over time. Your role is to make the most of opportunities to model, teach and support them to do so.
Social and emotional development involves learning the values, knowledge and skills that enable children and young people to regulate their emotions, relate to others effectively and to contribute in positive ways to their family and education.

**Embed**

There are many opportunities for you to support children and young people in developing social and emotional learning (SEL). This could include planned activities across the early learning service or school or activities within specific learning environments, as well as making the most of informal learning opportunities during unplanned activities and conversations.

**Embed social and emotional learning**

**Embedding SEL starts with strong relationships.**

Warm, responsive and trusting relationships between children, young people and educators provide a safe environment in which they feel confident practising these skills. SEL can be passed on through:

- **incidental learning** such as unplanned learning that occurs during other activities, when you respond to spontaneous opportunities

- **intentional learning** which is the persistent, proactive process of acquiring, understanding, and applying knowledge; the formal teaching of skills, and providing opportunities to practise them.

A strengths-based approach incorporates the underlying assumption that skills can be taught, practised, developed and mastered. Children and young people are likely to benefit from having opportunities to learn and practise social and emotional skills in everyday experiences with adults and peers. They may often still need support from adults to help them manage their relationships and interactions. Educators play a central role and can foster children and young people’s social and emotional learning in different ways.
Self-awareness and self-regulation

Self-awareness is the ability to recognise one’s own emotions, thoughts and values, and how they influence behaviour. You can teach this by talking to children and young people about their experiences, including encouraging them to notice body signals, encouraging them to notice and name their feelings and the feelings of others, and discussing how these relate to behaviours.

By acknowledging children and young people’s emotional responses and providing guidance, you can help them understand and accept their feelings and develop effective strategies for managing them.

Self-regulation is the ability to manage emotions, control impulses, and motivate yourself. Children and young people need adults to help them manage their emotions. They then gradually learn how to do this for themselves.

Social awareness and relationship skills

Social awareness is the ability to take the perspective of and empathise with others, and recognise, interpret and respond to social situations in ways that society sees as appropriate. The main skills for developing self-awareness include perspective-taking, empathy, appreciating diversity, and respect for others. You can teach this by role-modelling perspective-taking and compassion, celebrating diversity, promoting inclusiveness, and teaching the skills to work together effectively.

Healthy relationships are built on trust, communication, mutual respect and empathy. You can teach this by intentionally teaching children and young people about respectful and healthy relationships, role-modelling how and when to use a skill, and using formal SEL programs.

Responsible decision-making

The skills for making good decisions are learnt gradually, and guided by values.

Children and young people learn these skills when they’re taught the steps and given opportunities to practise using them. You can view children and young people as capable contributors to their world (for example, by providing tasks that require a meaningful contribution, letting them make decisions and experience consequences), while also helping them learn from mistakes, teaching values and using the curriculum.

Classrooms and communities

Policy and curriculum decisions have a huge influence on SEL opportunities. By reviewing and modifying curriculum, policies and practices with SEL in mind, you can support children and young people’s mental health and wellbeing.

Evidence-based resilience or SEL programs are ready-made lessons that seek to explicitly teach and strengthen skills for positive mental health and wellbeing. Effective programs improve student behaviour, attendance, learning and academic performance.

Effectively teaching SEL is grounded in respectful and responsive relationships. Your role is to guide learning.

Include families and communities. Children and young people learn social and emotional skills more effectively when they're reinforced at home. Many SEL programs include opportunities to involve the family and community, so they can learn what they can do to support SEL at home.

Modelling resilience

As an educator, you can model resilience while working with children, young people, families and communities.

Healthy thinking, problem-solving, talking about adversity and developing positive relationships are all helpful in building a picture of what resilience can look like. This can be a great starting point for conversations and continuing learning at home for children, young people and their families.
Empower children and young people to look after their mental health and wellbeing

An empowering environment is one where children and young people have a voice, actively participate and have routine opportunities for leadership. Empowerment helps foster resilience and positive social and emotional learning (SEL).

