

# School Mental Health Program

## Teacher's Manual



SHINE field-trial version 0.1, 2019

*“Our love for children is undiminished. Their innocence and energy, their happiness and welfare must be protected and treasured. It is their laughter that I yearned for while in prison.”*

**Nelson Mandela**

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# Acknowledgements

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## **Testing**

The following organizations are partners in testing the enhanced version of School Mental Health Program in Rawalpindi Pakistan:

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## **Funding**

The development and testing of enhanced School Mental Health Program is funded by National Institute of Mental Health (NIMH), USA.

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## Chapter 1: Introduction

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The World Health Organization (WHO) defines health as "a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity." Indeed "there is no health without mental health".

Positive mental health can lead to optimal emotional stability and functioning. Despite research suggesting that 50% of those who develop mental health difficulties, including stress, anxiety and depression, showing symptoms by the age of 14, the preventative benefit of early intervention is often overlooked. Addressing mental health difficulties at a preventative level or at onset, may prevent or reduce the severity of mental health difficulties as well as arresting more serious difficulties in the longer term. Giving attention to mental health problems in a timely manner then, may help children and adolescents avoid long term mental distress, and enhance their potential in areas of social, emotional and intellectual wellbeing. One of the major reasons why such mental health problems are not addressed with the younger population is that many of us lack awareness of how to identify them, and indeed how to intervene.

There are a myriad of reasons leading to mental health or socio-emotional developmental problems in children and young people, including challenges related to poverty and deprivation, physical and mental abuse, a culture of overly strict parenting and physical punishments, experiencing or witnessing violence, including terrorism, and parental separation or family conflict. We know that 'toxic stress' resulting from abuse increases the risk of a number of physical and mental health conditions. Some difficulties arise not due to what has happened to a child, but to what has *not* happened, for example a lack of attention and warmth within the home or at school. Evidence is emerging about the long term mental health problems resulting from neglect and a lack of warm loving relationships.

It is estimated that approximately 30% children in Pakistan are at a risk of developing mental health or socio-emotional problems. Therefore, early identification and intervention is crucial if we are to avoid exacerbation of individual children's mental distress and to offer an environment where children's development is prioritised and supported.

Importantly, the majority of the Pakistan's population is under 18 years of age. Therefore, investing in the mental health of children has long-term implications for the development of the country and its ability to have a productive and skilled

workforce. For example, they can realize their true potential and with time, they can grow up to be the people who can optimally serve their social roles.

Schools afford a great opportunity, not only to identify and support children who are experiencing emotional difficulties, but to promote overall emotional well-being and social and moral development. School experiences are vitally important in both children's intellectual development and their psychological well-being, and evidence increasingly illuminates the close connection between emotional health and academic achievement; hence, schools enhance school achievement by attending to issues such as self-esteem and social well-being (Hattie, 2008; Rutter 1991). In addition to school success, children and adolescents who experience positive emotional and social well-being report greater satisfaction with their family, and their relationships with friends (Gutman and Feinstein, 2008). Conversely, children with emotional problems are more prone to academic failure and quitting school, making them more vulnerable targets for child labour, substance abuse, criminal involvement and violence as well as unemployment. Thus schools have a critical role to play regarding student mental health.

Apart from creating a school environment conducive to learning, the role of teachers in promoting mental health and socio-emotional development of children is of paramount importance. Teachers play a significant role in children's lives, and are not only largely responsible for their education, but they also play a role in building their characters, training them to effectively deal with the challenges of everyday life, and helping them become successful members of society. Having daily contact with students gives teachers an ideal vantage point to identify changes in children's demeanour that may signal social or emotional difficulties they may be experiencing.

It is true that teachers have a significant responsibility for educating their students, and teaching can be both rewarding and challenging at the same time. Learning about school mental health will help the teachers themselves, and not just be 'one more thing to do'. Teachers often report that they need support in fostering wellness in their classroom, and identifying and supporting students with mental health challenges. When teachers feel more equipped to support student mental health, it is easier for them to manage difficult classroom behavior and also to promote students' academic success. Effective social and emotional education is directly beneficial to academic attainment, and improves teacher effectiveness and satisfaction, and as such promoting mental health in the classroom is consistent with and supports the academic mission of schools. Even in developed countries such as Canada, a need was found for more teacher training about mental health and for a more proactive approach toward mental health in schools (Western University Center for School Mental Health, 2014).

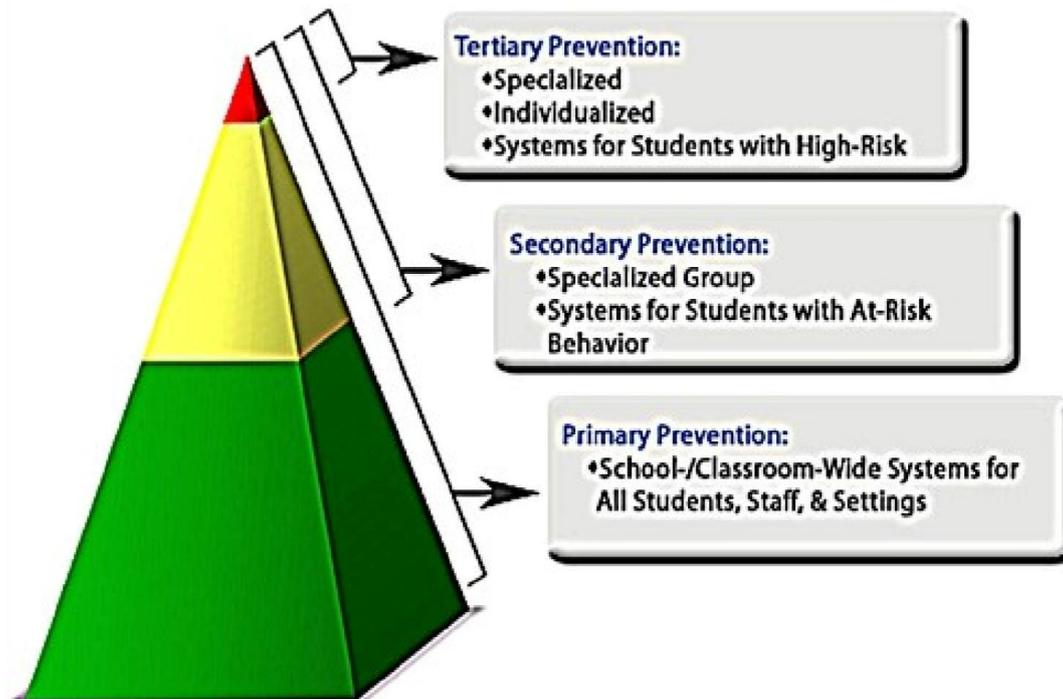
### Why schools should invest in child mental health

- Improving academic achievement rates, increasing retention and decreasing dropping out rates.
- Children's well-being is linked to their academic achievement (Gutman and Feinstein, 2008).
- School programs that focus on social, emotional, and academic learning from kindergarten through high school have been found to improve school attitudes, behavior, and academic performance (Zins et al, 2004).
- Students spend a significant amount of time at school (Rutter has estimated approximately 15,000 hours from kindergarten to completion) and are therefore accessible for mental health promotion, prevention and intervention in schools.
- Strengthening student protective factors and resilience within schools reduces negative risks and outcomes for vulnerable children.
- Promoting school mental health helps decrease violence and juvenile crime.
- Schools play a significant role in the early recognition and identification of children with mental health problems and also in altering the school experience of these students to yield better outcomes.
- School is a more familiar and less stigmatizing or threatening environment for students in need of help compared to hospitals and medical offices.
- Working with children who have mental health problems can be very challenging and stressful to teachers (Hanko, 1993). Enhancing student emotional health can improve satisfaction and retention among teachers.
- Schools influence the adoption of healthy behaviors (i.e. healthy diets, physical activity etc., instead of substance abuse, delinquency, etc.) which improve life quality across the lifespan.
- Children often establish deep and lasting relationships with teachers, school staff, and peers at school: these relationships are also protective and supportive.
- Children learn to express themselves and actively participate in social activities at school and community projects: these experiences enhance their social connectedness and belonging, and their self-confidence and motivation for future social and productive participation in society.

## Socio-emotional problems among children

**Fig. 1. Responses to socio-emotional problems in children**

(University of Maryland Technical Resource Centre for School Mental Health)



The above diagram demonstrates a three tiered approach to responding to children's emotional needs. The largest segment at the base shown in green highlights the majority of children (almost 80%) falling within the need for primary prevention. These are the children who pass through the stages of development without any problem. Minor challenges are a part of normal development which are easily overcome with a little bit of attention from parents and teachers.

Part 1 of this manual addresses the needs of this category of children and will inform teachers about how they can play their role in promoting healthy development of these children in the school setting.

The second, middle segment of the triangle shown in yellow suggests that 10-15% of children may be at risk of developing socio-emotional problems, and the need for secondary preventative measures are indicated. These difficulties can affect academic performance, social relationships, and

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everyday life. In order to deal with such problems, children need special and individual attention. It cannot

be overstated that early identification and intervention may help to prevent longer term serious mental health difficulties. Part 2 of this manual will explicitly talk about these children and how the teachers and parents can work collaboratively to help them.

The third segment of the triangle shown in red is the smallest segment and includes 3-5% of children. These are the children who experience severe problems for multiple reasons, which may develop into mental illnesses. These children are likely to need referral to a mental health professional.

### Target audience for the Manual

This manual is primarily intended for those involved in the educational process including teachers, school administrators, nurses, social workers, school counselors, in addition to educational policy makers and non-governmental organizations. This whole school approach is recognised internationally as an unprecedented opportunity to improve the lives of children and young people.

### Objectives of the Manual

- Helping educators understand the importance of mental health in a school setting.
- Enhancing educators' understanding about child development.
- Incorporating mental health into healthy schools initiatives.
- Providing age-appropriate behavioral management strategies including disciplining and management of disruptive behaviors.
- Understanding how mental health can be promoted in school settings.
- Identifying the warning signs of mental illness in school children and distinguishing that from emotional distress.
- Providing appropriate interventions for a variety of psychiatric disorders.
- Providing further resources that can be accessed by educators.

### Guidance for using the Manual

This manual is intended to be a guide for educators to better support the mental health needs of their students and to take practical steps that can be implemented in school settings. We emphasize interventions and

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supportive strategies that can be implemented at a relatively low cost. The manual is divided into chapters that can each be used separately. It is intended to be a concise and practical guide.

The manual uses visual aids to assist the reader:



Indicates 'actionable items' including practical tips or interventions to be implemented



More applicable to children of young age 5-11 years



More applicable to adolescents 12 and above

### Structure of the Manual

Each chapter is focused on teaching a skill to teachers which can be integrated into their daily routine.

- Introduction
- Basic counselling skills for teachers
- Child development
- Promotion of socio-emotional development of children and prevention problem behaviors
- Other factors affecting the socio-emotional development of children
- Managing socio-emotional problems in the classroom
- Assessments in the school mental health program
- Teacher wellness

The manual is divided into three parts. Part 1 identifies strategies to promote the socio-emotional development of children and the typical difficulties they face during development. Part 2 highlights atypical difficulties

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children may face, and strategies to manage these difficulties within the classroom and wider school environment. We will see that school based mental health interventions may be environment centred or child centred.

Part 3 of the manual talks about wellness of teachers and strategies to manage daily stressors.

The Appendices at the end of the manual offer useful information for the interested teacher.

Appendix A – PSYCHLOPS Kids

Appendix B – Risk and protective factors for mental health problems

Appendix C – Bullying prevention in schools and the strategies to manage it

Appendix D – Examples of school intervention programs from the Eastern Mediterranean region

Appendix E – Common screening tools

Appendix F – Resources

The manual has additional supplementary materials for teachers including the Life Skills Education (LSE) Toolkit, a supervision manual, and research articles related to school mental health programs, which have been successfully implemented in various countries.

# Part 1

# Primary Prevention

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## Chapter 2: Basic Counseling Skills for Teachers

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### What will you learn in this chapter?

- Specific basic counselling skills which can help build strong and trusting relationships with children, for general use in communicating with children, and for supporting children who might be in distress.
- Other factors to be considered for developing strong and trusting relationships between teachers and children.

Our communication styles with children play a significant role in building trust and enabling children to feel safe enough to open up and tell us about what worries them, and how they are feeling. Familiarity with basic counselling skills enhances our relationships with children, and typically demonstrates that we are actively listening to the other person, are interested in what troubles them, and genuinely want to help.

If we think back to our own time as a student, we will remember that most students were more attached and drawn to those teachers who *actively* listened and dealt with them in warm and caring ways. Students who feel safe and comfortable in the presence of interested adults are likely to learn more, pay more attention to instruction and to share their personal experiences with such teachers.

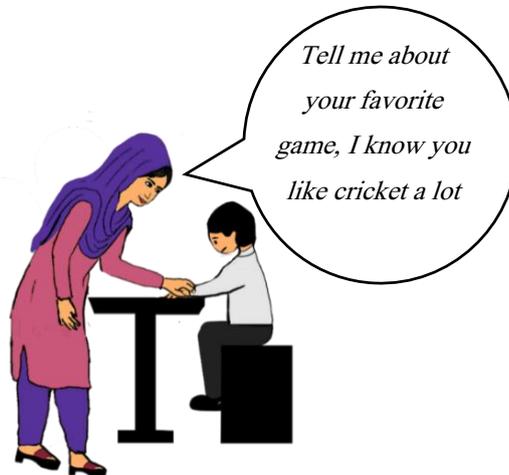
For these reasons, basic counselling skills for teachers are extremely important. These skills can also be used to build strong and trusting relationships with colleagues and parents as well as their young students.

The skills we are exploring do not train us to be counselors, but they go a long way to helping us to listen carefully to what children are saying, and to enable us to respond in ways where children feel safe to disclose their difficulties. Let us take a closer look at these basic counseling skills for teachers.



### Developing healthy relationships

The importance for children of having healthy relationships with their teachers cannot be overstated in the promotion of healthy child development. Only within such a relationship will children discuss personal difficulties, and in the safety of such relationships they will be more emotionally available to listen to and act upon teacher instruction.



In order to build strong and trusting relationships with children, we should keep in mind the following:

- Always treat children with love, care and respect.
- Always put a smile on your face while dealing with them so that they won't feel hesitation while talking to you.
- Always try to be at their level while talking to them. For example, you can sit on a small chair to be at the level of little children.
- When you start a conversation with a child, you could start with their favorite topic. For example "*Tell me about your favorite game, I know you like cricket.*"

### Praising openness

To help a child feel comfortable talking about personal, difficult or embarrassing topics, try to thank or genuinely praise them for being so open. Similarly, when they share their success, praise them with an open heart. Encourage children for asking questions and sharing their feelings and try to provide

appropriate answers to their questions. Try to ask children open-ended questions so that they can talk about their experiences in detail. Also ask them age-appropriate questions which they can comprehend easily and answer with ease.

Examples:

- *'Thank you for telling that to me'.*
- *'You were very courageous in sharing those intimate feelings with me'.*
- *'Although it may have been hard to talk about that with me, I think it will be very helpful for you'*
- *'Tell me about activities which you like at school'*



### Validating

Many children feel embarrassed talking about their problems with others. They might think that no one else feels the same way as them. They may also think that talking about emotions or personal problems is a sign that they are becoming ill, going crazy or that they are weak. Some children might even blame themselves for how they feel. It is important that you help children to dispel these myths. You can do this by normalizing the child's problems by helping them understand that many other children experience the same reactions and difficulties. This is 'validating' their problems, which means that you are letting them know that their reactions are understandable.

Some examples of validation are shown below.

- *'You have been through a very difficult experience and it's not surprising that you would be feeling stressed'.*
- *'What you have just described is a common reaction for children to have in these situations'.*
- *The reactions you have described are very common. I am not surprised that you are so scared'.*

### Non-verbal skills

Non-verbal skills also communicate to the child that you are listening to them and can also be a way of communicating concern. These include maintaining culturally appropriate eye contact, culturally appropriate nodding of your head and, in most cultures, keeping your posture open (e.g. avoiding crossing your arms and sitting with a stiff position or turning away from the child). Sometimes showing emotions similar to those of the child shows that you are hearing what they are saying. This might mean expressing sadness on your face when they express sadness (because they have teary eyes). You can also use brief verbal indications that you are listening, such as “uh-huh”, “okay”, “I see” and “mmm”. It is important to remember that there can be wide cultural variations to all of the above.



### Communicating concern through empathy

Communicating concern to children is an important skill. It is often called empathy. Empathy is the ability to understand what the other person is feeling, sensitively and accurately. In communicating your empathy you show that you are following precisely what the child is feeling, and communicate to them that you understand what they are feeling. An example of this might be:

Child: *'I really don't like to come to school. I feel afraid and don't understand the lessons'*

**Non-empathic** responses would be: *'You must go to school' or 'Your parents will be sad if you don't go to school'.*

An **empathic** response would be: *'So it's difficult for you in school, you feel afraid and are struggling to understand what the teacher is teaching. Perhaps we can get some help'.*

Try to understand, as best you can, the child's situation, including the emotions they are experiencing.

Statements that show concern include the following:

- *'That sounds like it was very challenging/upsetting/frightening (etc.) for you'.*
- *'I can see in your face how painful this was for you'.*
- *'You have experienced many difficulties'.*
- *'You went through a lot'.*
- *'I can hear how sad/frightening this was for you'.*

### Allowing children to express their thoughts and feelings

Let children ask questions and express their thoughts and feelings. Always answer their questions appropriately and with respect. While talking to children, try to not ask questions which can be answered with a simple yes or no. These are closed questions. Ask open questions which enable the child to share his experiences with you in detail. Make sure that you are asking age-appropriate questions which the children can easily answer.

A few examples are given below:

- *'What could be done to make you like your school better'?*
- *'What do you usually do when you go home'?*
- *'I understand that it is difficult for you to talk about it. You are very brave and exemplary for others'.*
  - *'What do you like the most about your school? What is it that worries you about your school'?*

### Assessing functioning and impact on daily routine

If a child is facing difficulties, try to explore the relationship between a socio-emotional problem and the functioning of child (i.e. academic performance and play etc.). Ask if family/ peers/ school staff provide any support or help to deal with the problem.

### Giving advice and guidance

Helping children to manage their problems is an important part of your duty, however we can help children to develop their own problem-solving skills by giving them advice and guidance so that they can learn how to resolve their own problems in the future. Giving advice means telling a child what to do or what not to do (e.g. take rest at home, sleep hygiene advice, asking for support from friends)

Being able to distinguish when to give advice and when to help the child to think about their own problem-solving strategies is a skill. One strategy that can be helpful to use in situations is asking the child what they would suggest or say to a close friend who was in a similar situation. You might ask them, '*What would you say to a close friend who was thinking the same? Would you want them to be alone with their problems or ask you for help?*' Or you could say '*What ideas can you come up with to solve this issue?*', then help them decide the best strategy. It is good to check in with them to see how the strategy has worked and to review the situation.

- If a child is facing any problem, try to understand the impact that it is having on their everyday life. For example, how is the academic or sports performance being affected.
- Help children to try to identify other people who can best support them in dealing with problems. This may be a family member, a friend's big sister, a friend who has similar difficulties. Support networks are paramount for children and we will explore this more fully later in the manual.

### Confidentiality

Trust and confidentiality are important in your relationship with the children you teach. A child needs to know that when they speak openly about personal things, that information is going to remain confidential.

For example, you can tell them that whatever information they will share with you will remain between you two.

However, it is also very important for the child to be aware of any legal limitations to this confidentiality. For example, depending on the laws of the country and the protection and social services systems in place, you may have to break confidentiality and tell the appropriate agency or authority (for example parents, head teacher) when a child appears to be at risk of ending their life, of harming someone else, or someone else is trying to harm them.



**Table 1: Basic counselling skills for teachers**

Relationship building	Relationship building based on respect and empathy. Speaking with children in accordance with their cognitive capacities for understanding.
Praising openness	Praise the child upon sharing a success story or a problem that he is experiencing. Let children ask questions and express their thoughts and feelings. Validate the challenges that the child is facing and that their reaction is acceptable or natural.
Ensuring that teachers can understand them (Validation)	Try to demonstrate your understanding of the feelings and emotions of children by being entirely focused on the child during the conversation.
Giving advice and guidance	Sometimes, a child may be unable to find a solution for his problems. Under such circumstances, you can hint towards a possible solution for the problem shared.
Expressing concern for the child	Try to imitate the emotions of the child using verbal and non-verbal minimal encouragers ( <i>uh-uh, hm hm</i> ) to let them know you are listening.