**Empower**

As an educator, you have the opportunity to, and responsibility for, promoting an empowering environment where children and young people are trusted to exercise autonomy and agency.

**Empower education settings**

Empowerment starts with your understanding of, belief in and commitment to children and young people taking an active role in their education.

True empowerment involves a way of working that actively engages children and young people as full partners in initiatives. It occurs as a result of the interplay between children and young people's developing sense of agency – being visible, having a voice, being competent and capable contributors to their world – and having access to opportunities to learn about and enact their rights. Empowered education settings recognise children and young people's rights and actively plan the learning environment to foster their developing capabilities and autonomy.

Participation in decisions that affect us is a basic human right.

When you focus on empowering children and young people, you acknowledge that they have rights and can actively contribute to the learning community and their own learning. Empowerment helps to develop citizens who know they have value, who work productively with others, are competent, curious and willing to act. You are also recognising and conveying that all children and young people deserve respect and the opportunity to have their voice heard, regardless of age, gender, socio-economic background, culture, beliefs, abilities and so on. Empowerment teaches children and young people about equality, equity and democracy. It contributes to a fairer, more inclusive society.

Empowerment means giving children and young people the opportunity to actively participate in activities and decisions that shape their lives, where they have a voice and have routine opportunities for leadership. Being empowered is
a protective factor for children and young people’s mental health.

Empowerment looks different for different children and young people – something that seems like a small step for one person might be a huge leap for another.

It takes time to develop strategies that work for each person. And sometimes the seeds you plant take time to grow and flourish. By committing to integrating empowerment into everyday learning activities, you’re communicating to children and young people that they matter, they have rights and they can exert some control and influence in their lives. This message helps them to develop a sense of self-worth, which supports mental health and wellbeing.

Empowerment principles

The Convention of the Rights of the Child (CRC) consists of fundamental principles that support you to actively plan and develop empowering learning environments.

When these principles are considered and embedded into learning environments, you can intentionally plan and support activities that develop resilience, independence and social and emotional skills.

Empowerment is a process where children and young people are supported to develop a sense of agency and increasing control over decision-making that corresponds to their developmental stage, increasing motivation and engagement in learning. Empowerment is child or young person-led and will therefore look different in every educational setting. It will also differ depending on age and developmental stage.

Genuine empowerment means children are supported by adults to lead projects and discussions.

Although they require preparation and support, this process may challenge existing power relations in a service. It might be hard for you to step back and give children space to explore an initiative or an approach. It’s important to know when and how to step back, as well as when and how to step forward.

Autonomy and agency

Agency relates to an increasing ability to make decisions and do things without help, understand how to act in a group, behave in ways that take others into account and cope with difficulties successfully.

This is the usual way of going through life for children with a strong sense of agency. However, it doesn’t mean children will always be confident and strong in these ways.

As children’s sense of agency develops, they grow as individuals who know they have value, who contribute to problem-solving and decision-making, who work productively with others and can make a difference. When you actively plan the learning environment to develop children’s sense of agency, you support their capacity for self-determination. This is central to becoming empowered.

Involve families and the community

Learning occurs everywhere – when you provide information to families, they can use consistent strategies to empower their children and young people at home. You can:

- promote children and young people as competent, capable and active participants in learning
- help families understand how empowerment supports learning, motivation, engagement and mental health
- acknowledge that learning occurs through all experiences
- reinforce that families are the first educators of their children
- enlist support from adults in a child or young person’s own community to support empowerment of those from diverse backgrounds.
Early Support

With delivery partners: be you, Beyond Blue, Early Childhood Australia, Headpace, Australian Government Department of Health.

Funded by: Early Support.
Notice the early signs of mental health issues

As an educator, you have a unique perspective and opportunity to observe where the children and young people you care for and teach might sit along the mental health continuum. Not only that, but you’re able to support those children and young people who might have difficulty coping with things happening in their life.

Mental health continuum

An individual’s mental health and wellbeing is not fixed or static – it can change depending on a complex interplay of social, psychological, biological and cultural elements in a person’s life. Mental health can be thought of as existing on a continuum; with a child or young person flourishing at one end, going OK or feeling unsettled in the middle, and mental health conditions at the other end. The Be You Mental Health Continuum can help you to recognise specific behaviours, and impacts to daily functioning, in children and young people which may indicate the need for further assistance, with developmentally specific versions for the early years, primary school years, and adolescence.

Mental health changes over time in response to different stresses and experiences. There are many factors, both internal and external, that affect where someone generally sits on the continuum, and also where they sit at any given point in time.

Most children and young people will sit at the flourishing end of the continuum most of the time.

But you’re in a position to observe changes in behaviour, emotional responses, expressed thoughts, learning, social relationships and physical symptoms which might indicate that a child or young person may be moving toward the other end of the continuum. When this is the case, the earlier they obtain support, the better the chance they have of overcoming difficulties, and of reducing the risk of more serious mental health issues.

Understand your role

In a learning community, children and young people learn many new skills and develop so rapidly that it’s very common for them to demonstrate a range of behaviours or emotions.

Most of the time, your support, along with that of families, is enough to help them work through their feelings and learn to respond to situations in
positive ways. But sometimes they'll need extra support, and you play an important role in helping them access it.

You don't need to be a mental health expert, and you're not responsible for providing mental health diagnoses, assessment or treatment. Your main role is to:

- approach your work in a way that supports positive mental health and wellbeing
- notice early when something's not right, and check in with colleagues, the child or young person or their family
- know your school or early learning service’s policies for responding to mental health issues and conditions.

**Objective observation**

**Identifying when a child or young person needs extra support comes down to noticing.**

You know the children or young people in your care – you see them day in, day out – so you’re in a great place to notice any concerning changes. Sometimes changes might be easily explained (for example, a teary child may be hungry or tired, or strong emotions may be how a young person normally reacts to a challenge) and you know how to support them in these circumstances. But in another child or young person, these reactions might surprise you because it's out of character or there's no apparent reason for the change.

Even then, sometimes these changes aren’t cause for concern. Remember, we move along the mental health continuum all the time. It’s prolonged, significant or disruptive change that can signal the development of a mental health issue or condition.

**Behaviour and emotions can be difficult to interpret.** You don’t have to interpret what you notice. If you notice and record, you should have accurate information on hand if you need to talk to families, colleagues, or other professionals.

The BETLS (behaviour, emotions, thoughts, learning and social relationships tool) observation tool can help you to record:

- **behaviours** (for example, destructive behaviour, repetitive behaviour, withdrawal and perfectionism)
- **emotions** (sadness, irritability, excessive anger and excessive worry)
- **expressed thoughts** (persistent pessimism, excessive worrying and hopelessness)
- **learning** (disinterest, decline in performance, difficulty concentrating)
- **social relationships** (isolation, poor social skills, aggression towards others and social withdrawal)
- **physical issues** (frequent headaches or stomach aches, failure to thrive, tiredness, or changes to or unusual eating habits).

The BETLS tool also asks you to consider how prevalent, frequent and persistent what you observe is; and how much it’s impacting on a child or young person’s day-to-day experiences.

Generally, the longer the behaviour or emotions have been occurring, the more settings they occur across and the more they’re impacting on the child or young person’s everyday experiences, the greater the cause for concern. Consider developmental stages – for example, a wide range of behaviours, including increased sleep, emotionally driven decision-making and risk taking could be the result of adolescent development, and are not necessarily signs of mental health issues.

If you're not sure what to do, that's totally fine – and it's OK to say so.