Expressing feelings and emotions	Using empathy to let the child know you understand their feelings encourages them to express more of their emotional life.
Confidentiality	Reassure the child that whatever information he shared with you will remain between you two (as long as there are no serious safeguarding issues).
Overcoming a child's hesitation	For relationship building with the child, you may have to politely ask him multiple times about his problems without being pushy. <i>'You know where I am if you want to talk about this. I'm here for you.'</i>

<b>What did you learn in this chapter?</b>	<ul style="list-style-type: none"><li>○ Teachers should use basic counselling skills to establish and build strong and trusting relationships with children</li><li>○ Praising openness helps children to open up further</li><li>○ Validate their thoughts and feelings by showing respect and warmth</li><li>○ Giving advice and exploring problem solving helps children to solve problems in the longer term</li><li>○ Communicating concerns by showing empathy helps children to feel valued and heard</li><li>○ Ensure confidentiality where appropriate</li></ul>
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## Chapter 3: Child Development

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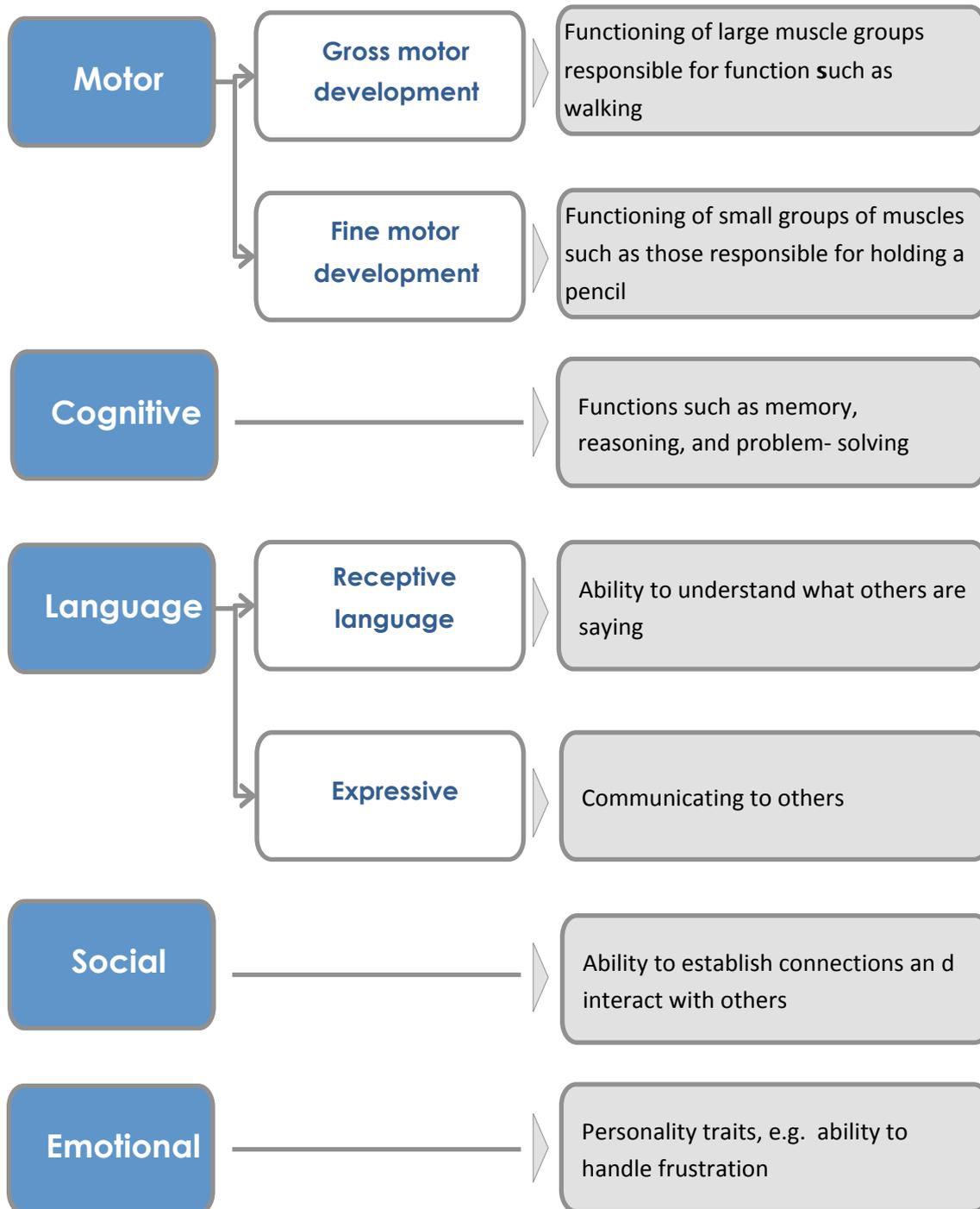
### What will you learn in this chapter?

- What is child development and what are the different *domains* of development?
- What are the different *milestones* of development
- What are the socio-emotional developmental milestones of *primary* and *secondary* school aged children?
- What are the strategies to promote *socio-emotional development* of primary and secondary school going children?
- What are the typical and *atypical difficulties* faced by primary school aged children?
- What is *moral development* and what are the ways to promote moral development among children?

Children change constantly beginning on the day they are born. For example, walking, talking, building social relationships, playing different games, and learning new things. These very changes are known as development. Development is a constant process that continues throughout the life span. Development is characterized by processes by which individuals uniquely adapt to their environment.

Although we talk about typical and atypical development of children, it is important to note that development is culturally determined. For example, while biological milestones (such as puberty) are a universal phenomenon, certain social milestones, such as when children start school or individuate from parents differ across cultures.

**Fig. 2 Domains of Child development**



### Domains of Child Development

Let us look at this in more detail. Development can be divided into 5 domains:

#### 1 Physical Development:

Physical development can be further sub-categorized into gross motor development and fine motor development. Gross motor development is responsible for the functioning of large muscle groups responsible for functions such as walking. Fine motor development is responsible for the functioning of small groups of muscles such as those responsible for holding a pencil.

#### 2 Cognitive Development:

Cognitive development is responsible for functions such as memory, reasoning, and problem solving.

#### 3 Language Development:

Language development can be further sub-categorized into receptive and expressive. Receptive development is responsible for the ability to understand what others are saying. Expressive development is responsible for the ability to communicating to others.

#### 4 Social Development:

Social development is responsible for the ability to establish connections and interact with others.

#### 5 Emotional Development:

Emotional development is responsible for personality traits such as the ability to handle frustration. For example, an 8 year old being prone to sadness if his friends don't invite him to play with them.

This program is entirely focused on the social and emotional development of children and the strategies which can be adopted to address developmental difficulties.

#### **Key point to remember:**

Children develop in multiple domains, but not always evenly; for example, their language skills may develop more quickly than physical abilities (motor development) or social skills.

Children of different ages have specific stages of development. These stages are commonly termed milestones. For healthy development, it is required that the child achieves the developmental milestones as per his or her age. However, it is also possible that different children of the same age achieve their developmental milestones in a different fashion. For example, while some children may begin to take their first steps at the age of 1 year, some of them may take as much as 1.5 years to do the same. This is why it is important to not only keep in mind different developmental milestones of children, but also that the development of every child is unique in its own way.

Understanding child development helps in differentiating typical from atypical development and in turn, understanding typical versus atypical behaviors. This knowledge is crucial not only for teachers but for anyone working with children. However, we will focus more fully on the socio-emotional development of children in this manual. Socio-emotional development is not only associated with the academic performance of children, but also with their overall success as a productive individual in society.

School is often the first place children will meet with others apart from their family. This is why school and the teachers play an important role in teaching children basic social skills and ways to enhance their emotional life.

### Stages of Development

Children can be divided into different groups on the basis of their age in order to better understand the developmental milestones. It will help us understand the typical behaviors which can be expected of children of a particular age.

Children can be divided into 4 prominent groups on the basis of their age.

- Prenatal development
- Pre-schoolers or children of 1 to 5 years of age
- Primary school aged children or children of 6 to 11 years of age
- Secondary school aged children or children of 12 to 18 years of age



### Prenatal development

- A healthy pregnancy gets the child off to the best start. Minimizing exposure to stress, illness and/or toxins, including alcohol, tobacco, or non-vital medications during the pregnancy, is optimal.
- Complications during delivery may impact subsequent development. Intensive care treatment may warrant continuous monitoring of the child's progress and attainment of developmental milestones at age-appropriate intervals.
- The context or circumstances in which the child was born may be important; i.e. did the pregnancy occur at a time of high stress to the family? Was the pregnancy planned? Was the family hoping for a child of a certain gender? Did other stressors occur during the pregnancy (e.g. health issues with other family members, relocation or separation of parents, etc.)? Is the child an only child or do they have siblings?

Knowledge of Infant mental health is important to teachers as a child's early experience may impact on their later emotional life, their ability to learn and their ability to behave in pro-social ways. A growing body of evidence indicates that brain growth in the first year of life is unlike any other time of life. Infant development is impacted by experience and little brains are malleable to environmental stress. What we know is that a secure attachment relationship with caregivers influences neural pathways in the infant brain which leads to a baby's emotional and physical wellbeing.



## Developmental tasks of preschoolers

	Social and emotional milestones	Strategies to promote healthy development
1 Year	<ul style="list-style-type: none"> <li>• Shy with strangers</li> <li>• May cry when caregiver leaves</li> <li>• Has preferences, like favorite items or people</li> <li>• Hands you a book when wants to hear a story</li> <li>• Repeats sounds or actions to get attention</li> <li>• Puts out arm or leg to help with dressing</li> <li>• Plays games such as 'peek-a-boo' and 'pat-a-cake'</li> </ul>	<ul style="list-style-type: none"> <li>• Play games (e.g. peek-a-boo)</li> <li>• Read and sing with children</li> <li>• Join in their play</li> <li>• Encourage children to play <i>near</i> other children, even if they do not play together</li> <li>• Play basic games that involve turn taking</li> <li>• Invite the child to do what they can do for themselves (e.g. taking off shoes or putting a book away)</li> </ul>
2 Years	<ul style="list-style-type: none"> <li>• Imitates others, especially adults and older children</li> <li>• Gets excited when with other children</li> <li>• Increasingly independent</li> <li>• Plays mainly beside other children, may start to play with others</li> <li>• Tantrums are a typical way children may express their frustration</li> </ul>	<ul style="list-style-type: none"> <li>• Provide consistent and predictable routines so that children learn what to expect</li> <li>• Give children warnings before the end of an activity</li> <li>• Encourage children's growing independence by letting them try things on their own</li> <li>• Respond to desired behaviors more than you attend to undesired behaviors</li> <li>• Always show and tell your child what he/she should do</li> <li>• Provide choices (e.g. "Do you want the blue or red paper?")</li> <li>• Help children learn about their feelings by labeling them</li> </ul>

<p><b>3-5 Years</b></p>	<ul style="list-style-type: none"> <li>• Interested in new experiences</li> <li>• Cooperates with other children</li> <li>• Increasingly inventive in fantasy play</li> <li>• Increasingly more independent</li> <li>• Often cannot distinguish between fantasy and reality</li> <li>• More likely to agree to rules at times</li> <li>• Sometimes demanding while sometimes eagerly cooperative</li> <li>• Wants to be like his/her friends</li> </ul>	<ul style="list-style-type: none"> <li>• Encourage group play, be prepared for disagreements and challenging behavior.</li> <li>• Expect child to have simple responsibilities and follow basic rules</li> <li>• Establish limits and adhere to them.</li> <li>• Help the child be responsible and discover the consequences of behavior.</li> <li>• Provide outlets for emotional expression.</li> <li>• Provide opportunities for talking about self and family.</li> <li>• Strengthen positive self-esteem</li> <li>• Promote independence as appropriate</li> <li>• Provide plenty of play space and provide for rest</li> <li>• Read to/with the child</li> </ul>
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### Developmental tasks of primary school age children (6-12 years)

A major change occurs in the lives of children when they start going to school. It is the first time in their lives that they spend this much time out of their homes without family. Therefore, those children who successfully achieve the milestones of socio-emotional development better adapt to the school environment, build better social relationships with the people around them, and succeed in their studies.

This is why it is important for teachers to be familiar with the milestones of socio-emotional development of primary school age children, so that they can play their role in promoting optimum and healthy child development.

It is expected of children of this age to be prepared for the following:

- Play next to and with peers, and to respect space and boundaries between them.

- Play games and sports with peers, sometimes winning and sometimes losing.
- Develop their masculine and feminine roles and dress in a style comfortable for them.
- Develop reading, arithmetic, and writing skills (so know letters/sounds, numbers, and how to form letters/symbols).
- Exhibit normal everyday skills including eating meals, going to the bathroom alone, and wait for their turn amidst others.
- Develop a sense of right and wrong, to distinguish truth from falsehoods, to ask for help from adults when distressed.
- Develop increasing autonomy to follow through and complete tasks.
- Work productively with peers and staff.

### Socio-emotional developmental milestones of primary school age children (6-8)

The stages of socio-emotional development for the primary school age children (6-8) are a little different from those primary school age children (9-12). This is why we will talk about them separately.

	Social and emotional milestones	Strategies to promote healthy development
<b>6-8 Years</b>	<ul style="list-style-type: none"> <li>• Growing independence.</li> <li>• Common fears – problems in the family, failure, rejection</li> <li>• Friends often from same neighbourhood and same sex as child.</li> <li>• Showing more nurturance to others</li> <li>• Commanding to younger children but follow after older children</li> <li>• Start seeing the point of view of others more clearly</li> <li>• Defining themselves in terms of appearance, activities, and possessions</li> </ul>	<ul style="list-style-type: none"> <li>• Encourage non-competitive games and help set individual goals</li> <li>• Give lots of positive attention</li> <li>• Let children help define the rules</li> <li>• Talk about self-control and making good decisions</li> <li>• Talk about why it is important to be patient, share, and respect others' rights</li> </ul>

- Fewer angry outbursts and more frustration tolerance
- Learning how to resolve conflict with peers
- More self-conscious
- Tattling is a common action to get adult attention
- Inner control is being formed and practiced every time a decision is made
- May still be afraid of the dark or monsters



#### Using basic counseling skills for age 6-8 years students

- Use simple, clear, child-centred language
- Use skills such as maintaining eye contact and nodding head
- Try to teach students through play
- Encourage and appreciate the student, using a warm, kind tone of voice
- Be at the level of the child
- Do not expect younger students to understand at once, so repeat things from time to time

Socio-emotional developmental milestones of primary school age children (9-12)

So far, we have discussed the socio-emotional development of primary school age children (6-8). Let us now see the stages of socio-emotional development of children aged 9 to 12.

	Social and emotional milestone	Strategies to promote healthy development
9-12 Years	<ul style="list-style-type: none"> <li>To win, lead or be first is valued (e.g to be the boss, unhappy if they lose a game)</li> <li>Often attached to an adult other than their parent (teacher, club leader, coach)</li> <li>Quote their new 'hero' try to please the person, and strive for attention from them</li> <li>Influenced by both peers and family</li> <li>Feelings get hurt easily and mood swings are normal</li> <li>Sensitive to negative feedback.</li> <li>Difficulty dealing with failure</li> </ul>	<ul style="list-style-type: none"> <li>Teach them to learn from feedback. Ask how could you do that differently next time?</li> <li>Always be alert to the feelings associated with what is said</li> <li>Give positive feedback for successes</li> <li>Offer activities that help children feel proud of who they are and what they can do</li> <li>Balance activities between high energy and quiet activities</li> </ul>

**Using basic counseling skills for age 9-12 students**

- Use a soft tone of voice and put a smile on your face
- Listen actively
- Use non-verbal skills
- Name their feelings
- Start conversations by talking about a favourite topic of the student
- Do not switch the topic frequently
- Ask questions according to the age of the student so that they respond and disclose their concerns in detail
- Ask open-ended questions
- Praise openness i.e. encourage the efforts of the student if they discuss their problems.

As mentioned above, children of this age often face a few difficulties, such as difficulty in coping with failure, being upset about minor things, mood swings, etc. Such minor difficulties are a part of their normal development. In order to help them deal with such difficulties, teachers should always be polite and respectful with children. Children can learn from others' opinions to bring improvement in themselves. They should be encouraged to express whatever they are feeling in an appropriate way. Teachers should focus on verbal and non-verbal behaviour.

While a few of the difficulties in this age are a part of the normal development of children, they should not to be ignored, because if such problems persist for longer periods, they can impact on the academic performance and the daily life of children. Teachers are in a position to be the first to identify such problems and perhaps discuss them with parents or the doctor in order to help them.

It is important for teachers to note that while some of the behaviors listed as areas of concern are also a part of typical development, the key distinction is the *frequency, duration, and level* of behavior. For example, it is normal for children ages 6 to 12 to have some trouble concentrating for long periods of time or on tasks that are not interesting to them, but a child who has trouble focusing on an activity for a very short period of time may possibly have a more serious problem. Similarly, 6 to 8 year olds are still developing emotional control and thus it is part of typical development for children to be sensitive or become upset. Teachers should be concerned about frequent, excessive, and extended emotional reactions.

### 3.8 Typical and atypical difficulties experienced by primary school children

Typical difficult behaviors of primary school-age children	Atypical difficulties of primary school-age children (warranting further investigation)
<ul style="list-style-type: none"> <li>• Arguments/Fights with siblings and/or peers</li> <li>• Curiosity about body parts of males and females</li> <li>• Testing limits</li> <li>• Limited attention span</li> <li>• Worry about being accepted</li> <li>• Lying</li> </ul>	<ul style="list-style-type: none"> <li>• Excessive aggressiveness</li> <li>• Serious injury to self or others</li> <li>• Excessive fears</li> <li>• School refusal/phobia</li> <li>• Frequent excessive or extended emotional reactions</li> <li>• Inability to focus on activity even for five minutes</li> </ul>

<ul style="list-style-type: none"><li>• Not taking responsibility for behavior</li></ul>	<ul style="list-style-type: none"><li>• Patterns of delinquent behaviors</li><li>• Fire fixation/setting</li></ul>
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### 3.9 Developmental tasks of secondary school age children (13-18 years)

This age is an important and complicated time in a child's life. It is crucial to promote healthy socio-emotional development of children at this age since adolescence is a time of significant change. The most prominent of these changes is puberty, which now occurs at earlier ages, usually between ages 10-12. Due to such physical changes, children experience emotional difficulties such as sudden changes in mood. At this age, the social role of the child in society is also changing and his or her responsibilities are increased. Therefore, if teachers are familiar with the developmental milestones of this age, they are better able to support children to achieve their milestones with as little difficulty as possible.

This can be a time when children value peer approval over adult approval and a time when young people come into conflict with parents. Following are some of the developmental milestones for this age:

- Achieving more mature relations with peers
- Achieving a masculine or feminine social role
- Accepting one's physical strength and using the body effectively
- Achieving emotional independence from parents and other adults
- Beginning preparation for marriage and family life.
- Beginning preparation for making a living and selecting a career
- Acquiring a set of values, ethics or an ideology as a guide to behavior
- Developing socially responsible behaviour

#### Socio-emotional developmental milestones of secondary school age children (13 - 18)



	<b>Social and emotional milestones</b>	<b>Strategies to promote healthy development</b>
<b>12 -18 Years</b>	<ul style="list-style-type: none"> <li>• Heightened level of self-consciousness</li> <li>• Believe that no one else has ever experienced similar feelings and emotions</li> <li>• Exhibit that 'it can't happen to me' syndrome (invincibility)</li> <li>• Become very cause-oriented</li> <li>• Exhibit an orientation to justice</li> <li>• Establishing an identity</li> <li>• Establishing autonomy</li> <li>• Establishing intimacy</li> <li>• Becoming comfortable with one's sexuality</li> </ul>	<ul style="list-style-type: none"> <li>• Create an atmosphere of respect, trust, and honesty</li> <li>• Be considerate of students' privacy</li> <li>• Empathize with the student's perspective. Put yourself in the student's shoes</li> <li>• Pick your battles – Is this battle really worth fighting?</li> <li>• Maintain your level of expectations</li> <li>• Don't write off negative behavior as typical teenage behavior</li> <li>• Know the warning signs when behavior becomes dangerous</li> <li>• Notice changes in a student's behaviour</li> </ul>

**Using basic counseling skills for age 9-12 students**

- Use a soft and gentle tone of voice
- Validate their thoughts and feelings
- Observe their verbal and non-verbal behavior
- Praise openness i.e. if students discuss their problems. Encourage them and provide help to manage these problems
- Communicate concern
- Ensure appropriate confidentiality of students when they discuss their problems and difficulties
- Ask appropriate questions so that they express their opinions easily

While keeping in mind basic counseling skills and age appropriate socio-emotional developmental milestones, teachers should establish a healthy relationship with secondary school students and maintain age appropriate expectations.

Several adolescent behaviors, while challenging, are part of typical development, including mood swings, self-involvement, testing limits and peer conflicts. Teachers are in an important position to identify atypical and problematic behaviors, including those that may be indicative of a mental health problem. If teachers identify any of these warning signs they should not hesitate to contact the student's parents and request a consultation with a mental health professional.

### Moral development

Moral development involves children developing the ability to tell the difference between right and wrong and to utilize this knowledge to make decisions when faced with difficult choices. Morality, similar to social-emotional development, takes place over phases and is influenced by multiple factors in the child's environment.

	Typical Moral Development	Strategies to promote healthy moral development
<b>Age &lt;10</b>	<ul style="list-style-type: none"> <li>• Children see the world through the lens of other directed morality such as authority figures (parents, teachers)</li> <li>• Rules are seen as absolute and unbreakable</li> <li>• Children's understanding of why these rules should be followed is generally based upon their appreciation of consequences associated with breaking the rules, such as being punished.</li> </ul>	<ul style="list-style-type: none"> <li>• Set a good example through your own behaviour</li> <li>• Explain to children the reasons behind a rule</li> <li>• Demonstrate to them how one behaviour is better than another</li> <li>• Use story-telling to demonstrate moral situations</li> <li>• Praise the child for following a rule and bring their attention to how it made others around them feel – <i>'did you notice how Sarah</i></li> </ul>

		<p><i>felt when you shared your toys with her?</i></p> <ul style="list-style-type: none"> <li>• Encourage children to show empathy towards others, like writing them a card if they are sick</li> </ul>
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### 3.11 Typical Moral Development (> 10 years)

	Typical moral development	Strategies to promote healthy moral development
<b>Age &gt;10</b>	<ul style="list-style-type: none"> <li>• Children’s morality changes as they develop an ability to view situations from other people’s perspectives</li> <li>• Their appreciation of morality becomes more self-directed and less black and white and absolutist in nature</li> <li>• Children will have generally begun to view moral rules as socially agreed upon guidelines designed to benefit the group</li> <li>• Children still feel that it is important to follow rules, however these rules are viewed as guidelines that are meant to benefit society rather than inflexible orders they need to just follow</li> <li>• Children realize that choices should not be just based on the fear of negative consequences</li> </ul>	<ul style="list-style-type: none"> <li>• Encourage volunteering</li> <li>• Encourage debate about complex moral situations. You may consider splitting the class into two groups, each representing a different point of view and arguing the merits of each perspective.</li> <li>• Use social studies and historical examples to raise complex moral and societal issues</li> </ul>

**What did you learn in this chapter?**

- Development is a constant process and each child is unique with respect to development.
- There are different domains of development (Physical, cognitive, speech, social, and emotional development).
- Teachers can promote socio-emotional development of primary and secondary school age children by adopting age-appropriate strategies.
- The distinction between the typical and atypical behavior of primary and secondary school age children can be made on the basis of the frequency, duration, and level of behavior.