Remember, it’s not your role to diagnose, label or treat mental health issues or conditions – all you need to do is notice changes that could be cause for concern, and act appropriately. You can talk to colleagues and/or the child or young person’s family to get a sense of what they think about what you’ve noticed. You aren’t alone in choosing the next steps – in fact, the more collaboration and reflection, the better. Don’t forget to consider confidentiality, risk, self-care and mandatory reporting. Knowing who to go to for support is key.
The first step in supporting a child or young person you’ve noticed might be experiencing a mental health issue is to have a conversation. Having a conversation, and showing your concern and willingness to help, gives children and young people an opportunity to share what they’re going through.

**Inquire**

There are lots of ways to inquire about a child or young person’s circumstances. It’s important to consider the time and place for the conversation, as well as the language you use. Keep your learning community’s policies and procedures in mind when you’re having the conversation, and take care of yourself after the conversation.

**Be prepared**

Starting conversations about mental health is about showing you care and are prepared to listen. Throughout this process, it’s important to remember you’re not diagnosing a mental health condition – you’re discussing the behaviours you’ve observed and documented that have raised your concern about a child. Be careful using labels of mental health conditions because children, young people and their families will respond differently. Inquiring should demonstrate that you care and you’re there to support them.

After reflecting on what you’ve observed in a child or young person, it can be helpful to consider the following:

- **Check in with colleagues**: A colleague’s perspective can help to confirm your observations and develop a cohesive strategy to support the child and their family.
- **Consider** who’s the best person to have the conversation, and the timing and place of the conversation.
- **Consider stigma** and how this may impact how someone responds.
- **Know your options**: Be familiar with your early learning service or school’s policies and procedures around mental health.
Conversations with children and young people

How you have a conversation, and who you have it with, will depend on the child or young person’s age and developmental stage. If after reflecting on what you’ve observed and checking in with colleagues you’ve decided to have a conversation with a child or young person about their mental health, the next step is to approach them. Depending on their age and their trust in you, they may share feelings, fears or anxieties, or an incident that occurred which they’re trying to make sense of.

You use developmentally appropriate language every day in your service or classroom. While it might feel daunting, discussing mental health means transferring the skills you already have to this area, rather than learning new ones. You don’t need a magic wand or a perfect phrase to engage a child – just be genuine and kind.

Talk openly, accurately and respectfully. Consider the child or young person’s language skills. You want them to hear and understand you, so use everyday language that won’t confuse or frighten them. Remember, when someone’s distressed, depressed or anxious, their cognitive skills may be reduced.

Conversations with families

It’s best to plan ahead before talking with a family. Any conversation with a family is going to be best placed if you have an existing strong relationship with that family, but regardless, you should seek to create an appropriate space for the conversations, assume those caring for the child or young person are the experts on that individual, be aware of barriers and cultural contexts, start the conversation by voicing a concern you’ve observed, and allow time for reflection.

Discussing your concerns about someone’s mental health might not always be easy. Sometimes there are barriers to discussing children and young people’s mental health and wellbeing with families. They may be related to the service or school itself, a family’s connectedness with the learning community, the family-educator relationship or your availability.

A family’s previous experiences with your service or school, or another learning community can also impact on their willingness to discuss their child’s concerns. This can be a disincentive to engage in any other related conversations about mental health. Other barriers may stem from a family’s negative attitudes about the availability and usefulness of support. In particular, this can be an issue for families living in hard-to-reach populations in remote areas.

Next steps

Whether or not a conversation with a child or young person or their family has gone well or not, individuals and families are more likely to ask you for help if they trust you.

They may also be more willing to work collaboratively to develop and agree on a plan to help the child or young person. You may or may not have similar concerns to the family about their child or person. If so, it’s an opportunity to introduce families to the idea of seeking help. No matter who initiates, help-seeking is a positive step that can help to prevent mental health issues from developing or escalating into mental health conditions. Remember, the earlier the intervention, the better.

If you’re concerned a conversation with a child or family didn’t go as well as you hoped, have a chat with a colleague.