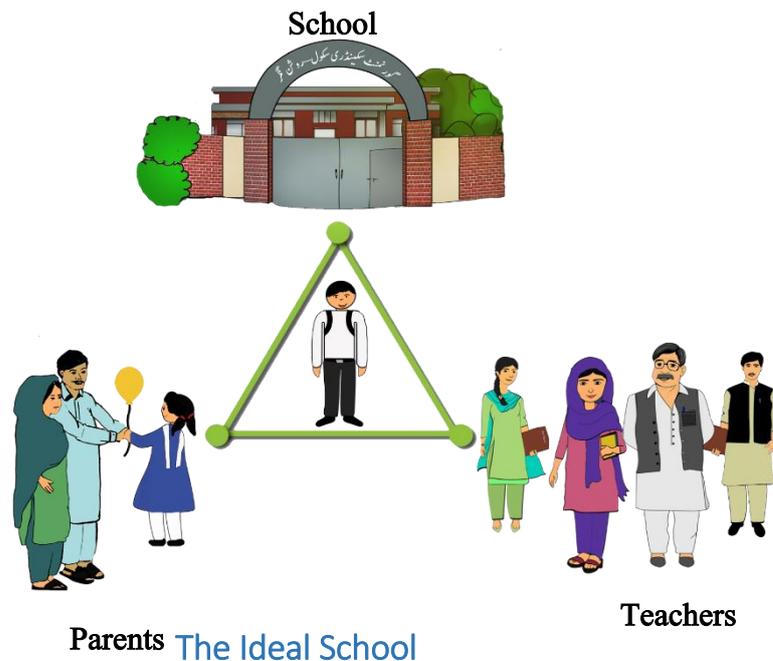
## Chapter 4: Promotion of socio-emotional development and prevention of problem behaviors

### What will you learn in this chapter?

- What are the characteristics of an ideal school?
- Role of an ideal school in promoting the socio-emotional development of children
- Positive disciplinary strategies to manage disruptive behaviors in the classroom
- Life skills education
- Circle time
- Role of parents in child's education

There are three components which play a crucial role in healthy socio-emotional development of children

- A conducive school environment
- Teachers
- Parents



Schools will increasingly focus on the promotion of the emotional well-being of its students as an important variable influencing academic success. Students spend approximately 15,000 hours at school from elementary through high school. School programs that focus on social, emotional, and academic learning from kindergarten through high school improve school attitudes, behavior, and academic performance (Zins, Weissberg, Wang & Walberg, 2004). School support also buffers against the effect of child victimization and vulnerability to substance abuse and quitting school (Dryfoos, 1993; Stedler, 2010). On the other hand, in schools which do not focus on socio-emotional development, absenteeism, poor academic performance, mental illness, stress among the teachers, and lack of cooperation from parents, the chances of leaving the school are much higher.



Research shows that there are a few specific characteristics of the ideal school which enable them to promote the socio-emotional development of children. Such characteristics are as follows: (Zins et al. 2004), (Dryfoos, 1993; Stedler, 2010)

- The school should offer a conducive environment. There should be a dedicated team of leaders and individuals who are in charge of ensuring an environment where all students can have equal opportunities to grow and each of them are appreciated for their individual skills and unique qualities
- An environment that ensures respect for teachers as well as the other staff personnel who work with the children.
- Rules should be defined with everyone's consensus about dealing with inappropriate behaviors of children within the school. Such rules should be implemented rigorously.
- It is important that the school curriculum includes the promotion of socio-emotional and moral development of the children.



#### 4.2. Characteristics of an ideal school

- The students are diverse and with differing academic abilities.
- Strong and consistent leadership by the principal and teachers is evident.
- Caring relationships between students and teachers are fostered.
- The staff are involved in decision-making and consensus and implementation is a joint responsibility.
- Partnership between schools and families to encourage learning.
- The physical and interpersonal environments are safe and orderly.
- Cooperative learning and proactive classroom management is in place.
- Rules and limits are clearly defined and firmly and fairly enforced.
- A positive, rather than negative or punitive, disciplinary style is modelled by staff.
- Students are involved and given responsibility in some aspects of school depending upon the individual's level of intellectual and social maturity.
- Frequent assessment of student's progress is made with the emphasis on acquiring fundamental skills, and students are recognizing and investing in their attainment of goals.
- Focusing not only on academics but also emotional well-being and social development.
- High academic expectations.

### Core values of schools promoting socio-emotional development and mental health of children

Schools which provide the basic facilities and focus on academia and the physical health of children are regarded as good schools. But an ideal school is the one where steps are taken to promote the socio-emotional development and mental health of children along with the rest of its efforts. Let us take a closer look at the strategies which can be ensured to promote the socio-emotional development of children at school.

#### 4.3.1 Caring for All

It is important to foster a culture of understanding that views students who have difficulties as in need of help rather than as a burden.



#### Practical steps to promote a caring environment

1. Communicating through actions that all students are valuable, for example by spending time highlighting different students' talents and achievements and how each of them is unique.
2. Creating an environment that doesn't discriminate between students, each student will be treated equally and fairly, independent of their disability status or any other factor.
3. Creating a mechanism to deal with complaints that includes clearly designating who a student can go to if they have a concern, and a chain of command.

#### 4.3.2 Valuing Diversity

Helping students appreciate how diversity (ethnic, religious, disability status) contributes to the education, understanding, and appreciation of all.

Teachers need to communicate positive attitudes toward children with special needs so that other students recognize how best to respond to children who may seem different. For example, a student helping another child on a wheelchair to move around the school.



### Practical steps to promote diversity

1. Establishing a buddy system.
2. Having students with special educational needs in mainstream classrooms has a positive impact on other students, particularly in the area of developing social skills.
3. Help students develop pride in their identity about their backgrounds, heritage, and culture as they bring them up during school activities.

#### 4.3.3. Building Self-Esteem

Schools play a fundamental role in each student's self-esteem, and staff have substantial impact on how students see themselves, and how they are shaped for the future.

Being in situations where a student consistently experiences failure at school most often has a detrimental impact on self-esteem. Similarly, when students have success at school, when they correct their mistakes, when staff have them do tasks (even chores) that show confidence in the student that builds self-esteem.

When students know that staff understand how the student felt about something, or why an action seemed to make sense, they develop greater self-esteem (e.g., *"Yes, I can see how it made sense at that moment to just scream back at that peer, it was scary; how do you feel that worked out?"*)



### Practical steps to promote self-esteem:



1. Give children responsibility and leadership roles whenever possible (look for tasks that students can do). Have children fulfil chores in the classroom (these can be rotated) or take leadership in activities such as organizing field trips.
2. Use praise rather than reprimand. Attempt 5 positive comments for every negative comment throughout the school day.
3. Foster cooperation rather than competition between students. Recognize when students work well together and produce something stronger than just individual parts. Notice and respond to students who help others and who are good "team members".

4. Older students can mentor or “big brother/big sister” younger students, to help the younger students play with others, learn to read, etc.



Create activities that allow them to cultivate and demonstrate competence such as:

- The child can create an “I am Special Book”, “Things I’m good at” to focus on what they like about themselves and their strengths. Children can then take turns reading it to the group.
- Create “My Hand Activities”. Each child traces her hand and writes something about herself on each finger. These could be put up in class upon completion.
- Use scripted role plays (perhaps with puppets) to develop self-esteem by brainstorming ideas about what to do when children feel sad, distressed, angry, or worried.
- Use beads to have children make bracelets. Each bead should represent something they like about themselves. They can then each talk to the group about the significance of the beads.

### 4.3.4 Building Relationships

Good relationships between students and their teachers, and among students, are very important for student’s emotional development where they learn many skills and values including core social skills, the ability to trust and be responsible for their own actions. Greater cognitive and affective achievement has been linked to more cohesive relationships and less tension within the classroom. Schools with poor relationships tend to lead to depression and absenteeism not only in students but also among teachers. Finding each student’s value and how they contribute positively is vital for students to feel good about themselves at school.

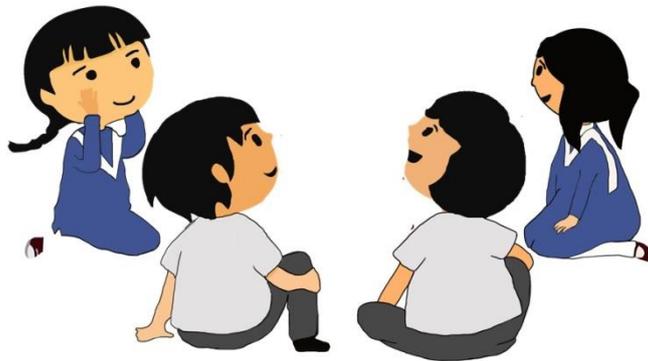
Teachers model relationships for their students through their interactions with other teachers and with students, so the more collaborative, constructive, and beneficial those relationships appear, the more students will be attracted to those behaviors.

Liaising with parents is of paramount importance. Parental involvement is positively associated with student success, higher attendance, greater teacher satisfaction and overall improved school climate. Staff contact with parents should always model respect for parents, and still provide parents with additional helpful and effective options at home. Making school and home similar also increases student anchoring of useful skills. If what works at school does not work at home for a student, it is more difficult for students to invest in school-related skills; often, parent conversations yield the best of both, with tactics applied in both places whether developed at home or at school.



### Practical steps for relationship building

1. Group work and activities provide a good opportunity for alliance building. Opportunities should be provided for children to develop social skills through role-play and other activities. The saying “*if it’s not good for both, it’s not good for long*” has relevance. Tasks or activities that are mutually enjoyable or beneficial are more likely to create better, more stable relationships.
2. Procedures should be in place for teachers to manage potential differences with colleagues and students in a constructive manner.



#### 4.3.5 Ensuring Safety

It is essential for children to feel physically and emotionally safe in the school setting. This is even more important for students with disabilities (physical and emotional). Aggressive behavior, even if not directed towards the more vulnerable students, may threaten students and cause them to withdraw.



### Practical steps for ensuring safety at school

1. Establish a school wide policy for bullying and disruptive behaviors. Bullying directly or through social media all require attention. Preparing students for how to respond to bullying, whether feeling a victim or a bystander, should be discussed. Practical, developmentally-attuned tactics identified for students to employ (e.g. elementary age students can “tell” an adult when they perceive bullying, while older students may fear accusations of ‘snitching/tattling’ on peers, and fear social ostracism from all their peers. Therefore strategies for ignoring, leaving/changing topics, or how to access other adults for help are often needed for this age group).

2. Any form of threatening behavior needs to be dealt with rapidly and effectively. Sometimes the 'system' allows this by allowing teachers to threaten/frighten students, or through sports/activity teams that attempt to intimidate others.
3. Ensuring that teachers and staff are approachable. Staff need clarity on how to respond to student's comments and preferred staff responses (listen, get the facts, and help the student manage the situation quickly, or identify who else needs to be involved to fix it).

### 4.3.6 Encourage Participation

The most effective schools are the ones that create a positive atmosphere based on a sense of community and shared values. Effective participation is facilitated when a head teacher leads a staff team that actively consults with students and their parents regarding school affairs. Students are more likely to cooperate with regulations they had a role in developing.



#### **Practical steps for improving participation at school**

1. Allowing students a say in running the school, such as through student councils or student input on school policies (students representative, or "voting" on appropriate policy/matters).
2. Ensuring parental involvement. Parent communication about student activities and successes (rather than just problems) increases parental involvement.
3. Displaying students' work throughout the school, and calling attention to their achievements, even in helping others or in improving the school (e.g. cleaning up, painting a mural, or creating groups to play chess or other activities).

### 4.3.7 Fostering Independence

An important role of schools is to empower students to become independent. Learning is more effective when students are encouraged to think for themselves. The most significant variable affecting academic achievement is student ability to monitor and assess their own work, and determine how to further develop and apply a skill. Constructive teacher feedback is very helpful in developing student independence and responsibility for their own learning.



**Practical steps for fostering independence at school**

1. Students should be given age-appropriate responsibilities within the class and the school.
2. Provide structured opportunities to provide feedback and share views.
3. Provide programs that develop leadership, encourage debate and improve negotiation and public speaking like the Model United Nations Programs.

**4.3.8 Early Identification and Intervention to promote Well-being and Mental Health**

Identify and address problems at an early stage. By intervening early it is likely that more serious mental illness can be averted. It is important for educators to balance the risk of 'labelling' a child at an early age and the importance of early identification. Educators should not aim to diagnose children but rather to identify the student's difficulties, provide school support, and when necessary (the student continues to deteriorate despite school efforts) refer to medical specialists.



**Practical steps for early identification and intervention at schools**

1. Schools should develop policies and standard procedures for identification of children, providing support and a protocol for referrals.
  - a. Clarifying who teachers should contact (principal, lead teacher, etc.), helps accelerate appropriate early identification.
  - b. Child study teams at the school who meet to discuss and plan for struggling students can enhance this process.
2. It could be hard at times to determine to what extent a behaviour is problematic. For example, pre-schoolers could be very active, how do you determine if the child falls in the normal range of activity or is hyperactive?
3. A helpful tip is to compare to their age cohort. In a class of pre-schoolers, how does the identified child compare to his/her classmates?

4. Making use of screening questionnaires.
5. When in doubt, or the student is not improving, refer for an evaluation.

### 4.3.9 Support and training for teachers and other staff

Working with children who have mental health problems can be very challenging and stressful (Hanko, 1993). Indeed, workload and student behavior were found to be significant predictors for depression in teachers (Ferguson et al, 2012). A teacher who is overwhelmed has more difficulty supporting their students.



#### **Practical steps for supporting and training teachers and other staff**

1. Identifying problems early and creating a culture that encourages teachers to discuss difficulties they may be having in the class room.
2. Establishing teacher support groups, allowing peer-peer consultations or consultations with the school psychologist or social worker if available.
3. Helping teachers identify and reconnect with the reasons that they decided to be educators, and promote these aspects in their daily work.
4. Creating a school environment that is positive and fosters professional and personal development of teachers.
5. Training in behavior management techniques is particularly helpful.
6. Helping teachers understand that difficult behavior in children may be a cover up for other difficulties that may be too painful or too embarrassing for a student to discuss (i.e. domestic violence, divorce).

### The Ideal Teacher

Teachers are an ideal for children since they not only play a role in their education but also in the development of their personality. For example, controlling their emotions, solving their problems, and adopting reverence and good qualities valued by society. In order to work with the children and to promote their socio-emotional development, it is necessary to learn a few basic skills and routinely implement them.



#### 4.5 Characteristics of a good teacher

- Understands different developmental stages of children, sets age-appropriate tasks according to the developmental stages of a child and uses age-appropriate disciplining.
- Is empathic (recognizes feelings and reflects these back to students) and can see things from a child's perspective.
- Is attuned to both the verbal and non-verbal communications of students and responds to these signals appropriately and timely.
- Communicates effectively and clearly.
- Makes student behavioral expectations clear and establishes limits that benefit and provide a useful structure for the student.
- Arranges the physical and interpersonal environment of the classroom in such a way to optimize teaching and minimize disruptive behavior.

A good teacher has all of the above qualities, however, in this manual, we will discuss three of the core skills which can be implemented routinely with all of the children to make daily tasks easier and enhancing the possibilities of the ideal teacher.

#### 4.6 Basic counselling skills for teachers

At the beginning of this manual, we learned about basic counselling skills for teachers. Basic counselling skills for teachers is the **first skill** to become an ideal teacher. Teachers can make stronger and trusting relationships with their colleagues, children, and parents with the use of these skills. It is important that you implement these skills regularly in your daily routine.

<p><b>Relationship building</b></p>	<p>Relationship building based on respect and empathy. Speaking with children as per their cognitive capacities.</p>
<p><b>Praising Openness</b></p>	<p>Praise the child upon sharing a success story or a problem that he is experiencing. Let the child ask questions and <b>express his thoughts and feelings</b>. <b>Validate</b> the challenges that the child is facing and that his reaction is acceptable or natural.</p>
<p><b>Ensuring that teachers can understand them (Validation)</b></p>	<p>Teachers should try to understand the <b>feelings and emotions</b> of the children. Teacher should <b>entirely be focused</b> on the child during the conversation.</p>
<p><b>Giving opinions</b></p>	<p>Sometimes, a child may be unable to find a solution for his problems. Under such circumstances, you can <b>hint towards a possible solution</b> for the problem shared.</p>
<p><b>Expressing concern for the child</b></p>	<p>Try to imitate the emotions of the children and use different gestures to tell the child that you are listening to him</p>
<p><b>Expressing feelings and emotions</b></p>	<p>Ensure the child that whatever information he shared with you will only remain between you two. Be clear however that if the child is at risk of hurting himself or someone else, then you must inform the relevant personnel.</p>
<p><b>Confidentiality</b></p>	
<p><b>Overcoming child's hesitation</b></p>	<p>For relationship building with the child, you may have to politely ask him multiple times about his problems without being pushy.</p>

Managing disruptive behaviour through positive behaviour support strategies



When a child does not know how to walk, we teach him to walk

When child does not know how to speak, we teach him to speak

When a child does not know how to write, we teach him to write

But if children do not know how to behave in the classroom, what we do?

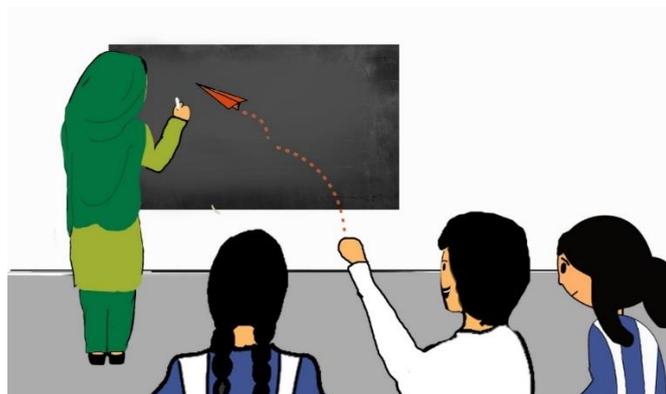
Get angry with them? Scold them? Punish them?

If we can teach a child other things, then we can teach them positive behavior through understanding and support. Punishments rarely work with some children. In fact, it can make things much worse, affecting their social and emotional development in negative ways.

While discipline is an important part of school life, different strategies and techniques used positively can help children improve their behaviour. We need to understand what is behind behaviour. For example, does the child have low self-esteem? Are there problems at home, leading the child to 'act out' emotional distress that they feel unable to 'talk out'.

Physical or corporal punishment, criticizing or threatening should never be used in a school setting due to their harmful effects on the child (for example increasing aggression or low self-esteem). It is much better to use positive disciplinary techniques to ensure compliance.

That is why an ideal teacher has the skills to manage disruptive behaviors of children through positive disciplinary strategies.



### 4.7.1 Teach positive disciplinary strategies to children

Teach and reinforce positive strategies like sharing, negotiation, and cooperation. This can help them to make a support group.

Praise students often for specific things they have done during the day and send positive notes home if the child was able to maintain good behavior. Give them "positive attention" for their little achievements like playing a favorite game, or taking a favorite book home.

### 4.7.2 Set reasonable and fair limits

The most effective way is to take a preventative approach offering school/classroom routine and structure that minimizes opportunities for misbehaviour.

1. Set reasonable and fair limits at the beginning of the academic year and tell them to all children, so that they know in advance what is expected. Do this in a kind tone.
2. Set age-appropriate classroom rules, and try to set them once rather than changing limits and expectations arbitrarily and constantly. Phrase the expectations positively i.e. '*Please sit quietly in the classroom*', rather than negatively i.e. '*do not make a noise in class*'.
3. Write classroom rules on chart paper and place it on the class wall where all the children can see it. Try to revisit these rules at each morning with the children to reinforce the messages in them. This way, they all know what is expected from them and what will be the consequences if they do not follow these rules.
4. If a child does not follow the classroom rules, it may be helpful to address it indirectly by talking to the whole group rather than to single out the child.
5. Use nouns that indicate belonging to a group when giving instructions "*We need you to stay calm so we can finish the math exercise*"

You can make classroom rules like this:

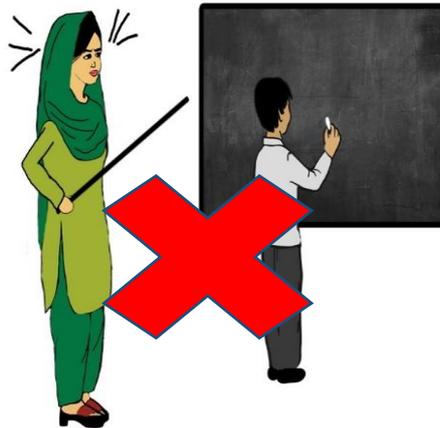
- Raise your hand whenever you want to ask something, taking turns in questioning.
- Use slow voice tone in classroom
- Stand in the queue by maintaining appropriate distance (almost distance of an arm) from each other, and do not interrupt each other.
- Do not fight or quarrel with other children.

### 4.8 Strategies to manage disruptive behaviors in the classroom

A teacher can use strategies to manage disruptive behaviors in class such as:

➤ Give a child relaxation in class work

- Ignore some disruptive behaviors when appropriate
- Natural and logical consequences
- Countdown
- Redirect or distract behaviors when possible
- Help students develop alternatives
- Support group



- **Give the child relaxation in class work:** for those children who have trouble doing class work.
- Try to give him work he already knows or he is able to complete easily. After that give the child a new or less difficult task. E.g. *'Before you easily solve this answer, let's revise that today because next question is relevant to this'*.
- Divide tasks into small steps for the child so he can complete it more easily, for example at first, give a child just one question to solve. Give them another after completion of that question.
- Give a child additional time to complete his/her work. E.g. check the child works at the end and if needed, give an additional 5/10 minutes to complete his/her work. Teachers can use this to communicate to the child *"try to complete your work while I am checking others, then I will check your work at the end"*.
- Don't have the child complete his work in break time, because break time is also very important for child.

- **Ignore inappropriate behaviour only when appropriate:** It is not appropriate to ignore behaviour when a child is causing damage or hurting themselves or others.
- Remember that ignoring takes time to affect a behaviour, initially the child may even increase the intensity/frequency of a behavior to gain attention e.g. Ignore behaviour such as making noises to get attention from others.
- Remember that inappropriate behaviors that need to be ignored may take time to show improvement. It may be that children may show inappropriate behaviors frequently in the beginning to gain attention from others.
- **Natural and logical consequences:** i.e. letting children experience the consequences of their own actions whenever it is 'safe' to do so. If the student speaks meanly to a student who then will not play with that student, then examining what happened (instead of forcing them to play together) may help the student recognize impacts and then be motivated to attempt alternative behaviors identified with staff assistance.
  - For example if the child does not complete his work tell him that he will have to do more work at home if he does not complete it in class.
- Help students develop decision-making skills by giving them simple decisions to make, and by considering the likely consequences of those decisions, both on themselves, and on others.
- **Countdown:** Do a countdown for the last several minutes of an activity to help make transitions from one activity to another easier. For instance, announce when there are five minutes left...four minutes...
  - Develop with the student a multi-step plan for waiting, such as "*count to ten, then raise your hand, and look the teacher in the eyes.*"
- **Redirect or distract when possible:** for example, if a student starts to become disruptive, call on that student to read a passage out loud, answer a question, or have another student speak (so the misbehaving student may stop and avoid antagonizing peers).
- **Help students develop alternatives:** to disruptive behaviors such as doing a productive (rather than destructive) task, taking a break in the classroom to regroup, going to do something else with others in the building (turn in attendance sheets, if the student is too upset to regroup, etc.).

- **Support group:** Assist the child with children who help her to complete the work. Give classroom work that children can do together in the form of a support group. For example; reading a poem, doing science projects, and preparing for tests together.

Always remember a few of the basic principles.

- None of the strategies are to be overused.
- Create a routine and where possible avoid making changes to it.
- The tone of your voice and your attitude should be friendly. If a child starts getting loud, avoid doing the same and respond in a more polite tone. Even if it becomes necessary to scold, keep the tone of your voice low. Never comment on his cast or family, only highlighting the inappropriate behaviour. None of the children are bad in themselves, only the behaviour is inappropriate.
- Openly praise good behaviour. Upon giving a negative comment once, make sure that at least 5 positive comments are being made throughout the day in order to neutralize its effect.
- Try your best to adopt what you are teaching yourself as well. Your actions speak louder than your words.

### Life Skills Education

#### What are Life Skills?

According to WHO, life skills are defined as the “**abilities for adaptive and positive behaviour that enable individuals to deal effectively with the demands and challenges of everyday life**”

#### The importance of Life Skills

According to WHO, it is the connection between knowledge, skills, values *and* life skills that creates constructive behaviour change and so leads to positive health behaviour and hence the prevention of health problems.

As ‘everyday life’ varies enormously, according to geographical region, culture, economic status and gender, life skills would seem to be an endless set of skills. However, research (and anecdotal evidence) across a range of cultures and groups determines that there are *core life skills* that, when internalized, can be applied across a range of situations.

According to 'Life Skills Education for Children and Adolescents', teaching generic life skills provides a foundation, not only for the promotion of mental well-being but also for more complex and specific skills. These skills are required for behaviour change and are transferable to real life situations and problems. This is seen as an effective approach for primary prevention.

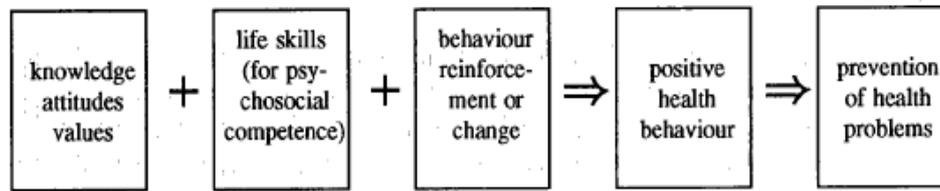


Fig. 3 Life skills education process

Life skills education is a process and that process learning requires internalizing skills and knowledge so that behavioural change can occur. This helps the participants to refine their own skills and to upgrade their knowledge so that they can change their own behaviour. Through this process, with the use of support materials we can help students to develop constructive life skills behaviour.

#### 4.9.1 Core Life Skills

The core life skills include problem-solving, decision-making, goal-setting, critical thinking, communication skills, assertiveness, self-awareness and skills for coping with stress. There are preliminary skills that are also required: trust, perceptions, empathy, cooperation, an understanding of stereotypes and discrimination.

<b>Self-awareness</b>
<b>Communication skills</b>
<b>Assertiveness</b>
<b>Decision-making skills</b>
<b>Goal-setting</b>
<b>Critical thinking</b>
<b>Problem-solving</b>
<b>Coping with stress</b>

#### 4.9.2 Three categories of Life Skills

- a) **Critical thinking skills/decision-making skills** – this includes decision making/problem solving skills and information gathering skills. The individual must also be skilled at evaluating the future consequences of their present actions and the actions of others. They need to be able to determine alternative solutions and to analyze the influence of their own values and the values of those around them.
- b) **Interpersonal/Communication skills** – it includes verbal and non-verbal communication, active listening, and the ability to express feelings and give feed-back. Also in this category, are negotiation/refusal skills and assertiveness skills that directly affect ones' ability to manage conflict. Empathy, which is the ability to listen and understand others' needs, is also a key interpersonal skill. Teamwork and the ability to cooperate include expressing respect for those around us. Development of this skill set enables the adolescent to be accepted in society. These skills result in the acceptance of social norms that provide the foundation for adult social behaviour.
- c) **Coping and self-management skills** refer to skills to increase the internal locus of control, so that the individual believes that they can make a difference in the world and affect change. Self-esteem, self-awareness, self-evaluation skills and the ability to set goals are also part of the more general category of self-management skills. Anger, grief and anxiety must all be dealt with, and the individual learns to cope with loss or trauma. Stress management and time management are key, as are positive thinking and relaxation techniques.

The **third basic skill of an ideal teacher** is teaching life skills to children. For teaching such skills, using the circle time technique in the classroom is an excellent, tried and tested strategy. The *Life Skills Education Toolkit* is provided to teachers with this manual in order to provide them with additional information required to teach skills to students.

#### Circle Time

Circle time (sometimes referred to as group thinking time) is an increasingly popular technique used to facilitate students' communication of their feelings, ability to think, building self-esteem, teaching life skills and discussing concerns at school. In circle time each child sits in a circle and expresses their emotions and concerns

- It provides a structured mechanism for solving problems, in which all participants have an equal footing.

- Circle Time affords the opportunity for the teacher and class to communicate with each other about issues which promote self-esteem and positive behavior.
- To enhance these abilities in children, teachers can implement circle time once a month where a specific lesson (from life skills education (LSE) toolkit) can be taught to students.-



### **Method to implement circle time:**

- An agenda for each circle time should be pre-defined i.e. go through the LSE toolkit and identify which activity is to be conducted. Get familiar with the helpful notes for teachers and the activity to be introduced to the students.
- Prior to conducting the circle time activity, identify a time and suitable place where you can conduct the activity (it can be classroom or playground).
- The teacher's role is to actively listen, encourage participation by children and allow them to come up with their own solutions.
- There are separate circle time guidelines and activities for younger children and for adolescents.



### **4.10.1 Circle time structure**

- 1) Beginning: reviewing the rules and presenting the topic of discussion.
- 2) Middle: where the key issues are discussed.
- 3) Closure: teacher summarizes the key discussion points.

### **Beginning: reviewing the rules and presenting the topic for discussion.**

- Children should preferably sit in a circle to give them a feeling that they are in a safe and equal environment. If not possible students can remain at their desks.
- The group should ideally consist of approximately 25 students to allow all a chance to participate in the discussions.
- Welcome all children participating in the circle time activity.
- Rules of the group should be made along with children before sitting for circle time.

### **Group rules could be:**

- Respecting the opinions of others.
- Allowing each student a chance to participate.
- No one is forced to share their opinion but participation is encouraged.
- Respecting each other's confidentiality.

### **Middle: where the key issues are discussed.**

- Start the activity on the decided topic.
- Each child will participate in the activity in turn.
- Meanwhile, the teacher will take notes on the circle time workbook, or charts.

Listen actively, and encourage all children. For younger children, the teacher may sit on a small chair or on the floor to be at the level of the students.

### **Closure: teacher summarizes the key discussion points.**

- At the end, teacher should summarize the key discussion points of the circle time activity, and ask children about their experience of it, for example ask children:
  - *'Which topic did we discuss today?'*
  - *'Did you enjoy the activity?'*
  
  - *'What did you learn from the activity?'*

- *'How can you implement this in your daily life routine?'*

#### 4.10.2 Managing the group in circle time

Group management skills are essential for successful implementation of a circle time activity. Some basic rules are useful for group management as well as using basic counselling skills.

Let us take a closer look at what these rules are:

##### **1. Keeping to time without cutting short valuable group discussion**

Keeping time boundaries is important and it may be that you decide that it is important to continue a particular discussion and decide to shorten another part of the circle time. Alternatively, you might decide to continue the discussion at the next meeting.

##### **2. Managing dominant participants**

Some children might talk a lot in the discussion, and not allow other participants time to share their stories. Others may talk over the top of others or even reject other children's opinions. This is where the use of basic counseling skills for teachers can be really valuable. For example, in front of the group, you can thank those children for their contribution and then invite others to share.

- *"Thank you (name). What you are saying is very interesting but I'd also like to hear from others in the group. Has anyone else had a similar or different experience?"*

If any child is causing problems in the group and not responding to your management you should speak to them privately at the end of circle time activity. It is important not to criticize them in front of their peers, as might happen at home or at school. Explain to the child that it is important that everyone has a turn to talk. Be careful not to start with saying something negative to the child as this may be shaming and they may not listen to your suggestion.

Ask these questions from such a child in the group: *"Are there any problems you are having in the group that is causing you to talk over the top of other participants? If there are, then you can discuss about that with me"*

### 3. Encouraging discussion with a quiet group or participant

It is important to respect that some children will be quiet and often may not wish to be vocal (i.e. answer questions, give suggestions). After trying any of the suggestions below, if a child continues to be quiet, the teacher should respect this in order to prevent any stigmatization.

A story you shared in previous groups may be helpful for encouraging group discussion. You might ask the children to talk about the story if they are not confident sharing their ideas on topic.

Sharing other examples you are familiar with can also help children feel more comfortable joining discussions. Individual discussion with these children will be helpful. E.g. *“I noticed that you were quiet in the group. Is there something we can do that would be helpful for you to participate in the group discussion?”*

### Ideal Parents

Parents have a pivotal role to play in the education of their children.

Teachers and a supportive environment in school play a very important role in grooming and the social and emotional development of children. But the school environment is just one element in the promotion of this development in children. Parents, family and the overall community impact the mental health and development of children. The steps friendly schools take to promote healthy development in children will only be effective when the same steps are taken outside the school, particularly at home. Therefore, when school, teachers, parents and community members cooperate together and work together for the wellbeing of children, then they grow optimally and achieve success in life.

According to an international research study *“Nearly half of a child's achievement in school can be accounted for by factors outside the school, including parent support.”*



In an ideal school, parents are aware of all academic and curriculum activities of their children and cooperate with school.

#### 4.11.1 Areas where parents can support their children

- **Ensuring attendance:** Parents send their children to school on time and ensure that children should not leave school without good reason.
- **Education as a priority:** Parents provide possible academic support to children.
- **Support in education:** Helping children with their homework and helping with any difficulties that hinder their academic abilities.
- **Being a role model:** Emphasize the importance of education to children.
- **Participate in educational activities:** To ensure participation in academic activities in school to increase children's interest in school and studies.
- **Communication:** Parents stay in regular contact with school.

#### 4.11.2 The role of parents in providing a conducive environment at home

Providing an environment that is conducive to learning at home is very important.

- Maintaining a calm and quiet environment
- Providing adequate nutrition and encouraging physical activity
- Limiting the use of electronics
- Maintaining structure and ensuring adequate sleep
- Encouraging reading and doing homework

A healthy cooperation between parents and school is essential for ensuring their **academic attainment, emotional well-being and social development.**

Although teachers are aware that there are sound results from cooperation between parents and school, teachers often face difficulties in promoting this cooperation. Let us see what can be done in order to make the situation better when there are issues of cooperation between parents and school.

### 4.11.3 Parent teacher meetings

Parent-teacher meetings are an important source of communication for many parents. It is an excellent opportunity to ensure parent involvement in school. It is helpful to inform parents about the importance of their participation during such a meeting and tell them that it will have a positive impact on their children. Try to conduct parent-teacher meetings at school at least once a month. If possible and necessary invite parents into school in addition to these meetings. For example it may be necessary to individually invite parents of children who are struggling in their studies.



In order to ensure attendance of parents in these meetings:

- Inform them of the date and time of the meeting in school an **assembly or function**, or you can paste the schedule of the meeting on a **notice board** where children and parents can read it.
- Notes can be sent to parents **at home**.
- Parents who cannot attend the meeting on a specific day can be individually invited on another day.
- **Champion parents:** Some parents attend the meeting on a regular basis and participate in school activities. You can nominate them as champion parents and request their help in inviting other parents.

### Key principals for conducting an effective parent-teacher meeting:

There are some key principals, which can be kept in mind to conduct an effective parent-teacher meeting

- Whenever we meet with parents always **welcome** them and thank them for coming.
- Always begin with a **positive thing** about their child and then mention the weaker points.
- When talking about **academic performance**, also talk about **extracurricular activities, habits and attitude** of their child and stay in contact with parents.
- Give opportunities for parents to share their concerns about their child.
- Before conducting a meeting write a few points to improve the performance of the child, and then plan to implement these with the cooperation of parents. Give the importance of feedback of parents regarding their child.
- If possible keep a record of previous meetings and report any change in the child.
- Make sure that parents can contact teachers and the principal regarding any problem related to their child.
- As well as inviting parents, also invite the child (if appropriate) to discuss low performance or difficult behaviour in the child. Also share their positive performance with their parents.

#### 4.11.4 Ways to contact parents

##### 1. Telephone

One of the ways to invite parents for a parent-teacher meeting is by phone.

Sometimes parents can't meet the teacher and principal due to their working hours or a health issue. For this reason a telephone call or a message is used to inform parents about their child's performance.

- The school principal and teacher must have contact numbers of all students.
- Alternative phone numbers of parents should be present at the school administration.
- Do not only contact parents for sharing weakness and bad performance of their child; also invite them for sharing their daily performance and improving behaviour.
- Teachers could call parents every week or after 15 days to communicate information about their child's performance.

##### 2. Diary/notes

The teacher can send notes to parents by writing them on the homework diary of children.

- To make sure that parents read the diary, ask the children to get a parent's signature on the note. Through diary/notes parents can become aware of their child's performance at school.

### 3. Home visits

Teachers and the school principal can visit the home to have contact with parents. Local teachers living nearby a child's locality can play an important part in communicating with parents.

Local teachers and other retired teachers may also play a vital role in promoting communication with parents.

- Teachers can communicate with parents about school activities when they visit homes for universal primary education initiative.



### 4. Annual result

Teachers can meet parents at annual result day and communicate with them about school activities as well as the child's progress. Annual result can also increase the involvement of parents in their child performance.

- Call parents onto the stage and appreciate them for their cooperation with school in encouraging their child's performance and behaviour.
- Such a parent can represent a role model for other parents to make visits to the school to enquire about their child's performance.
- The importance of teacher-parent meetings can be highlighted to all parents to encourage involvement in children's studies.

### 5. Head teacher/teacher can communicate with parents him/herself

Parents cooperation increases in those schools where the school principal themselves are involved in meetings with parents. Principal interest in children's performance also promotes a teacher's sense of support.

- In parent-teacher meetings (PTM), ensure that the principal also communicates with parents.
- Make sure that parents are aware that they can contact the principal regarding any problem if required.
- If parents have any complaints with the class teacher, issues can be resolved through active listening and good communication with parents.

### 6. Activities to do at home

- To increase the participation of parents, teachers can give children tasks to do at home in which parents can also participate e.g. writing an essay on 'our culture' or writing up on chart paper, or preparing a debate on a favorite topic.
- Parents can be informed about home activities through parent-teacher meetings, telephone calls, school functions or/and home visits.
- During meetings with parents, they can think about how to help their child regarding these activities.

### 7. School functions

School functions are also a good means to communicate with parents, and through these functions participation of parents can be promoted.

- Try to arrange functions on national events/days like 23<sup>rd</sup> march, 14<sup>th</sup> august or on Quaid-a-Azam day, and send special invitations to parents.
- Specially invite parents for such events, encourage students to participate in different dramas or the national anthem. When parents see a performance and involvement of their child in school functions, it will increase their interest in the school. To increase parent's interest towards school functions, different entertaining activities can be arranged.

### 8. School committee

- In almost all schools there is a school committee, consisting of a few parents, teachers and active community members. The aim of these committees is to address school policies, to utilize school funds in appropriate ways and to address school related problems.

- To make them effective school can take some initiatives. Involve active participants in committees who can communicate with parents and promote awareness about cooperating with schools.

If there is a consistent problem of cooperation from parents, despite communicating with them in different ways, then raise this matter with the school committee and ask them for culturally appropriate suggestions to engage parents.

Parents can be included in these committees and assigned some basic responsibilities. This way they will cooperate with school and also encourage other parents.



### 9. Helping children in need

It might be possible that there will be some students who need financial support, perhaps because they can't afford a school uniform, books and notebooks. The government facilitates such students to ensure that they have the same opportunities as other children to excel in their studies. School funds can also address such issues and provide support to needy students.

Help parents and children to approach welfare organizations, and well off people (existing in the community) who can help needy people.

It is also observed that due to the above mentioned issues, sometimes parents do not send their children to school. If basic needs are fulfilled by school then parent's interest towards school will increase.

**What did you learn in this chapter?**

**Characteristics of an Ideal school**

- Caring for All
- Valuing Diversity
- Building self esteem
- Building relationships
- Ensuring Safety
- Encouraging participation
- Fostering independence
- Early Identification and intervention to promote well-being and mental health

**Three ways to manage disruptive behaviour of children in classroom**

1. Teach positive disciplinary strategies to children
2. Set reasonable and fair limits
3. Strategies to manage disruptive behaviors in classroom

**Teach children life skills education through circle time activities**

**Different ways to ensure participation of parents in parent teacher meeting**

- Telephone
- Diary/notes
- Home visit
- Annual result
- Activities to do at home
- School functions
- School committee

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## Chapter 5. Other factors affecting socio-emotional development in children

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### What will you learn in this chapter?

- The role of nutrition in children's development and health
- How to recognize eating disorders
- Supporting children with visual, hearing and speech problems
- The importance of exercise in children's health
- Media and screen time
- Internet addiction
- Cyber bullying
- Brain development
- Differences in brain functioning and effects on behavior
- Suicide prevention

In this chapter we will discuss some other factors affecting the socio-emotional development of children. If you are aware of the factors, you will be better able to help children.

### Nutrition

Proper nutrition is essential not only for a healthy body but also for a healthy mind. Nutritional deficiencies have a well-documented impact on cognitive and emotional development in children.



The World Health Organization Eastern Mediterranean Regional Office (WHO-EMRO) notes that malnutrition remains the single biggest contributor to child mortality in the Eastern Mediterranean Region.

Nearly one-third of children in the region are either underweight or stunted, and more than 30% of the population suffers from micronutrient deficiencies. Due to the vital importance of this topic, the WHO-EMRO held a regional meeting in 2010 focusing on nutrition, disability and mental health. According to the World Bank '*The effect of under-nutrition on young children (ages 0-8) can be devastating and enduring. It can impede behavioral and cognitive development, educability, and reproductive health, thereby undermining future work productivity*'.

There is a bidirectional relationship between mental health and nutrition. Malnourished children have a greater degree of behavioral problems and deficient social skills, and are also prone to decreased attention, deficient learning, and lower educational achievement. In addition, children who have stunted growth are also more prone to develop self-esteem issues and mental illness. Children who are on the other side of the spectrum, i.e. suffer from obesity, are also prone to develop self-esteem issues and emotional difficulties.

On the other hand, several mental illnesses can affect nutritional status. Depression for example is frequently accompanied by lack of appetite. In addition, cognition, and subsequently the ability to learn and retain information is linked to deficiencies in vitamins (B, C, D, and E) and minerals (calcium, iodine, iron, magnesium, selenium, and zinc). Poor nutrition has general effects on cognitive development resulting in lower IQs (lower by 15 points or more in the severely malnourished). It is imperative that schools pay attention to the nutrition of their students and work with families towards ensuring children receive healthy diets. Many countries have established school nutrition programs particularly for children who struggle with poverty and malnutrition.



### **Practical steps to deal with problems related to nutrition**

1. Provide information to children and parents about the importance of a balanced diet.
2. While conducting meetings with parents, discuss what should be present in the daily diet of children, for example milk, fruits, meat, pulses and vegetables etc.
3. In some schools, visits from a government nutrition supervisor are made. With their cooperation, you can make diet charts for children. And if possible, invite parents to those visits. Pay special attention if a child is underweight.

4. Discuss with the school principal if your school is not receiving visits from the nutrition supervisor, so that he/she can arrange the visits by contacting the nearby basic health unit.
5. Ensure that the school canteen has food items which follow guidelines for a healthy diet.
6. Encourage parents and children to bring safe and hygienic home-made food instead of buying it from the school canteen or market.
7. Make yourself an example so that children also follow these healthy eating habits.

### Eating Disorders

These disorders present a group of disorders where those affected (most commonly females) develop an unhealthy relationship with eating. They are among the most fatal of all mental disorders. There are several types of eating disorders including Anorexia Nervosa where the person affected may suffer from a disturbed body image (thinking they are obese while they may be very thin and undernourished) with an abnormally low body weight. Affected individuals typically take extreme measures like restricting their food intake, over exercising, and inducing vomiting or taking weight loss pills among other behaviors. Another type of eating disorders is Bulimia Nervosa where those affected may typically binge (eating large amounts of food) and regularly self-induce vomiting or misuse laxatives, diuretics or enemas after bingeing (purging type). They may use other methods to prevent weight gain, such as fasting, strict dieting or excessive exercise (non-purging type). Eating disorders could be life threatening and require professional care.