Their perspective may help you to understand the situation or work out next steps or future strategies. However, while open and respectful conversations are important, if a child, young person or family has told you about their experiences in confidence, you should ensure you follow your learning community’s policies and procedures for debriefing. You may need to share general information (for example, that a child or young person is seeking support for a problem) if it’s important to enable other educators to offer support. And you can share specific information if you believe a child or young person is at risk.

If the child, young person or family doesn’t talk to you about what’s going on, continue to monitor them and check in again if your concerns persist.
If a child or young person requires support because of a mental health condition, you need to understand your role and the role of others.

**A coordinated approach**

The earlier a child or young person receives support for emotional, behavioural or social difficulties, the better their chance of overcoming those issues, and of reducing the likelihood of more serious mental health conditions. As an educator, providing support doesn’t mean you need to be a mental health professional or to find a solution to the problem yourself, but there’s a lot you can do to help if you have concerns about a child or young person.

Your responsibility is to understand the policies and procedures relevant to your role. But to effectively support the children and young people in your care, it’s also useful to have a good understanding of the supports available, and the most appropriate time for you or your community to call on them.

**Mental health services**

Learning communities can provide support through the following:

- **Prevention strategies** – teaching daily strategies for mental health (such as eating well, sleeping well, keeping active, and nurturing supportive social networks).
- **Stress management strategies** – teaching strategies to support children and young people through stressful situations (for example, conflict resolution skills, relaxation and mindfulness strategies).
- **Universal (or primary) services** – you’re part of the universal service system, which includes student wellbeing coordinators, school counsellors, early learning service support staff, child and family health nurses, school nurses, and general practitioners (GPs). These services can provide assistance themselves or determine whether someone might need more specialised support.

External supports may include:

- **Secondary services** – such as psychologists, paediatricians, psychiatrists, social workers, family support workers and allied health professionals. These health professionals provide a range of services, such as face-to-face counselling, play therapy, cognitive behaviour therapy (CBT) or medication.
• **Tertiary (or specialist) services** – such as specialist paediatric clinics, family therapy services, Child and Youth Mental Health Services (CYMHS or CAMHS) or hospital inpatient services. These services are for children and young people experiencing complex and severe mental health issues or are at high risk of harm.

A child or young person may receive support from multiple services. They may also move up and down the tiers, depending on their needs at the time. If you’re not sure where an individual fits and what support they need, speak with your wellbeing team or lead educator.

**Support help-seeking**

Creating a mental health support network for your early learning service or school means you’ll have support on hand when you need it. This also ensures that your knowledge is current, well researched and of high quality. Help-seeking in this context means actively seeking help from other people. It involves communicating with others to get help – including understanding, advice, information, treatment and general support – in response to a mental health issue, condition or distressing experience.

**You support children and young people’s mental health when you:**

• are aware of relevant health services – who’s available and what they offer – so that you can speak with credibility about the help available

• assist with referrals and offer to attend sessions, if needed

• work to clarify issues with children, young people and families to determine if professional support is needed.

**Know your community**

Learning communities are an important entry point for family access to mental health services.

More than half the children and young people who receive mental health support are referred through the education sector. It makes sense, then, to build relationships with service providers outside of crisis situations.

By being aware of available options, your early learning service or school can facilitate appropriate supports, reducing the distress to you, children, young people and families. It also improves their experience and longer-term prospects. By linking and mobilising their resources, learning communities and health and community services can achieve significant positive outcomes for children and young people.

**Ongoing support**

Enabling children, young people and their families, to become more mentally healthy is a process, and supporting an individual with a mental health condition can often be challenging.

Ongoing training and professional development for those who work with children, young people and their families is very important, helping them develop non-judgmental attitudes and identify when to follow up on observations.

Risk factors and protective factors change over time and according to the situation – by understanding their interplay, you can help promote protective factors in the life of an individual experiencing a mental health issue or condition.
Responding Together
A critical incident is an event outside the range of normal experience – one which is sudden and unexpected, makes us lose control, involves the perception of a threat to life, and can include elements of physical or emotional loss.