### Vision, hearing and speech problems

Vision, hearing and speech impairment in children can affect their educational performance and behaviours. For example, if a child cannot hear properly, the teacher may think that the child is not listening to him, or the child may have speech problems leading to him being unable to speak properly in the lesson. Similarly, children with vision impairment/problems can face difficulty in seeing the board which might affect their educational performance.

Children who present with unidentified problems in vision, hearing or speech may be thought (wrongly) to have mental illness. Students who have impairments in vision, hearing or speech may find themselves struggling at school and subsequently be prone to low self-esteem and school avoidance.

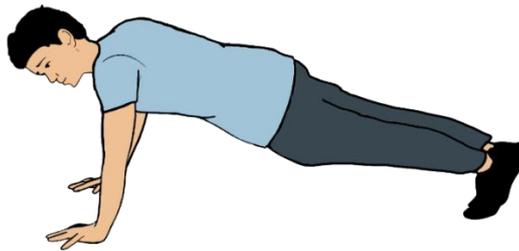


### Practical steps

It is therefore important that:

1. If children are suffering from such impairments, contact their parents and guide them to go for a detailed medical examination from the medical officer.
2. For vision and hearing screening and speech evaluations, contact the nearest basic health unit.

### Physical exercise



Regular physical activity in schools has significant health benefits both in the physical and mental domains. Exercise improves strength and endurance, helps build healthy bones and muscles, can improve blood circulation and helps in weight control. It also has beneficial mental health effects including reducing anxiety and stress, maintaining a healthy body image and increasing self-esteem. It also helps keep children occupied with healthy activities. There is also evidence that links school based physical activity to cognitive skills and improving academic achievement.

According to the United States Center for Disease Control and Prevention (CDC) a Comprehensive School Physical Activity Program (CSPAP) is a multi-component approach by which school districts and schools use all opportunities for students to be physically active. It also developed a guide for schools to develop, implement, and evaluate comprehensive school physical activity programs. This can be accessed at <http://www.cdc.gov/healthyyouth/physicalactivity/cspap.htm>



### Practical steps

1. Physical activity should be incorporated into the school curriculum
2. There is a physical education teacher (PET) in most of the schools. Arrange physical activities for children with the help of PET.
3. Encourage students to participate in physical activities.
4. Educate parents that it is good for children's health if they actively participate in physical activities and sports daily for at least an hour.

### Media and Screen Time

With the proliferation of different types of media (TVs, computers, smart phones, etc.) children are increasingly spending time consuming such media. The American Academy of Pediatrics recommends parental monitoring of '*media time*'. Likewise with increased access to electronics in schools and after-school programs, educators have a similar role to play.



### Practical steps

1. Limit the time children consume such media to 1-2 hours a day.
2. Provide alternate activities for entertainment, such as playing outside, board games etc.
3. Monitoring the type of media children are exposed to for language, violence, and sexual content.
4. All entertainment media should be avoided for children under 2.

### Internet Addiction

Internet addiction is becoming an increasingly common problem. It may manifest in a school setting in different ways both directly and indirectly. Directly, students may find themselves spending excessive time online whether on school computers or hand held devices. They may also give up leisure time or lunchtime to spend on the Internet. Internet addiction may also affect school activities indirectly. If the student

is up all night browsing the Internet, they may be late for school, appear tired or unfocused, or may not go to school at all.

There are no specific criteria to diagnose internet addiction as it may vary from person to person, so there is no specific number of hours per day spent online that would indicate Internet addiction. However there are some warning signs that Internet use is becoming problematic (from helpguide.org):



- Losing track of time spent online.
- Having trouble completing tasks at school or at home.
- Isolating from family and friends due to spending excessive time online.
- Feeling guilty or defensive about your Internet use.
- Feeling a sense of euphoria while involved in Internet activities.

### Cyber bullying

Cyber bullying is bullying that takes place using technology. It can take place through different forms of electronic media including social media, texts, emails, by sharing rumors, embarrassing pictures or stories, hate or racial speech, and creating fake profiles.



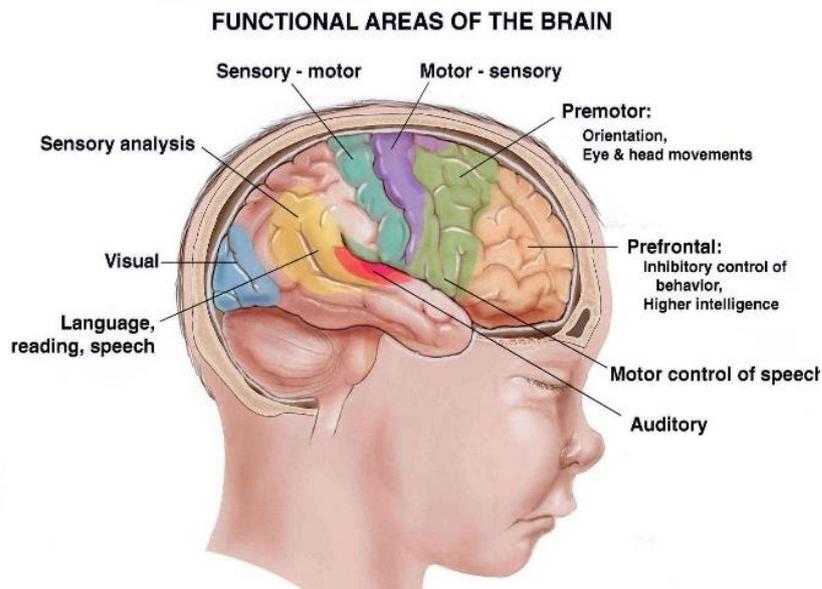
Prevention of cyber bullying requires close collaboration between parents and school staff, and interventions including monitoring children's online presence, and encouraging communication to school

staff if the child or a friend is being cyber bullied. More information is available at [stopbullying.gov](http://stopbullying.gov).

### Brain development

There are key aspects of brain development that are important for teachers to be aware of in order to better understand child and adolescent behavior. We review how difficulties with specific areas of the brain can impact behavior, and the importance of taking into consideration typical and atypical brain development when deciding on expectations and challenges in the classroom.

**Diagram 1. Functional areas of the brain**



### 5.9 Differences in brain functioning and effects on behavior

Different areas of the brain serve different functions such as controlling speech, vision, hearing and language/reading. Many areas of the brain can impact behavior seen in the classroom. For example, the prefrontal cortex, is used in decision-making and the ability to control behavior.

It is crucial for teachers to understand that some children are born with genetic problems or medical conditions that may impact specific parts of the brain and affect how they function academically. For example, a child might have deficits in the area of the brain related to language, speech, and

sensory analysis. This could impact the child's ability to share learned information through speech or how the child might perceive things in their environment. Therefore, such children may need more assistance with speech, or the teacher may need to find

other ways for the child to share what they have learned. Due to stuttering, a child may not be able to show his/her actual reading proficiency. For these children, a silent reading task may be more useful.

A child with a processing problem may understand a concept but may not be able to explain it in response to a verbal question from a teacher. For one quite common type of sensory processing problem, a child may be especially sensitive to their physical environment, such as having difficulty tolerating normal lighting, being more sensitive to noises, disliking being touched, and not wanting to look directly into other people's eyes. Due to this condition the child might appear nervous or fearful and withdraw in the classroom, however they could be accommodated by being moved to a darker part of the classroom, getting to stand at the back of the line or having their desk away from others. In addition, the teacher needs to understand that the child is not being disrespectful when he/she does not make eye contact. It cannot be overstated that offering an environment at school and at home that is sensitive to the needs of such children has a significant impact on their mental health. If these issues are not understood at school or at home, then levels of anxiety increase and children are less able to learn.

It is also possible for children and adolescents to develop difficulties over time with how their brains function, such as being in an accident, a traumatic brain injury, or being exposed to trauma. Although these changes are not always permanent, it is important for an educator to consider how a child's behavior may change during these circumstances. For instance, when a child is in an accident or experiences a physical trauma to their bodies, areas of their brain may also be effected and therefore impact their behavior. If the area that is impacted is their prefrontal cortex, the child might have difficulty controlling their behavior. Although early trauma (sometimes called developmental trauma) may differ from an accident where there is not physical injury to the brain, it can still impact how the brain functions and how the child behaves. For example, a child who experiences ongoing abuse may have actual physical changes to their brain that impact sleep, mood, attention, and cause them to remain in a state of fear.

### 5.10 Suicide prevention

According to WHO statistics:

- More than 800,000 people die annually from suicide; roughly one death every 40 seconds.
- Suicide is among the three leading causes of death in some countries among those between 15-44 years, and the second leading cause of death in the 10-24 years age group (these figures do not include suicide attempts).
- In 2004, suicide was estimated to represent 1.3% of the total global burden of disease.



**The WHO recommends the following strategies for suicide prevention at a population level:**

- Restriction of access to the means of suicide (such as toxic substances and firearms).
- Identification and management of persons suffering from mental and substance use disorders.
- Improved access to health and social services.
- Responsible reporting of suicide by the media.

**What did you learn in this chapter?**

- Nutrition affects mental health. Ensure regular visits of the nutrition supervisor to the school and provide information to parents regarding the importance of appropriate diet for children.
- Ensure that the food items available in the school canteen are as per the food safety standards.
- Some children have birth deficits in their brain development due to congenital anomaly or an accident. This may affect their cognitive abilities which can impact their intelligence, academic capabilities, and behavior.
- Consult with the nearby basic health unit for a detailed check-up of children who have sight, hearing, or speech difficulties.
- Physical activities should be a compulsory component of the school curriculum and we should provide information to parents that an hour a day of physical activity is extremely beneficial for the health of the children.
- While conducting meetings with parents educate them to strictly monitor screen time and use of mobile and computer at homes. Encourage children to inform their parents or teachers if they or anyone among their friends is being a victim of cyber bullying.

# **Part 2**

## **Secondary Prevention**

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## Chapter 6: Managing socio-emotional problems in the classroom

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### What will you learn in this chapter?

- Key considerations when helping children with socio-emotional problems
- Strategies to manage socio-emotional problems in the classroom
- The child who is anxious, worried or sad
- The child with post trauma problems
- The child who is hyperactive, inattentive and disorganized
- The child with conduct problems
- The child who lags behind his peers in studies
- When to refer a child to mental health specialist

So far we have learned that teachers, parents and the ideal school play an important role in the optimal development and education of children by providing a healthy environment in schools and at home. While learning about the stages of socio-emotional development in children, we learned that a few children can experience typical difficulties such as a few angry outbursts, mood swings or testing limits. Often such difficulties are not severe and can be managed by paying some attention to them.

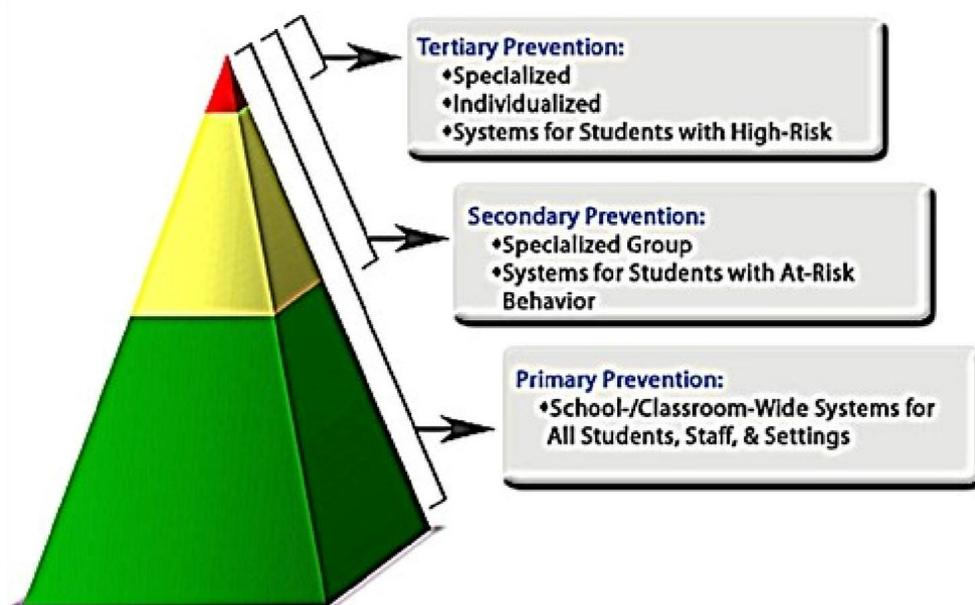
However, such difficulties may get worse and develop into atypical difficulties. It can impact academic performance, social interactions and the daily life activities of children. In such cases, these children will need your specialized and individual attention (indicated in the yellow part of the pyramid). In this chapter we will discuss in further detail how to manage problems by differentiating between typical and atypical difficulties.

As well as identifying atypical difficulties in children and young people we will explore strategies for use in the classroom and highlight times when it might be important to refer to specialist professionals outside the school.

Remember, it is easier to overcome problems if identified at an earlier stage, which can prevent them from becoming severe. If delayed, these problems can get worse and eventually could lead to severe mental health problems, which might be difficult to manage and may need consultation with a psychiatrist.

**Fig. 1. Responses to socio-emotional problems in children**

(University of Maryland Technical Resource Centre for School Mental Health)



While identifying children in need and helping them, it should also be kept in mind that teachers do not have to determine whether a child has a mental disorder, nor to diagnose a child with a mental disorder. Attempting to diagnose children risks inappropriately labelling a child, alienating children and their parents, and requires specialist training. Rather, it is important for teachers to understand how to support the mental health of all students in the classroom, including those with mental health problems and disorders, and to determine when mental health problems are severe enough to require additional help from family members and/or a mental health specialist.

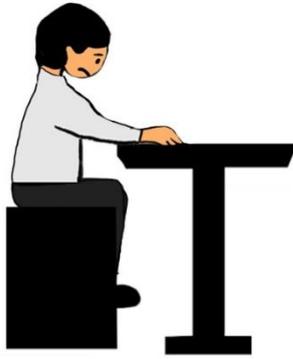
## 6.1 When to refer to a specialist for evaluation or treatment

It is important to understand that there are a few situations when problems would be severe and you would not be able to deal them on your own. In these circumstances it is important for you to refer the child to a specialist. Such problems include:

- When behaviors/symptoms are getting worse rather than better.
- When behaviors/symptoms are negatively impacting the child's functioning at home or at school.
- When symptoms are severe or distressing.
- When there is risk of harm towards self or others.
- When classroom intervention strategies alone are not enough.
- When in doubt it's always better to get a consultation.
- If child express any suicidal thoughts or attempts suicide.
- When a child uses/misuses **drugs**.
- Consult with a specialist for **severe mental disorder** such as psychosis.
- It is important to refer a child with **autism** (a condition in which a child may struggle to communicate and relate to other people, and find it difficult to make sense of the world around them. It can also involve engaging in repetitive behaviors).

## 6.2 Some general behaviors and symptoms that may warrant special attention

- A sudden drop in scores or academic performance.
- Sudden withdrawal or isolation from peers.
- Being too emotional or quick to anger.
- Frequently getting into fights or defiance.
- Pervasive sadness and crying.
- Exhibiting bizarre behaviors like responding to things that are not there.
- Becoming mute or disengaged.
- Truancy from school.
- Appearing too tired or sleepy in class on a consistent basis.
- Repetitive behaviors.
- Self-injurious behaviors (i.e. cutting, head banging).
- Significant changes in weight.
- Frequently leaving the class due to pains and aches that do not appear on weekends or holidays.



### 6.3 Roles and responsibilities within the school relating to socio-emotional problems

In some areas, there might be some facilities related to mental health and socio-emotional problems, which may also have a social worker, school nurse/school psychologist. They can play role in the healthy development of children.

#### **Social Worker**

A Social Worker is concerned with helping individuals, families, and communities to enhance their well-being. A social worker helps people develop their skills and their ability to use their own resources and those of the community to resolve problems. Some social workers with specialized training are able to provide therapy/counseling services. In many schools, if a social worker is available they would be first in line for consultation by teachers if a child is having a problem.

#### **Child and Adolescent Psychiatrist**

A Child and Adolescent Psychiatrist is a physician who specializes in the diagnosis and the treatment of emotional, behavioral and psychological challenges affecting children, adolescents, and their families. A child and adolescent psychiatrist has a medical education and can prescribe medications.

#### **Psychologist**

Psychologists are professionals trained to doctoral level, who evaluate and treat a range of emotional, behavioral and psychological challenges, conduct research and perform testing.

#### **Occupational Therapist**

An Occupational Therapist is a professional who specializes in the assessment and treatment of conditions that affect an individual's ability to perform daily tasks.

### **Physical Therapist**

A Physical Therapist is a professional who is focused on improving or restoring mobility and reducing pain.

### **School Nurse**

A School Nurse specializes in the advancement of health, well-being, and academic success of students. A school nurse, when available, is typically in charge of administering psychotropic medications to students when prescribed during school hours.

### **Speech-Language Pathologist**

A Speech-Language Pathologist specializes in evaluating and treating disorders related to speech, language, communication, swallowing and fluency.

### **Community Leaders**

Community Leaders such as politicians and religious leaders have an active role to play in improving mental health in school settings. Community leaders can help raise awareness about the importance of school mental health and also provide advocacy for providing school staffing and resources for mental health.

### **Key considerations in managing socio-emotional problems in children**

Now we will talk about a few of the atypical difficult behaviors exhibited in the classroom, and examine strategies to deal with them. A few fundamental things should be kept in mind while doing so:

#### **6.4.1 Involvement of parents**

Strategies employed to deal with difficult behaviours in the classroom will be more effective if the same strategies are implemented at home. It is important therefore, to meet with parents to discuss the socio-emotional problems their child is experiencing. Share with parents the helpful strategies that you are implementing in the classroom so that they can do the same at home. Improvement is more likely if the parents and teachers work together for the betterment of the child.

#### **6.4.2 Consistent use of strategies**

Remember, socio-emotional problems are different from that of physical health problems. It may take time to bring about an improvement in these problems. In order to deal with socio-emotional problems, you will have to be extremely tolerant and patient while ensuring consistent use of the strategies, after which you will slowly begin to see an improvement in children.

### 6.4.3 Confidentiality

Confidentiality is of crucial importance while working with the children. If you find out that a child is experiencing problems or challenges in his life, you should make sure to not divulge this information to other children or your colleagues. You should only inform other teachers about it if you are looking for their help in this matter.

However, it is also to be kept in mind that in some circumstances, you are required to breach confidentiality and inform the parents, the school principal, or other relevant authorities about your concerns about the child. Such circumstances are as follows:

1. If the child is on the verge of hurting himself
2. If the child is on the verge of hurting someone else
3. If the child is at risk of harm from someone else

If you become aware of any of the above circumstances, it is your responsibility to inform the parents, the principal of the school, or other relevant personnel. The child should be referred to a specialist immediately.

### 6.4.4 Basic counseling skills

In order to deal with the atypical difficult behaviors of children in the classroom, you should continue using basic counseling skills along with the strategies taught in this chapter.

### 6.4.5 The reluctant child

You may find that with time and consistent use of the basic counseling skills described, many children will begin to relax and open up. However, some children may remain quite reluctant or shy. You should respect the fact that the child may not be ready to be completely open. While you may want to gently encourage the child to talk, you should never pressure them. It is important for you to show a readiness and openness to listen if they want to share private information about their distressing experiences, but the decision is entirely up to them. If a child refuses to talk further about a topic, it is important that you respect this.

*For example 'You seem very upset talking about this. I am willing to listen to your story and help you talk about it, but I want you to know that you can decide what we talk about, and if you need to stop at any point or if you do not want to talk about a particular part of the story, then this is okay.'*

### 6.4.6 Physical Contact

Usually, putting your hand on the child's head or shoulder, or patting their backs makes them feel good. But it is also to be kept in mind that if the child doesn't like being touched or is scared of it, then this should be avoided. It is also important to consider the gender and age of the child while doing so.

### 6.4.7 The setting

You should try to find a private, comfortable setting in which to talk about the child's problem. Give children the opportunity to ask for particular places to meet or alternatively you can ask the school principal about it. However, it is also to be ensured that it should not be against the rules of the school. If so, or if the child is not comfortable in discussing the matter in a secluded place, you can talk to him somewhere where other people are nearby, but not able to hear the problems that the child discusses. For example you may speak during the break time, during the morning assembly, or you can ask the child to sit closer to you during the class. A child will rarely speak about personal issues if they can be overheard by others.

- Assess functioning and impact of the problem on their daily routine
- Explore the child's support network (family involvement, peer support, school staff) and socio-emotional problems
- Assess the current use of strategies and possible solutions of problem
- Assess the child's life events and acknowledge the impact on socio-emotional wellbeing

## The child who appears anxious, worried or sad

### 6.5.1 Mariam's story

Mariam is 12 years old and she is in class seven. Last month, her teacher specially called her mother to school and told that she has failed in four subjects. Her teachers informed her mother that she often complains of headache and stomach ache. However, her mother responded that she does not have such complaints at home. The teacher explained that she always appears worried and anxious, especially when she checks her homework, and if she is asked to read a lesson in front of the class, she starts crying. Upon hearing this her mother took her to the doctor for a detailed check-up but the doctor said that she does not have any such issue.



We have seen that Mariam is facing some problems due to which her academic performance is badly being affected.

### 6.5.2 Symptoms - Mariam

Let us revise the problems of Mariam as told by her teacher:

- Complaints of stomach ache and headache
- Feeling anxious, worried and irritable
- Excessive crying

Symptoms as described by Mariam are present in those children who are facing the problems of anxiety, worry and/or sadness, and these children are often unable to cope with these symptoms on their own.