What is a critical incident?

Often such events overwhelm a person’s coping capacity. The safety and wellbeing of children and young people, educators, and the learning community depends on managing critical incidents well.

Critical incidents may occur within your early learning service or school, or outside it.

They may include the death, suicide, or terminal illness of a child or young person, staff member, family or associated community member; accident or serious injury; natural disasters; fire or vandalism at the learning environment; and many other situations.

Experiencing a critical incident doesn’t necessarily mean a child or young person will experience a mental health issue or condition.

How someone responds to a critical incident will vary according to their cognitive abilities, developmental stage, levels of resilience, understanding of the situation, level of support, presence of risk and protective factors, previous exposure to other critical events or adversities, and the personal meaning attributed to the experience. Some events may have little impact on one person but cause severe distress in another.

A coordinated and planned response is important.

Critical incident response is a team effort. Having a critical incident management plan in place helps your service or school to respond appropriately. The more confidently adults manage the critical incident, the less the probable impact on children and young people.

Reactions to a critical incident

Understanding how critical incidents can affect mental health and wellbeing will help you to best support the children and young people in your care.

Some individuals may not be able to explain or fully understand a change in how they’re feeling or behaving. You have a key role in working with others in the learning community to support children and young people through a critical
incident and in identifying and assisting individuals that might be at risk, or who experience a mental health issue or condition following a critical incident.

The first efforts of responding to the incident should be dealing the safety of the community during the incident (for example, keeping people safe from a flood). Once that’s past, then you will be able to move onto the response phase.

**Children and young people are much more vulnerable to the impact of critical incidents than adults.**

This is because young brains and bodies are still developing, and because children are dependent on adults for their care and safety. When a child or young person is impacted by a critical incident, it affects the whole person. Reactions include a range of cognitive, emotional, physical and behavioural responses that last from weeks to months afterwards. Certain reactions are quite common and a normal part of the stress response or grief.

**Impacts over time**

Understanding the range of normal responses to critical incidents, including physiological changes, can help you support children and young people to cope with their feelings, thoughts and behaviours. These include:

- **behavioural responses** (for example, irritability, aggression, regression, difficulty enjoying activities, children repeatedly recreating parts of the critical incident events in their play)
- **physical responses** (such as change in appetite, sleep difficulties, headaches, stomach aches, restlessness)
- **emotional responses** (such as outbursts of anger, frustration or distress, anxiety, sadness, helplessness)
- **changes in thinking and cognition** (such as difficulty concentrating, difficulty remembering the incident, preoccupation with the incident).

The impact isn’t always obvious or immediate – sometimes a child or young person will seem to be recovering well but may then have a delayed response.

Things like sights, sounds, smells and movements that remind them of the incident can trigger a stress response again, even though the actual event happened a long time ago. Use the BETLS observation tool to record your observations, taking note of their pervasiveness, frequency, persistence and severity.

Every person recovers from the impact of challenging experiences in their own way and in their own time. Factors that might influence the length of time required for recovery might include how long the threat was present, coping skills, prior stressful or traumatic life experiences, strong primary attachment relationships, socioeconomic disadvantage, timely and appropriate support, and life stressors.

A proactive and informed learning community is more likely to respond effectively to a critical incident. You can be informed of the potential impact of critical incidents, gather and document information, monitor reactions that suggest a child or young person needs additional support, share information (consider confidentiality), offer support (including through your wellbeing team or local health services), and consider the impact on families, yourself and colleagues.

**A clear and considered critical incident management plan provides the overarching framework for preventing, preparing for, responding to and recovering from a critical incident.**

Understanding and recognising the impact of critical incidents is a vital first step in this process. With this understanding, educators can plan a response to create an environment that promotes recovery. In doing so, you can provide children with opportunities to express how they’re feeling, navigate the tricky moments, settle back into a routine that’s predictable and supportive, and, ultimately, promote a mentally healthy community.
When a learning community is affected by a critical incident, a whole-community response is required. Communities that have a critical incident management plan in place will be able to provide the best support to children and young people, staff and families.

**Critical incident management plan**

A critical incident management contains all the information required to respond effectively, such as the contact numbers of an emergency response team, actions to take, task allocation and more. It aims to minimise the adverse effects of a critical incident on the learning community and restore normal routines as soon as possible. The regular review of emergency and critical incident management plans is important to the effectiveness of your learning community’s response.

**A responsive learning community**

Fostering a responsive learning environment provides ongoing support to those who need it, while also ensuring children and young people have opportunities to process what’s happened in a safe and supportive environment.

You play a critical role by focusing holistically on the child or young person, creating an inclusive learning environment, reinforcing appropriate behaviour, encouraging positive learning, working closely with families and having regular conversations with colleagues.

Through learning experiences, you model and provide children with opportunities to express their feelings, fears and reactions. After a critical incident, you can create a feeling of security and model healthy ways of coping and leadership. Your role is to act as a mediator, educator and facilitator to support recovery – continue to teach and support children as you normally would, while playing your role in the learning community’s additional proactive steps to deal with the critical incident and promote recovery.

**Supportive curriculum decisions**

After a critical incident, it’s important to promote engagement in learning, while also offering children and young people opportunities to express how they feel.
Work in ways that are more flexible, relaxed and slower paced with less focus on outcomes and more focus on processes. It can help to pay attention to how you explain tasks, when and how you provide feedback, and the type of activities you set. Children and young people need to feel safe and be given opportunities to comprehend and make sense of their experiences. In the aftermath of a critical incident, you can support their mental health through your teaching approach and use of everyday opportunities and interactions to promote resilience and recovery.

**Responding to a suicide or the impact of suicide**

As with any critical incident, a learning community’s response to a suicide is a deliberate process aimed at ensuring the immediate and ongoing safety, care and support of children and young people, families and the wider community.

There are some important differences, however – including the goal of reducing the risk of suicide contagion. For more information, see Be You’s Suicide Response Kit. Be You Consultants are available to help schools who are affected by a suicide attempt or suicide.

Death by suicide of a learning community member, or a person connected to the community, can be a very upsetting and traumatic event for children and young people, families, educators and the wider community. The death often happens unexpectedly and leaves people with many questions. You and your colleagues will have a range of responses, including shock, confusion, grief and concern for your students and one another.

Your leadership team will manage your early learning service or school’s response to the critical incident, but as trusted members of a support network, you play a critical role in responding sensitively to children, young people and families.

**Monitor and support**

While many children and young people recover well and aren’t affected in an ongoing way after a critical incident, others may require assistance. One of your responsibilities is to ensure you identify, support and monitor children and young people affected.

Additional support may be needed for the child or young person if you notice changes in the way they behave, appear, play or communicate. These changes may also interfere with learning, home life, friendships or daily routines. When encouraging families to seek help, it’s important to understand why they might be reluctant and to put strategies in place to address their concerns or provide further information to help them understand their options.

**Educator wellbeing**

Remember that both you and your colleagues may be impacted, too. It’s important to look after your wellbeing and access support if required. Reducing and managing stress, maintaining positive social interactions and asking for help when you need to are helpful practices. Being comfortable asking for and giving support helps reduce the fear of stigma for help-seeking, and it’s important for building a supportive culture in your learning community.

**A word on being prepared**

Experiencing a critical incident often highlights the helpful processes that early learning services and schools have in place to respond; however, it can also identify areas for improvement. After a critical incident, it’s important for the learning community to review the incident, its impact and the response to determine what improvements may be required to support the learning community in the future. Leadership and wellbeing staff, with input from other educators, are responsible for the critical incident review.