Some other symptoms can also appear in children, such as:

- Looking sad, alone or isolated. For example, loss of interest in favorite activities (such as playing with friends, favorite hobbies etc)
- Often complains of stomach aches, headache, shortness of breath, fainting for 10-15 minutes, conversions, lack of energy or body aches etc.
- Demonstrates marked changes in behaviors, for example acting angry or irritable, having frequent absences from school, taking too long to complete tasks

- Being afraid to talk, avoid talking or not saying what they want because they are afraid
- They might stutter
- Expressing feelings of sadness and hopelessness. For example 'I cannot do my schoolwork', feeling worthless such as 'my teachers think that I am an idiot' and 'my friends do not like me'.

### 6.5.3 Key questions to consider in supporting Mariam:

- What strategies could be implemented by the teacher to support Mariam?
- What strategies could be implemented by the parent to support Mariam?
- What strategies could be implemented by peers to support Mariam?
- Who else could support Mariam and how?
- When would you refer Mariam to a Specialist?

### 6.5.4 Strategies to manage the child who appears anxious, worried or sad



Now let us discuss how you can provide help to the child in class

#### 1. Give them opportunities to express their feelings

##### **Aim:**

When a child is feeling low or sad then first of all try to understand the reason for his sadness. Expressing their thoughts and feelings will help the child to deal with their anxiety and sadness and it will also assist you in helping the child.

##### **Method:**

Encourage the child to express his thoughts and feelings. Make the child aware that they can express their feelings through a number of different ways. For example, they can write what they are feeling, share with a friend or teacher, or express their feelings through drawings. In the beginning, a child may find it difficult but with constant help and support he/she will learn. Remember that whenever a child shares his/her problems with you, it is important to make him/her realize that he/she is not alone in feeling a particular way, and you can understand what he/she is going through.

*'We all often get stressed when faced with such circumstances.'*

If the child writes his/her feelings in a diary/notebook, it is very important to make sure that it can only be read by you or some other trusted teacher. If you get to know some notable information (e.g. the child has experienced some form of trauma such as abuse, separation between parents, death of a close relative or any similar incident) keep that information confidential. However, if the information you get is sensitive and indicates that there is anything which can harm the child or someone else, consult the specialist immediately.

Examples:

*‘Often when we share our emotions with others we start feeling better. Would you like to share how are you feeling now? You can express your emotions through various ways. For example you can write about your feelings, discuss with a friend or teacher or express it in the form of drawing.’*

*‘I can understand what you are going through. Often we feel this way when we go through such circumstances.’*

NB. Before helping children, make sure that these symptoms are not due to other reasons or physical health problems. For example, refer the child to the Basic Health Unit if he complains of a headache, stomach ache, tiredness or weakness, so that they can be examined to check if these problems are due to deficiency of iodine, iron or proper diet. If a child faints in classroom you must make it sure that this is not due to epilepsy and seek help from a doctor in this case.

## 2. Encourage children to utilize relaxation techniques

### **Aim:**

As you know, slow breathing is a popular technique for relaxation. Therefore whenever a child feels uncomfortable, worried or stressed, you can ask him to do slow breathing. Similarly it can be used prior to starting any task in which the child might feel anxious such as before an exam, or before reading a lesson in front of the class.

### **Method:**

Encourage the child to breath slowly. You can give them instructions;

- Take a breath from the nose and count for three seconds.
  - Stretch the breath for three seconds.
  - Now take an out breath from the mouth.

- Keep practicing for 2 to 3 minutes.
- Encourage the child to keep his body calm. You can give him these instructions:
  - Close your fists firmly, and then open them.
  - Keep practicing for 2 minutes.

Relaxation exercises can be practiced in class for all students. Encourage the students to practice such exercises whenever they feel stressed or anxious.

### 3. Allow the child to spend some time to ease in when first coming in to school

#### **Aim:**

If a child is scared or worried after coming to school, try to give him time to relax. Do not force him to work immediately. Instead, if he wants to do something of his choice then allow him to do so. This way the child will be more likely to get involved in school activities.

#### **Method:**

If you feel that the child is scared or worried when he comes to school then you must ensure that he can take some time to relax. For example if he wants to, he can take a walk in the grounds rather than going to the classroom, make drawings, talk with his favorite teacher or practice the breathing exercise. Reward efforts of the child to get to the classroom.

### 4. Teachers can create a peer support group for children

#### **Aim:**

When children are sad or worried, they feel isolated and lonely and it is difficult for them to ask for help from anyone. Making a peer support group can help to improve the child's relationship with other children.

#### **Method:**

Allow the child to sit with a supportive peer who will assist him in completing tasks and involve them in other school activities. Assign tasks that children can do together or in the form of a group so that the interest of the child increases in school work. For example, reading poems, science projects, playing together, a circle time activity or any other task which is appropriate to be done in class.

## 5. Involve the child in pleasurable activities

### **Aim:**

When children are sad they lose interest in work and want to stay alone. If children are first involved in their favorite activities, it will help to improve their involvement in other activities as well.

### **Method:**

Communicate with love and patience with the child and think along with him about pleasurable activities.

You can ask the child what things he finds pleasurable. It may happen that the child says he does not find anything pleasurable. In such a case you can ask the child what activities he used to find pleasurable previously. This will help you to identify things in which the child may find pleasure.

Similarly, it can be suggested to parents that they encourage the participation of their child in favorite activities such as going for a walk, watching TV, playing a favourite game, meeting with a friend, or some other age-appropriate activity.

### **Example:**

*'What did you like doing best, let's do that again'*

## 6. Model and practice positive self-talk

### **Aim:**

If the child feels that he cannot do anything or has negative thoughts in his mind then encourage him to think good about himself and revise it. In this way his self-confidence will boost and he will feel good.

### **Method:**

When a child does not feel good ask him to recall these things:

- If I try then I can manage this problem.
  - It is a difficult situation but it is temporary and I can face it with courage.

- It is natural to be worried in a difficult situation but problems can be managed.
- Sometimes, it can be helpful to put the message on a small card, especially if given by a trusted teacher.

### 7. Help the child to overcome fear and consider the probability of events

#### **Aim:**

It is possible that sometimes a child is afraid of something which has very few chances of happening. Talk with child about his fear and make him realize that there is very little chance of this thing happening in reality. It can help to overcome child's worries. However, in doing this, it is important not to give the impression that you are not taking his worries seriously, or understanding his situation.

#### **Method:**

Talk with the child to consider the probability of events and specifically about the things he is worried about/afraid of. An example of this is shown below.

If the child is reluctant to go to school, then you can discuss it with him in the following way:

**Student:** I am afraid to take the bus home... I know it will crash... I saw a school bus crashing on TV.

**Teacher:** I see that you are worried, but what are the chances that the bus will crash?

**Student:** I don't know, I just feel that something bad will happen.

**Teacher:** How many buses do you see out there that are crashing into other cars?

**Student:** I don't know, I guess not many?

**Teacher:** Yes not many! So how have you been coming to school?

**Student:** I take the bus every day!

**Teacher:** And how many times has it crashed?

**Student:** It has never crashed, I just feel it might but what you are saying makes sense, and maybe I shouldn't be too worried.

**Teacher:** You know we all sometimes experience thoughts when we are nervous that may be unhelpful to us. What question can you ask yourself when you have a first thought that is unhelpful?"

**Student:** Hmm... I don't know.

**Teacher:** What about something like – 'What is the evidence for that?' 'How do I know this is true?'

**Student:** Thanks, I'll try to remember to ask myself those questions

**8. Parents and teachers help the child to evaluate the evidence for conclusions**

**Aim:**

As described above, it may happen that the child may jump to irrational conclusions which are very unlikely to happen. Talk with the child to evaluate the evidence of his conclusions so that he understands that he is worried without any solid reason.

**Method:**

Generate a dialogue with the child to help him understand the basis of his conclusions

**Student:** I don't want to take the test, I am a failure and will fail this test too.

**Teacher:** Hmm...how have your grades been for the past year?

**Student:** They were not bad but I know I'll fail this test.

**Teacher:** You have always done well and you will do well this time too.

**Student:** I am not sure.

**Teacher:** How many times in your life have you passed a test?

**Student:** Many times, I can't remember the number.

**Teacher:** You have to remind yourself, if I have done it before, I can do it again.

**Student:** I guess you are right!

**Teacher:** You know we all sometimes experience thoughts when we are sad that may be unhelpful. What question can you ask yourself when you have a first thought that is unhelpful?

**Student:** Hmm...I don't know.

**Teacher:** What about something like - What is the evidence for that? How do I know this is true?

**Student:** Thanks, I'll try to remember to ask myself those questions

NB. A referral may be appropriate when the symptoms of anxiety become so overwhelming as to impact the child's educational attainment or social functioning, and when classroom interventions are not sufficient to mitigate the problem. Refer if a child gets panic attacks.

### The child with post trauma problems

#### 6.6.1 Amir's story

Amir is 11 years old and he is in the 6<sup>th</sup> class. His teachers noticed that for the previous month he is not as interested in academics as he used to be. Now he is usually silent and sits alone. Even during the break, he prefers to sit alone in the corner and doesn't talk to anyone. His teacher also noticed that he is usually lost in his own thoughts and gets easily confused on being asked a question. Upon asking, Amir told his teacher that he doesn't like noise at all, and during the break he wishes everyone could just keep quiet. Amir's parents told the teacher that there was a fire incident with their wheat crops one month ago that severely damaged their home as well. Amir is now staying with his relatives in their home. Amir misses his home and cries. He also has nightmares and flashbacks of the incident.



We have seen that Amir's behavior went through a sudden change after the fire incident that damaged his house. The teacher was unaware of it, but by noticing the change in Amir's behavior and discussing the matter with his parents, he got to know the difficult time that Amir is going through.



### 6.6.2 Symptoms - Amir

Do you remember the symptoms discussed in Amir's story?

Let us revise these symptoms:

- Drastic change in mood. For example, appearing unusually sad, feeling anxious or irritable. Has become quiet and/or sad, and avoids interaction with other children. Loss of interest in activities
- Exaggerated startle response
- Difficulty sleeping
- Nightmares/flashbacks of the traumatic event

Children who have experienced a trauma may exhibit a few other symptoms as well. For example:

- Being severely stressed/burdened or distraught. Acting younger than their age, being clingy or whiney, unable to perform previously acquired skills; for instance, failure to solve math problems that he previously knew the solution to. Unable to concentrate.
- Avoiding activities or places related to the trauma, being reluctant to talk about certain things or go to certain places. Repetitive play with themes related to the trauma, or being involved in a few specific games (which were never played before).
- Having nightmares or catastrophic thoughts about the incident or trauma. Having the sleep-cycle affected, for instance, either over sleeping or else having difficulty in falling asleep because of the nightmares and thoughts about the incident. Getting easily shocked or exhibiting a sudden outburst of anger.

### 6.6.3 Key questions in supporting Amir

- What strategies could be implemented by the teacher to support Amir?
- What strategies could be implemented by the parent to support Amir?
- What strategies could be implemented by peers to support Amir?
- Who else could support Amir and how?
- When would you refer Amir to a Specialist?

### 6.6.4. Strategies to manage the problem of post trauma

#### 1. Encourage children to utilize relaxation techniques

**Aim:**

As you know, slow breathing is a popular technique for relaxation. Therefore whenever a child feels uncomfortable, worried or stressed, you can ask him to do slow breathing. Similarly it can be used prior to starting any task in which the child might feel anxious such as before an exam or before reading a lesson in front of the class.

**Method:**

Encourage the child to breath slowly. You can give them these instructions:

- Take a breath from the nose and count for three seconds.
- Stretch the breath for three seconds.
- Now take an out breath from the mouth.
- Keep practicing for 2 to 3 minutes.

Encourage the child to keep his body calm. You can give him these instructions:

- Close your fists firmly and then open them.
- Keep practicing for 2 minutes.

Relaxation exercises can be practiced in class with all students. Encourage the students to practice such exercises whenever they feel stressed or anxious.

**2. Reassure the child that school is a predictable and safe place with normal routines**

**Aim:**

It is imperative to reassure the child that school is a safe place where there is no threat to him. This helps him not to feel scared to come to school and enables him to take an active part in school activities.

**Method:**

Reassure the child that there are people to help him in school; the principal, the teachers, and other students.

Make sure that all activities of the school are as per the routine so that the child can feel that everything is as usual and that he is under no threat. However, it may help to be lenient regarding school work until he starts to feel better.

If the child feels distressed in class, then try to make him calm and peaceful, and then work with him to explore the probable cause that may have triggered the response.

**3. Teachers should make a peer support group to help the child**

**Aim:**

Create a support group for the children to enable them to feel safe and if needed, they can reach out to others for help immediately.

**Method:**

Work with the child to identify a few other students in the class who can help him out in his hour of need. For example, if the child starts to feel scared or gets distraught in school, his supportive friends could inform the teacher.

**4. Teachers and parents should allow the student to deal with traumatic reminders at their own pace**

**Aim:**

Encourage the child to deal with the incident/trauma-related thoughts so that he knows that he can get over such thoughts and take an active part in routine activities again.

**Method:**

Give the child enough time to get out of the trauma. For example, if someone close to the child has passed away and he is unable to focus on school work, give him time. He'll get out of the trauma slowly.

Encourage the child that whenever the thoughts of the incident/trauma start to haunt him, he should write about it in a journal or share it with a friend or a teacher.

**5. Teacher and parents should work with the child to identify 'signals' to be excused from class if distressed**

**Aim:**

It is crucial for the teacher to be familiar with the difficulty that the child is facing so that he can help him.

**Method:**

Try to work with the child to identify `signals` to be excused if distressed. For example you can tell the child to raise his right hand or put his head on the desk when he is feeling stressed in the class. This will help you realize that the child is in need of help.

**6. Teachers and parents should work with the child to identify coping skills such as alternative activities**

**Aim:**

If the child is worried, he won't be able to focus on anything. This is why letting him be involved in alternative activities for a while will help him be calm and peaceful, after which he would be able to focus better on his work.

**Method:**

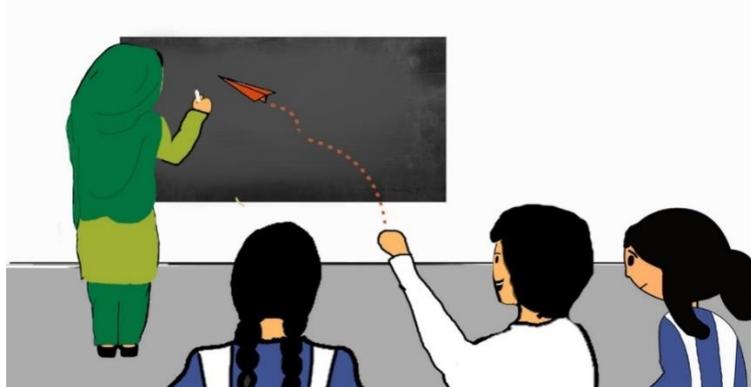
Let the child have 2 to 3 minutes break or let him do another task. For instance, you can let him go and drink a glass of water, or let him take a walk round outside.

NB. A referral may be appropriate when symptoms such as flashbacks and nightmares overwhelm the child to an extent that they are not able to concentrate in class or when the child becomes disruptive or aggressive. Also refer if these problems are affecting a child's daily routine and academics, and when classroom interventions are not sufficient to mitigate the problem.

## The child who is hyperactive, inattentive and disorganized

### 6.7.1 Hassan`s story

Hassan`s mother came into his room and after heaving a sigh started to arrange his things in his room. Hassan has never put his things in order from an early age. He is 8 years old now but despite telling him multiple times, his habit has not changed. His teacher called his mother today to tell her that he has again left his books at home and has not done his homework. Besides being careless, he finds it hard to focus on anything for more than 10 minutes, but according to his teacher, he is ahead of everyone in physical activities and he doesn`t remain still in one place for more than a few minutes. He disturbs the class and doesn`t give anyone else a chance to talk. His mother and teacher are worried about him since other children of his age don`t behave that way. Because of this attitude and behavior, he`s not only behind in academics but he doesn`t do the rest of his tasks properly either.



### 6.7.2 Symptoms - Hassan

Let us focus on Hassan`s story and see what difficulties he is going through:

- Not completing tasks and making careless errors/mistakes
- Forgetting tasks and materials (jackets, books, pencils, homework)
- Inability to concentrate on anything for more than 10 minutes
- Inability to remain still in one place for longer than a few minutes
- Interrupts the teacher and other students
- Blurts out answers before the teacher finishes a question or calls on them to respond

The symptoms that we discussed in Hassan`s story, are present in children who are facing issues of hyperactivity, inattention and disorganization. There are a few more symptoms which may be present other than the ones mentioned above:

- Having difficulty paying attention or staying on task
- Making choices without thinking them through
- Talking too loudly
- Fidgets/has difficulty remaining still and staying in their seat
- Other children may get easily frustrated with them and they may become frustrated with peers and with themselves
- Not listening when spoken to
- Daydreams or appears 'spacey'
- Has a very messy/disorganized desk area
- Loses objects
- Avoids activities that require sustained mental effort

### 6.7.3 Key questions to consider

- What strategies could be implemented by the teacher to support Hassan?
- What strategies could be implemented by the parent to support Hassan?
- What strategies could be implemented by peers to support Hassan?
- Who else could support Hassan and how?
- When would you refer Hassan to a Specialist?

NB. Before helping the child, make sure that the child's symptoms are not because of any physical problem. For example, if the child finds it hard to focus, contact the parents and advise them to consult a doctor for a detailed examination to see if this is due to problems in vision or hearing.

### 6.7.4 Strategies to manage the hyperactive, inattentive, disorganised child

#### 1. Preferential seating

**Aim:**

Children who are hyperactive and are unable to focus on anything should be seated in front of the class since it will allow the teacher to give them special attention.

**Method:**

Try to make the child sit in the front of the class, put his chair close to yourself, or have him sit at a place where you can easily supervise him.

## 2. Give special attention to the child

### **Aim:**

Giving special or individual attention to the child will reduce the chances of him getting distracted and he would be more able to complete his work.

### **Method:**

- Help him out in doing his work. Help him to understand the question before attempting to answer it.
- If possible, let the child have the notes for the lesson so that he can take help from the notes while memorizing it, in case he struggles to write something important. Mark the important lessons on his books. It will make it easier for him to memorize the important points.
- When the child is working, it is recommended to check his work at regular intervals to ensure that he is working correctly.
- Appoint a classmate or the monitor who will help him to collect all of his things and to put them in his bag before he goes home.
- Thoroughly check all of his copies to ensure that he has completed his work.
- Check his diary to ensure that he has noted the work that he is required to do at home.

## 3. Support group

### **Aim:**

Children who find it hard to focus on anything or follow the rules can be helped by making a support group for them.

### **Method:**

- Seat the child with the classmates who can help him in completing his work and following the rules of the class.
- During the break time or at the end of the day, allow the child who is hyperactive to go out with one of his classmates before the rest of the class.
- Help the child in organizing the place where he is working. For example, if he has sharpened his pencil, ask him to throw the garbage in the dustbin.
- Ask the child to keep his books arranged on his desk, put all of the papers in a file, and use a geometry to keep his pens and pencils.
  - When the child follows the instructions and keeps his things in order, cleans his desk, etc., appreciate and encourage him.

#### 4. Teachers should keep extra stationary in the class

**Aim:**

There should be extra stationary in the class for children who forget their things at home so that they won't be left behind in school work.

**Method:**

If possible extra pencils, rubbers, copies, etc. should be kept in the class which can be given to such a child if he loses his things. Tell the child that he can get the extra stationary only once in a week.

#### 5. Give short breaks to the child during tasks

**Aim:**

Some children find it hard to sit still in one place or focus on anything for long periods of time. If their task is divided into smaller tasks or if they are given short breaks during their work, it can help the child in focusing on his task. This way, he can complete his task in the class and won't disturb others.

**Method:**

In order to give the child short breaks when he's working, you can do the following:

- If the child is finding it hard to sit still in the class, allow him 2 to 5 minutes break in which he can take a walk round outside the class.
- The child can be given tasks for which he would have to move from one place to another, such as collecting the copies of all classmates and taking them to the staff room, bringing the attendance register, distributing papers among classmates etc.
- The task can be divided into smaller tasks of 5-10 minutes so that the child can get them done before running out of his attention span.

#### 6. Channel energy in a positive way

**Aim:**

Getting children involved in more physical activities can be effective in channelling their energy positively.

### Method:

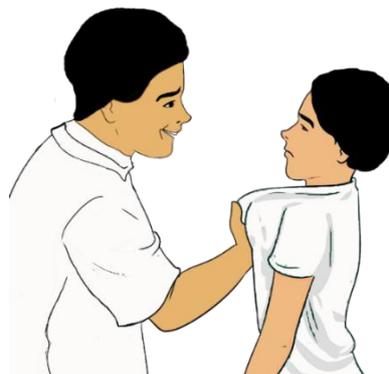
Ask the child to inform the teacher whenever he is finding it hard to sit still in the class. If the child finds it extremely difficult to sit still, you can ask him to move a little while being seated at his place. For example, he can first raise his one hand, then his second hand, count to five, move all of his fingers and toes on his hands and feet. Whenever possible, get the child involved in physical activities, for example provide the child with opportunities for physical activities during PT or break time.

NB. A referral may be appropriate when the symptoms are disruptive to the classroom, impact the child's educational attainment or that of others; for example the child cannot concentrate for more than 10 minutes, and when classroom interventions are not sufficient to mitigate the problem.

## The child with conduct problems

### 6.8.1 Hammad's story

Hammad is 15 years old and his teachers are quite worried about him because of his poor behavior. Hammad is quite irregular in school leading to him being behind in his studies. Once, he returned to class after 6 consecutive days of absence and gave his teacher a sick leave note, on which he had signed his parents name himself. When the teacher contacted his parents, they got to know that instead of coming to school, he spends time with the older boys of the colony. Sometimes, he has been seen smoking cigarettes. Hammad's teacher had also noticed that he doesn't have any friends in school and is usually sitting alone in the break time. His classmates are irritated by him as well since he argues with them a lot and frequently starts fights. His teachers and principal have tried to discuss the matter with him and even after complaining to his parents, there has not been any improvement in Hammad's behavior. In fact, he is getting worse with time and becoming a source of trouble for the teachers.



### 6.8.2. Symptoms - Hammad

The story explains how Hammad's bad behavior is a source of trouble for his teachers and parents. Let us see which of Hammad's behaviors were troublesome:

- Loses his temper, argues or fights with other students, constant lying.
- Being irregular at school.
- Smoking cigarettes.

As well as the aforementioned behaviors, the following behaviors of children may also be troublesome:

- Disobeying the teachers or the elders, disrespecting them. (For example, not following the rules, refusing to do class assignments, disturbing the class such as making noises, irritating classmates, not following the rules of the class set by the teacher).
- Getting angry easily. Getting into fights with other children and bullying them.
- Intentionally creating conflict with peers. For example, blaming others for their actions and behaviors. Seeking revenge for perceived wrongs.
- Stealing. Running away from the school or home. Forming a group with other children and then irritating others as a group.
- Trying to hurt others. Destroying property in the classroom, at home, or outside; for example breaking glass, damaging furniture, or setting a fire.

### 6.8.3 Key questions to consider:

- What strategies could be implemented by the teacher to support Hammad?
- What strategies could be implemented by the parent to support Hammad?
- What strategies could be implemented by peers to support Hammad?
- Who else could support Hammad and how?
- When would you refer Hammad to a Specialist?

### 6.8.4 Strategies to manage the problem of conduct disorder

#### 1. Teachers and parents should model politeness and treat children with love

##### **Aim:**

The behaviors of children can get worse if they are treated badly or strictly.

Such children usually find it hard to follow rules. This is why it is of crucial importance to treat them with love and politeness.

**Method:**

- In order to teach a child an appropriate behavior, it is imperative to give them a practical example. Modeling patience and politeness with children will let them learn these behaviours and act upon their learning.
- Avoid using such words which may give them the impression that you are trying to command them.

**2. Identify a teacher or a classmate/support group who can help**

**Aim:**

It can be effective to make a support group for children who are easily angered, get into fights, and disobey everyone. It can help in controlling their behavior.

**Method:**

For this purpose, identify a teacher or a classmate who can talk to the child when he is extremely angry. Teachers who are responsible in keeping discipline in school can be approached for help in this matter. Then if the child gets into a fight or displays other inappropriate behaviors, the matter can be handled outside the class.

**3. Teachers and parents should acknowledge the student's frustration or disappointment when something doesn't go as they want, and encourage the child on his good behavior**

**Aim:**

Sometimes, children try to change their behavior when they are politely asked by the elders but find it hard to change, and eventually give up and get irritated. However, if they are appreciated and encouraged for this behavior and are made to understand that they will eventually be able to change their behavior slowly, they'll continue their effort and start to see an improvement in their behavior.

**Method:**

It is always recommended to appreciate the child when he displays good behaviour. If he puts in effort to change his behavior and fails, you should still appreciate and encourage him for trying. Work with the child to think of alternative solutions for the problem.

Set a place in the classroom or even outside where the child can go and make himself peaceful whenever he's feeling frustrated.

#### 4. Teachers and parents should allow the child to correct mistakes or misdeeds

**Aim:**

If the child is provided with a chance for correcting his mistakes, this would let him know that he can try to make an amendment even if he commits a mistake.

**Method:**

If the child commits a mistake such as getting into a fight or being insolent with an elder, make him realize his mistake and give him a chance to correct it.

If the child has done something wrong, focus on fixing problems rather than who is to blame; reward collaborative efforts between the student and others. If the child works with the other children to correct his mistake, appreciate and encourage him. Try to teach the child that correcting mistakes means that he will try his best to not repeat the same mistake again.

#### 5. Teachers and parents should help the child to care for others` feelings

**Aim:**

Usually, such children find it hard to be considerate of others. This is why it is important to teach them that others can feel the same way as they do. Making them more considerate can help in improving their behaviors.

**Method:**

You should talk to the child whenever he displays an in appropriate behavior. Ask him how you think others feel when you disobey them or hurt them. For this purpose, you can ask the child how he would feel if someone was insolent with him or hurt him.

In order to make healthy relationships with others, you can arrange certain activities in class which will enable them to understand how to make good relationships with people. For example, you can discuss it in a circle time activity.

## 6. Teachers and parents should offer the child a few appropriate choices

### **Aim:**

Now that we know that such children find it hard to follow rules or obey others, it can be effective to let the child make choices so that he won't feel like someone is trying to command him.

### **Method:**

For this purpose, if the child refuses to do something, you can give him a couple of options and let him know the consequence of choosing either one. Use "*I need you to*" rather than "*You need to*" statements.

NB. A referral may be appropriate when the symptoms are disruptive to the class, impact the child's educational attainment or that of others, puts the child or others at risk of injury, and when classroom interventions are not sufficient to mitigate the problem. Also refer when there are substance abuse issues that require specialized interventions.

## The child who lags behind his peers in studies

### 6.9.1 Amjad's story

Amjad is 14 years old and is in the 7<sup>th</sup> class. Amjad's teachers and his parents are worried since Amjad has not been able to perform well in academia. In the exams that were held last month, Amjad scored poorly in almost all of the subjects. However, his performance in mathematics was relatively better. His parents were being complained about Amjad's academic performance since he was in the 5<sup>th</sup> class because apparently, he was a smart child. Upon talking to his mother, it was evident that his mother is also worried about his academic performance, since whatever she tries to make him memorize, he forgets. He revises through his lessons multiple times and it is apparent that he has understood everything, but still fails to perform well in the exams. Upon talking to Amjad, it emerged that he finds it difficult to fully understand his homework, and there is no one to teach him at home. This is why when he fails to understand his lesson, he leaves it and starts to play cricket because he loves to play cricket and is very good at it.



### 6.9.2 Key questions to consider - Amjad

- Which strategies can be implemented by teachers?
- Which strategies can be implemented by parents?
- Which strategies can be implemented by friends?
- Who else can provide help to Amjad?
- When will you refer Amjad to specialist?

### 6.9.3 Strategies to manage the problem of a child lagging behind his peers

#### 1. The teacher should sit the child in front of the class and give special attention to him

**Aim:**

Have the student sit at the front and give him special attention that will help in improving his academic performance.

**Method:**

- Try to sit the child at the front of the class or at least place his chair closer to yourself.
- Help the child in doing his work. Help him to understand the question and to answer it properly. If possible, let the child have the notes for the lesson so that he can take help from the notes while memorizing it, in case he struggles to write something important. Mark the important lessons on his books. It will make it easier for him to memorize the important points.

- When the child is working, it is recommended to check his work every now and then to ensure that he is working correctly.

Make the child sit with the classmates who can help him in completing his work or making him understand the lesson properly.

### 2. Teachers and parents should give clear and consistent instructions to the child

#### **Aim:**

Giving clear and consistent instructions to the child can help him understand difficult things more easily.

#### **Method:**

- Before starting any task, use clear and consistent words when giving instructions to the child so that he knows and understands the task that he is about to start.
- Make sure that a single instruction is being given at a time, so that the child is more able to understand and act upon it. Avoid talking about different things at the same time so that the child does not get confused.
- Once the instruction has been given and talked about, ask the child to ensure that he has indeed understood it properly.
- Ask the child to listen to the instructions thoroughly before acting upon them.

### 3. Teachers and parents should encourage the child

#### **Aim:**

Consistent encouragement and appreciation for the child's effort can help in improving his self-confidence, making him try to perform better in the next tasks.

#### **Method:**

- Encourage the child whenever he performs well. Even if his performance is not as per the expectations, appreciate him for the effort and help him understand calmly and peacefully rather than using strict measures.
- Encourage the child by highlighting the tasks that he is good at. Avoid being unnecessarily critical and comparing him to other children.
- Encourage the child to ask questions if he fails to understand something, in order to avoid confusion and to enable him to understand the task properly.

#### 4. Teachers and parents should break down tasks into smaller tasks and give more time to complete tasks

**Aim:**

The task can be divided into smaller parts for children who take longer to understand or do the task properly. With every smaller task being accomplished, they will become more self-confident.

**Method:**

- If a task is difficult for the child to complete, divide it into smaller tasks so that he can do it with ease.
- If the child fails to complete the task in a given time, allow him to take a little bit of extra time to complete. Ensure however, that the child is not asked to complete the task during his break time as the break is also very important.

**Examples**

- First, give a single question to the child to be solved. Once completed, then give the second question.
- If the other children are given 15 minutes to complete this question, after which their work is assessed by the teacher, the teacher should check this child's work in the end, so that he gets an additional 5 to 10 minutes to complete his work.

#### 5. Teachers and parents should revise the lesson over and again with the child

**Aim:**

It is difficult for some children to memorize the lesson; they forget it easily, or they have not understood it completely. This is why the lesson should be revised multiple times in class. Revision can help children in memorizing the lesson for a longer period of time.

**Method:**

There are various ways which can be used to revise the lesson thoroughly. The child can be asked to revise it orally or write it down 2 to 3 times. Children can be asked different questions relevant to the lesson in order to ensure that they have understood it properly. Apart from this, if a lesson is read multiple times, it is more likely to stay in the memory for a longer time.

#### Severe socio-emotional problems

A few of the difficulties related to socio-emotional development can be severe in nature. It is possible that

teachers may find it difficult to deal with such problems. It is recommended to refer the children to a mental health specialist in the case of such problems. A few of the examples and symptoms of such severe socio-emotional problems are mentioned below.

### 6.10.1 Substance abuse

#### 6.10.2 Haris` s story

Haris is a 17-year-old boy. His teacher noticed that his behavior has significantly changed in the last 2 months. Before, he used to be a well-liked student who excelled academically. More recently, his grades have dropped significantly, he rarely attends class and when he comes he appears angry and moody which has led to several fights. Discussing the matter with his friends and family, the teacher found out that Haris has been caught smoking cigarettes and marijuana.



Children with **Substance Use Problems** may

- Be moody and irritable, including sudden mood or personality changes
- Have low self-esteem
- Behave irresponsibly
- Withdraw socially
- Pull away from family, teachers, and other trusted adults
- Be argumentative and disruptive
- Break rules
- Decline in academic performance
- Have memory and learning problems
- Demonstrate poor judgment in situations
- Be late and absent from school
- Have problems with family and peer relationships, and a lack of empathy for others
- Engage in other risky activities
- Change former activities or friends
  - Demonstrate general lack of interest

### 6.10.3 Strategies to help children in school

- Provide information to the children regarding the negative impact of substance abuse
- Encourage the student to engage with substance-free peers and settings
- Define and enforce policies that establish school as a drug-free environment

## 6.11 Psychosis

### 6.11.1 Fahad's story

Fahad is a 17-year-old boy. His teachers have noticed in the last month that he has become very different and is *'no longer his usual self'*. He appears very withdrawn and refuses to eat any food in the classroom, saying that his classmates are trying to poison him because *'they are jealous'*. He has also been mumbling to himself and interacting with someone who is not there. He thinks that a friend wants to hurt him and that the friend has planted cameras everywhere in the classroom, which makes him uncomfortable at school. His parents have taken him to an Imam to perform 'Damm' with no improvement in his symptoms.



### 6.11.2 Symptoms - Fahad

- Have perceptions (visual, auditory, tactile) in the absence of external stimuli
  - Have thoughts or beliefs that are unusual and not shared in the individual's culture
  - Speak in a way that is difficult to follow

- Behave unpredictably (e.g. childish silliness, agitation, complete lack of motor or verbal activity)
- Respond or interact with things that are not there
- Feel like others want to hurt him/her or are plotting against them
- Withdraw from peers in the classroom
- Act unmotivated to participate in class and to complete homework

### 6.11.3 Strategies to help children in class

Instead of arguing about distorted thoughts, shift to academics (“*Okay, I heard your comments, and now we’ll move forward with math.*”)

## 6.12 Autism

### 6.12.1 Joseph’s story

Joseph is a 6 year-old boy. He has no friends at school and doesn’t seem interested in interacting with others. He spends a lot of time in class trying to line objects up and when excited he has a flapping hand movement. He is mostly non-verbal except for a few words he learnt recently and he doesn’t look at his teacher’s face. At times he gets upset and punches his face or bangs his head against the walls. In speaking to his mother the teacher learns that he has had these problems since his first year.

### 6.12.2 Symptoms - Joseph

- Have impaired social behavior (eye contact, reading facial expressions, etc.)
- Demonstrates communication and language difficulties
- Has a narrow range of interests and activities
- Has repetitive behaviors
- Usually, but not always, there is some degree of intellectual disability

In the case of such extreme socio-emotional problems, refer the child to specialist

**What did you learn in this chapter?**

- It is easier to overcome problems if identified at an earlier stage, which can prevent them from becoming severe.
- Such difficulties may get worse and convert into atypical difficulties. It can impact academic performance, social interactions and daily life activities of children.
- These children will need your specialized and individual attention.
- It should also be kept in mind that teachers do not have to determine whether a child has a mental disorder, nor to diagnose a child with a mental disorder.
- It is important to understand that there are a few situations when problems would be severe and you would not be able to deal with them on your own.
- In these circumstances it is important for you to refer the child to a specialist. i.e. symptoms are negatively impacting the child's functioning at home or at school, or when there is risk of harm towards self or others.
- Consult with a specialist for **severe mental disorder** such as psychosis.
- In order to deal with the atypical difficult behaviors of children in the classroom, you should continue using basic counseling skills along with the strategies taught in this chapter.
- **Management strategies for the child who appears anxious, worried or sad.**
  - Give them opportunities to express their feelings

- Encourage children to utilize relaxation techniques
- Allow the child to spend some time to ease first after coming to school
- Teachers make a peer support group for children
- Involve the child in pleasurable activities
- Model and practice positive self-talk
- Help the child to overcome fear and consider the probability of events
- Parents and teachers help the child to evaluate the evidence for their conclusions

- **Management strategies for the child with post trauma problems**

- Encourage children to utilize relaxation techniques
- Teachers should reassure the child that school is a predictable and safe place with normal routines
- Teachers should make a peer support group to help the child
- Teachers and parents should allow the students to deal with traumatic reminders at their own pace
- Teachers and parents should work with the child to identify 'signals' to be excused from the class if distressed
- Teachers and parents should work with the child to identify coping skills such as alternative activities

- **Management strategies for the child who is hyperactive, inattentive and disorganized**

- Preferential seating
- Give special attention to the child
- Form a support group
- Teachers should keep extra stationary in the class

- Give short breaks to the child during tasks
- Channel energy in positive way

- **Management strategies for children with conduct problems**

- Teachers and parents should model politeness and treat children with love
- Identify a teacher or a classmate who can help/support group
- Teachers and parents should acknowledge the student's frustration or disappointment when something doesn't go as they want, and encourage the child on his good behavior
- Teachers and parents should allow the child to correct mistakes or misdeeds
- Teachers and parents should help the child to care for others' feelings
- Teachers and parents should provide the child with a few appropriate choices

- **Management strategies for the child who lags behind his peers in studies**

- Teachers should invite the child to sit in front of the class and give special attention to him
- Teachers and parents should give clear and consistent instructions to the child
- Teachers and parents should encourage the child
- Teachers and parents should break down tasks into smaller tasks and give more time to complete tasks
- Teachers and parents should revise the lesson over and again with the child

---

## Chapter 7: Assessment in the School Mental Health Program

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### What will you learn in this chapter?

When will you complete an assessment?

Why is assessment so necessary?

Purpose of assessment (PSYCHLOPS Kids) and steps for its completion

#### 7.1 When will you complete the assessment?

During the school mental health programme, teachers will complete the assessment of children on a monthly basis to evaluate the improvement in them (Appendix A)

#### 7.2 Why do an assessment?

- This assessment is an opportunity to assess the improvement in children
- You will be given the opportunity to collect information regarding children's socio-emotional problems so that appropriate strategies can be employed for their wellbeing
- To find out the problems or worries of children
- To be aware of specific problems impacting their everyday life
- Assessment measure (appendix A) can be used for this purpose.

#### 7.3 How to do an assessment-

An ideal teacher always uses basic counseling skills. Make sure you use the skills described in chapter 2 (basic counseling skills) when doing an assessment.

#### 7.4 Some important points to consider in doing the assessment

- Use simple and clear language.
- Make sure you speak appropriately for the child's age, sex, culture and language.

- Be friendly, respectful and non-judgmental at all times.
- Respond sensitively to private and distressing information.

### 7.5 Steps to follow when completing an assessment (PSYCHLOPS Kids)

1. Introduce yourself.
2. Tell the child the reason for the assessment and what will happen.
3. Tell the child about confidentiality so that they can share their personal information with you comfortably.
4. The first question asked should be such that the child feels comfortable to respond, for example '*How do you feel nowadays?*'
5. You will ask about specific emotional problems of children.

### 7.6 Tell the child about confidentiality

Talking about confidentiality and keeping personal information private will support smooth conversation and building a relationship with the child. If they are assured that their personal information will be kept private then they can openly and comfortably discuss any matter.

However, tell them about certain specific situations in which information cannot be kept private and may need to be shared with appropriate professionals. For example if the child is believed to be at risk of ending their life or harming someone else, or they tell you about child abuse (physical or neglect) you will have to let someone know.

### 7.7 Beginning an assessment (PSYCHLOPS Kids)

Assessment includes identification of major problems of children:

- Teachers should identify any problems in which the child is facing most difficulties.
  - These may be problems which are affecting the child's performance.

- Do mention the time span in your questions e.g. '*from last month*' etc?

## 7.8 During-program PSYCHLOPS Kids

- Carry it out every month
- The first eight questions reflect the difficulties which the child has picked out at the beginning.
- Through question numbers 9 to 11, discover whether working with the child resulted in facing new troubles (from the beginning till the end)

### What did you learn in this chapter?

**During the school mental health programme, teachers will complete an assessment of children through 'PSYCHLOPS Kids' on a monthly basis to evaluate the improvement in them**

#### **Aims of the assessment:**

- This assessment is an opportunity to assess the improvement in children
- You will be given an opportunity to collect information regarding children's socio-emotional problems so that appropriate strategies can be employed for their wellbeing.
- To find out the problems or worries of children
- To be aware of specific problems impacting their everyday life.

**Make sure you use the basic counseling skills for teachers when doing an assessment**

# Part 3

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## Chapter 8: Teacher's wellness

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### What will you learn in this chapter?

What are the causes and symptoms of stress in teachers?

Why is it important for teachers to take care of themselves?

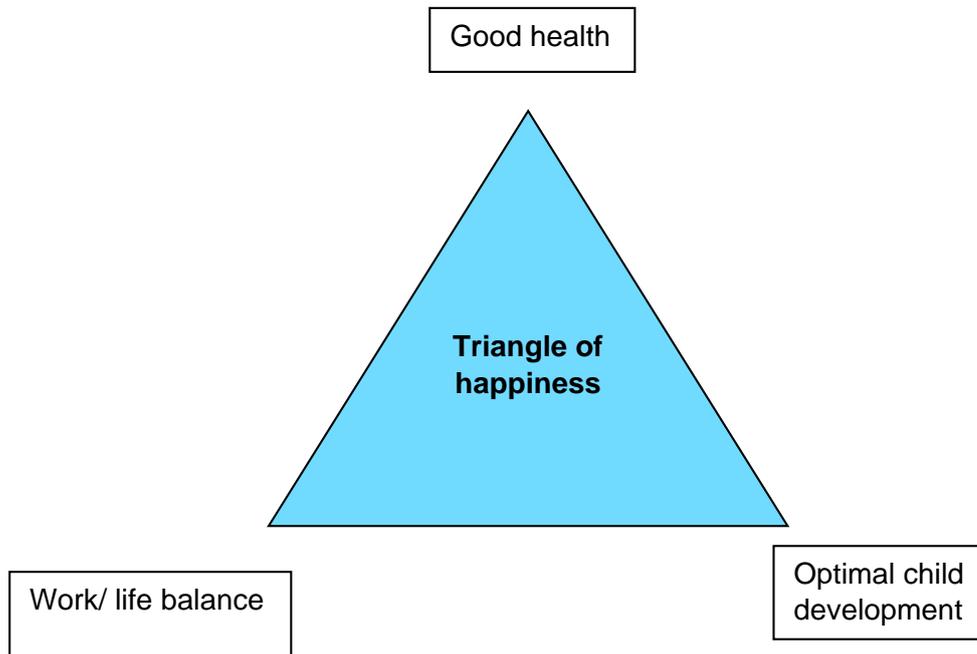
What strategies can teachers implement to take care of their health?



Teachers have a crucial role in education and character building of the nation. This is why it is imperative that you are happy and satisfied with the role that you are serving. Your own health is extremely important for yourself, for your students, and for your family. If you are satisfied and mentally at peace, only then will you be able to enjoy your life and help children with their education and developmental needs.

This is why we will specifically talk about teacher's wellness in this chapter. By taking care of your health, you can lead a balanced life and can serve your role in education and the character building of children more fully. This is what we term '*the triangle of happiness*'.

**Fig. 4 Triangle of Happiness**

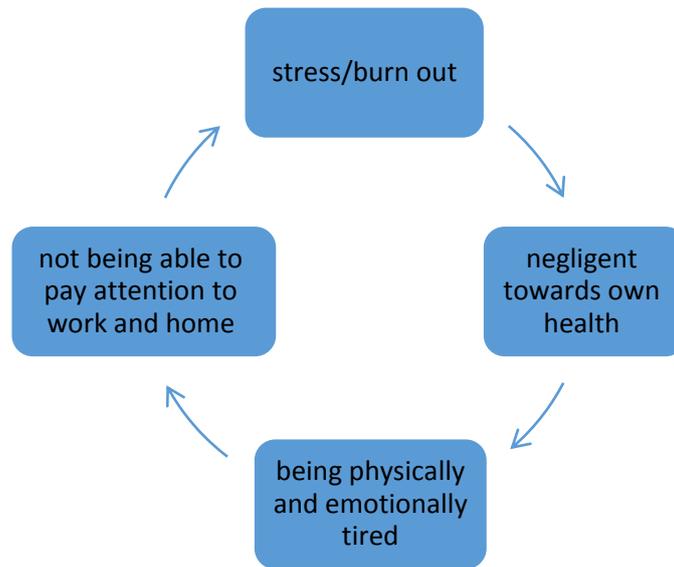


### 8.1 Why is it important to take care of your health?

While teaching is an important profession, it can also be challenging. Teaching is not merely a job like many other professions. Indeed, it is more like a responsibility which can build nations if served properly. From teaching discipline to educating the child and turning him into a productive individual in society, all are responsibilities carried on the teachers' shoulders. Such responsibilities however, can have an impact on the teacher's own wellness.

According to research, teachers who focus on their own wellness are more likely to stay in the teaching profession and less likely to 'burn out' (becoming very physically and emotionally tired after doing a difficult job for a long time). Such teachers are more satisfied, they make use of their full potential, and are better able cope with the challenges of everyday life. Those who don't take good care of their health are more prone being physically or mentally tired, are more likely to experience stress and other mental health issues, fail to do their job properly and retire at a younger age.

**Fig. 5 The vicious cycle of problems**



## 8.2 Some common reasons of burn out and stress among teachers

Teachers report several common sources of stress:

- Excessive burden of workload (extra duties, being in charge of more than one class due to lack of teachers, being in charge of additional tasks at work including documentation etc.)
- Strict governmental policies
- Lack of healthy relationships with colleagues
- Posting to a far flung area
- Large class sizes
- Behavioral problems in students and lack of training to tackle these problems
- Inadequate resources and poor physical space
- Bureaucracy
- Workload and paperwork
- High responsibility for others
- Perceived inadequate recognition or advancement
- Gap between pre-service training expectations and actual work experiences
- Absenteeism in the children
- Failure of parents to co-operate with the school or the teacher
- Other issues in life such as financial problems, family problems, etc.
- Sometimes teachers may have to work with children who have mental health related challenges. Working with such children can be even more stressful for the teacher.

### 8.3 Mr. Amin`s story

Mr. Amin is teaching 7th grade and has around 15 years teaching experience. He is well respected throughout the school because of his reverence and friendly relationships with colleagues. Recently, the principal of the school took two months off because he was going for pilgrimage. Since Mr. Amin was the senior teacher, he has been given additional responsibility during the absence of the principal. Now he has to teach his class and in addition, look after the administrative tasks of the school, including a lot of file work, meetings, and supervision of the other teachers. This makes it difficult for him to complete his tasks at school, requiring him to work from home as well. The majority of the students in Mr. Amin`s school come from far flung areas. This raises transport issues for the students due to which they are frequently absent from school. Their attendance is also an issue for Mr. Amin since the parents are not likely to co-operate in this matter either. These circumstances are negatively impacting on his own health. Now he feels tired all the time and is always worried about completing his tasks. He has started to get angry at little things which is affecting his personal relations with his family, and colleagues are also being affected.



As we have seen, excessive work, extra duties, and worrying about the attendance of the students has had an impact on the health of Mr. Amin. The symptoms of poor health that he is experiencing could be the symptoms of stress or burn out. For example:

### 8.4 Symptoms – Mr Amin

- Consistent sense of fatigue in the body
- Being worried or distraught all the time

- Being excessively strict with the children or other people, and getting extremely angry at their little mistakes.

### 8.5 Other symptoms of stress.

- Emotional numbing, feeling 'shut down'
- Loss of interest in pleasurable activities
- No time or energy for yourself
- Sense of cynicism or pessimism
- Increased illness or fatigue, aches and pains
- Increased absenteeism, 'sick days'
- Difficulty making decisions, or making poor decisions
- Inability to give proper attention to the children
- Being excessively anxious

These could be the few early symptoms which indicate a possibility of stress in teachers.

Almost all of us have to face problems every once in a while and we try to find ways to cope with them. But a lot of us find it hard to discuss such matters or ask for help under such circumstances as it is a common perception that talking about your mental health is a sign of weakness. If any of us have a headache, temperature, or any other healthcare concern, we are seldom shy in approaching a doctor for a cure, but how many of us are confident in asking for help when we are facing a problem or stress in our lives?

Trust that talking about your problems and seeking support to manage them is not a sign of weakness. Instead it shows that you are well aware of the changes happening in your life and you know how to manage your problems.

### 8.6 Taking better care of yourself

#### 8.6.1 Don't ignore early signs and symptoms of stress

The majority of us don't take our problems seriously unless it escalates to the extent where it starts to affect our everyday lives. While feeling tired or stressed during routine tasks is not a huge deal, if such symptoms persist for a longer period of time, then there is a risk of developing serious problems.

Therefore, the best way is that when you start to feel that you are unable to tackle as much pressure now as you used to, you are easily angered or tired, you don't feel like working anymore or there are thoughts in your mind which are constantly keeping you worried and preoccupied, you should take steps to deal with them in a timely fashion.

If you deal with such symptoms in good time, it is likely that such problems won't escalate and you can return to your peaceful and happy life.

### 8.6.2 Make time for yourself

What is your daily routine like?

Going to work in the morning, teaching the children, handling the rest of your work responsibilities; then coming home and taking on the family responsibilities, making time for the family, etc. Such activities eat up all of your time and you feel so tired that there is nothing else left for you to do but sleep. Throughout your routine tasks, are you able to find time for yourself? Have you noticed the changes occurring in you that we have been talking about?

Perhaps there are a handful of people who are able to find time for themselves in their daily routines. Research suggests that you would be able to deal better with stress if you spare a few minutes for yourself every day.

It is not necessary to spend a great deal of time on yourself. It is understandable that you have a lot of school and family related responsibilities, but it is also to be realized that you have a right to spend time on yourself also. Even sparing 10-15 minutes for yourself in the entire day, may help you to feel a lot better.

You can do whatever you like in this time, for example, watch your favourite TV show, read a book, talk to a friend. Having a cup of tea and a chat with your family, or even doing nothing at all - just remove all thoughts from your mind and have some peaceful time.

It is possible that these are all things that you want to do but are unable to find time due to your hectic routine. But it's okay, and it's not too late; you can still start doing all of these activities. Rest, relaxation and recreation are crucial to good mental health.

### 8.6.3 Take care of your health

Being a teacher, you should take as good care of your health as you do for the children in your school. Your role requires you to be active and energetic and you would only be able to do your work properly if you are healthy. In order to take good care of your health, all you need is a few fundamental changes in your life. For example, take regular meals on time and consume a balanced diet. It is common for many of us to not have a proper meal during the day, and make do with the market products such as biscuits and snacks which are not good for our health. For a healthy body, having three proper meals at regular intervals is a requirement or you can also divide your meals in small portions and take 5

of them on a daily basis. Remember, only if you are consuming the safe and healthy diet including meat, vegetables, fruits, etc. can you advise the children to do the same.

You should try to consume as much water as you can. Being busy with our hectic routines, quite often we forget to consume water which causes dehydration in our bodies. This is why we feel tired. For a healthy body, it is required to consume at least 8 glasses of water per day. Therefore, try to make water a priority for consumption instead of tea and coffee.

Appropriate rest and sleep is also as important for a healthy body as a balanced diet. Therefore, you should fix a time for yourself to sleep so that are fresh when you wake up in the morning.



### 8.6.4 Include physical activities in your daily routine

How many tasks of your daily routine are such that they are done while sitting down? If you think about it, to what extent would you say physical activity is included in your daily routine?

Perhaps the majority of your daily tasks are done while sitting or standing still, and even after returning home there are very few activities which include physical exertion for you in your daily life.

For good health, it is imperative to work-out for at least 30 minutes for 5 days each week. This is what keeps your body active and your mind peaceful. It is not necessary that you find a dedicated time every day for taking a walk or working out. If you are unable to find dedicated time, you can use alternatives. For example, if your school is located nearby, then you should try to walk to it instead of taking a ride. If there is a task that you have to do at home, for instance, cooking food, even that provides an opportunity for your body to be active, or you could take a round of the playground at school

during break time. This way, you can choose physical activity at your own convenience.

### 8.6.5 Adopt healthy work habits

In order to be happy and satisfied with your work over a long period of time, it is important that you adopt healthy habits for work. Don't take your work as a burden, rather, make it as engaging and entertaining as you can.

- Make a plan and order the activities for each day. Try your best to make such a plan that is do-able for yourself so that you can feel satisfied at the end of the day that you have accomplished what was planned.
- Try to divide your work into smaller parts so that you'll find it easier to accomplish them.
- During work, take a short break if you feel the need for it. For example, talking to a colleague for 5 to 10 minutes, taking a round of the school ground, or just sitting idle and enjoying a cup of tea or drink of water.
- Try your best to complete your work during the school day so that you can spend time with your family once you are home.
- Sometimes, it is also important to take some time out of your routine as well. Try to avail the holidays allotted by the government so that you will be fresh and able to focus on your work better.

### 8.6.6 Manage your stress

If you are feeling stressed or worried, then taking deep slow breaths is a tried and tested strategy to cope with it. You don't even have to ask anyone for help or create spare time to do it. All you have to do is take a 5 minute break while working at the school or at home to do this activity.

Taking deep slow breaths is different from routine breathing. You must have noticed that when we are scared, worried, or stressed, our heart beat and breathing rate rises. This is why it is suggested to take deep slow breathes to cope with stress. This breathing technique sends a signal to our brain to be peaceful and eventually we start to feel better. With consistent use of this strategy, you can effectively cope with excessive stress and burden.

### 8.6.7 Slow breath method

- Relax your body. Move your head right and left. Move your arms and legs.
- Put one of your hands on the belly, and the other one at the upper part of the chest.
- Now take a slow deep in-breathe through your nose.
- Use the hand on your belly to feel that air is going in as you take this slow deep breath, and then it is moving out as you begin to exhale.
- Inhale for three seconds and then exhale for three seconds. For example, you can count to 3 while inhaling and exhaling.
- While it may be difficult for you to do it in the beginning, you should still try to take as slow and deep breaths as possible. Using this strategy regularly for 5 minutes can help a great deal in coping with stress.

### 8.6.8 Support system

It is a saying that sadness is halved and happiness is doubled when shared.

Whatever you are feeling, talking to someone about it is a great strategy. Like we discussed earlier that talking about your mental health is not a sign of weakness at all. More often than not, there are such thoughts in your mind about which you would start to feel better if only you shared them with someone.

It is a good habit to discuss your everyday routine and problems with someone. It is possible that you'd find it difficult to adopt this habit in the beginning. It is also likely that the person you share your concerns with won't be able to give you a solution, but eventually, you will realize that it makes you feel better just to talk about them to someone you trust.

Take a moment and think of the first name that you deem appropriate to share your everyday routine and challenges with.

We all have one such person on our lives with whom we can talk about everything, be it one of our family members or perhaps a close friend. The feeling of being supported, that there is someone to whom we can share our concerns is very important.

You spend half of your day at school where you have to face different problems. Under such circumstances, if a support system is available at school, it can help a great deal. It is likely that teachers talk to each other about problems and share their concerns already, but a formal support group can also be devised for this purpose.

Teachers can meet fortnightly or monthly in this support group, to share with each other the challenges that they are facing. In the group, each teacher can talk about the

problems that he is facing in class or at school, and everyone can work together to find a solution for it.

It should be kept in mind that whatever problems or challenges the teachers share in this support group are to be considered highly confidential and are not to be shared with anyone else outside the group. If an opinion or advice is required regarding the matter then it can be discussed, however even in that case, you should be careful not to divulge the name of the individual.

### **8.6.9 Take care of the people around you**

Along with taking good care of your own health, it is also important to take care of the people around you. Where we work and meet with each other should be a place where you look forward to going.

If you feel that one of your colleagues is under stress, try to help him out. Try to discuss the matter with him, or even if you don't talk about his problem, try to spend some time with him, for example have lunch or tea with him; that can make someone feel supported.

Such strategies will make your work place happier and satisfactory not only for you but also for your colleagues.

These are a few of the simple strategies you can use to take good care of your health and can support you in becoming a most competent teacher.

**What did you learn in this chapter?**

- Self-care is extremely important for yourself, for your students, and for your family.
- If you are satisfied and mentally at peace, only then would you be able to enjoy your life and help the children with their education and developmental needs.

**Strategies for self-care**

- Don't ignore early signs and symptoms of stress
- Make time for yourself
- Take care of your health
- Include physical activities in your daily routine
- Adopt healthy work habits
- Manage your stress
- Support system
- Take care of the people around you

## References

**Centre for Research on the Wider Benefits of Learning (2008). *Parenting Behaviours and Children's Development from Infancy to Early Childhood: Changes, Continuities, and Contributions* (Wider Benefits of Learning Research Report)**

Gutman, L.M. and Feinstein, L. 2008, *Children's Well-Being in Primary School: Pupil and School Effects*, Wider Benefits of Learning Research Report No.25, Centre for Research on the Wider Benefits of Learning, London.

Hattie, J. (2008) *Visible Learning: A Synthesis of Over 800 Meta-Analyses Relating to Achievement*. Routledge.

Rutter, M. (1991) Pathways from childhood to adult life: The role of schooling. *Pastoral care in education*, 9, 3, 3-10.

Teachers College Press. Hanko, G. (1995) (3rd Edition) *Special Needs in Ordinary Classrooms. From Staff Support to Staff Development*. London: David Fulton Publishers.

Zins, J. E., Weissberg, R. P., Wang, M. C., & Walberg, H. J. (2004). *Building academic success on social and emotional learning: What does the research say?* New York

WHO (1997) *Lifeskills Education for Children and Adolescents*. Reference number: WHO-MNH-PSF-93.7A.Rev.2

<http://www.cdc.gov/healthyyouth/physicalactivity/cspap.htm>

[www.stopbullying.gov](http://www.stopbullying.gov)

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Figure 2. Domains of Child Development

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### Tables

Table 1. Basic Counselling Skills for Teachers

## Appendices

## **Appendix A**

### **PSYCHLOPS Kids – Pre, During and Post Intervention**

### Adapted PSYCHLOPS Kids - Pre intervention

We want to know how are you feeling these days and I will ask you a few questions about it. Please respond to each question. There are no right or wrong answers. You can ask if you find any difficulty in understanding a questions.

**What is bothering you a lot these days?**

(please write in the box below or draw if you want to.

Due to this problem, how much of your tasks have been affected in the last week (for example playing with friends, academics etc). Please mark a face given below.



0	1	2	3	4
Not at all difficult	A little difficult	Moderatly difficult	Very difficult	Extremely difficult

**How long have you been affected by this problem? (Tick one box below).**

## School Mental Health Program Teacher's Manual

Just this week      The last six weeks      The last year  
Longer than that

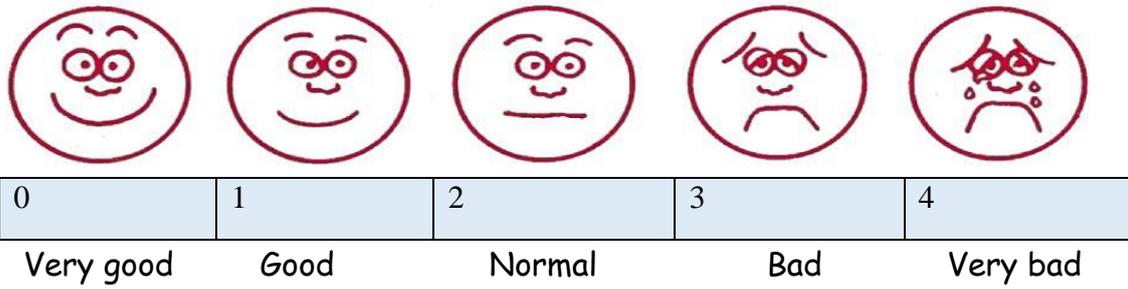
**Are there any tasks which you are not able to perform due to this problem? (Please write in the box below or draw it if you want to)**

**In the last week how difficult it was for you to complete the task due to this problem. (Please mark on one of the faces below)**



0	1	2	3	4
Not at all difficult	A little difficult	Moderate difficulty	Very difficult	Extremely difficult

**How would you feel if a teacher or any other person helped you in managing your problem? Please choose a face given below to show how would you feel.**



**In your opinion what are the three things which can be done to manage your problem?**

1.
2.
3.

Please use this space for any other comments/drawing/doodles

**Thank you!**

### Adapted PSYCHLOPS Kids - During intervention

You completed a questionnaire in the beginning of the intervention. This is also a part of that questionnaire. Through this evaluation we will get to know if anything has changed in your life since taking the intervention. Please answer the following questions. There are no right or wrong answers. You can ask if you find any questions difficult to understand.

Last time you identified this as your main problem.

Due to this problem, how much of your tasks have been affected in the last week (for example playing with friends, academics etc). Please mark a face given below.



0	1	2	3	4
Not at all	A little bit	To some extent	To a large extent	A lot

[

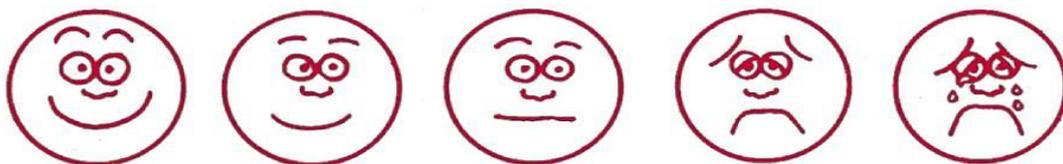
Last time you told us that due to this problem you find this task extremely difficult to do.

In the last week how difficult it was for you to complete the task due to this problem. (Please mark on one of the options given below)



0	1	2	3	4
Not at all difficult	A little difficult	Moderately difficult	Very difficult	Extremely difficult

In the last week how did you feel due to this problem? Please mark one of the options below.



If you feel like you have some other problems these

0	1	2	3	4
Very good	Good	Normal	Bad	Very bad

days, kindly tell us what is bothering you. If this is not the case, please leave the space blank. (Or if you want to you can draw a picture).

Due to this problem, how much have your tasks been effected in the last week (for example playing with friends, academics etc.) Please mark an option below.



0	1	2	3	4
Not at all	A little bit	To some extent	To a large extent	A lot

How do you feel now as compared to when you started taking this intervention? Please mark an option given below.



0	1	2	3	4
Very good	Better	Same as before	Bad	Very bad

Thank you!

## Adapted PSYCHLOPS Kids - Post-intervention

### A Questionnaire about You and How You Are Feeling

You filled in a questionnaire before you started the intervention. This is the follow up questionnaire that will help us see if anything has changed since you started. Please answer all the questions below and remember there are no right or wrong answers.

This is what you said you were most worried about last time we asked.

How much has it affected you over the last week? Please tick one.



0

Not at all



1



2



3



4

Very much

This is what you said was hard to do because of the problem.

How hard has it been to do this thing over the last week? Please tick one box.

Not at all hard

Very hard



How have you felt this last week?



0

1

2

3

4

Very good

Very bad

How do you feel about the intervention now? Please circle.



**Questions about you in the intervention sessions**

1,What did you like most about the intervention?

2.Was there anything you didn't like about the intervention?

**Compared to where you started the intervention, how do you feel now?**

**Please tick one box below.**

Much better



Much worse





## School Mental Health Program Teacher's Manual

PSYCHLOPS Kids consists of three domains (Problems, Functioning and Wellbeing) which are scored. These are Q2 + Q4 + Q5. The maximum score for each question is 4 (scored 0-4), therefore total score range is 0–12. Other questions provide useful qualitative information but do not contribute to the change score.

**Total PSYCHLOPS Kids post-therapy score:** \_\_\_\_\_

The change score is the difference between the total pre-intervention score and the total post-intervention score. The Effect Size can only be calculated by using a software package such as Excel to calculate a Standard Deviation.

*(mean pre-intervention score - mean post-intervention score )*

*The Effect Size = \_\_\_\_\_ Standard  
Deviation of the pre-intervention score.*

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## Appendix B

### Risk and protective factors for mental illness

<b>RISK FACTORS</b>	<b>PROTECTIVE FACTORS</b>
<b>INDIVIDUAL</b>	
<b>Genetic factors</b>	Good physical health and Development
<b>HIV Infection</b>	
<b>Other illnesses</b>	
<b>Malnutrition</b>	Adequate nutrition
<b>Substance abuse</b>	No abuse of substances
<b>Poor problem solving abilities</b>	High level of problem solving ability
<b>Learning disorders</b>	Strong learning abilities
<b>Poor School Performance</b>	Good school performance
<b>Strong relationships</b>	Poor relationships
<b>Maladaptive personality traits/ Difficult temperament</b>	Well-adjusted personality
<b>Sexual, physical and emotional abuse/ neglect</b>	No history of abuse
<b>Poor ability to learn from experiences</b>	Ability to learn from experiences
<b>Intellectual Disability</b>	Good intellectual functioning
<b>Poor self-esteem</b>	Good self-esteem
<b>Poor social skills</b>	Strong social skills
<b>Irresponsible attitude towards sexual activity</b>	Responsible attitude towards sexual Activity
<b>FAMILY</b>	
<b>Poor maternal health during pregnancy and delivery</b>	Good maternal health
<b>Inconsistent care-giving</b>	Consistent care-giving
<b>Family conflict</b>	Supportive family relationships
<b>Poor family discipline</b>	Good family discipline
<b>Poor family management</b>	High level of maternal education
<b>Death of a family member</b>	No losses in the family
<b>Family detachment</b>	Family attachment

<b>Lack of opportunities for positive involvement in the family</b>	Opportunities for positive involvement in the family
<b>Poor parental role modeling</b>	Good parental role modeling
<b>No incentive for involvement in family</b>	Rewards for involvement in family
<b>SCHOOL</b>	
<b>Failure of school to provide appropriate environment to support wellbeing, attendance and learning</b>	Caring, supportive, protective and stimulating school environment, promoting initiative and creativity
<b>Academic failure/school dropout</b>	Opportunities for involvement in school life
<b>Inadequate or inappropriate provision of education</b>	Positive reinforcement from academic achievements
<b>Bullying</b>	Positive relationship with peers
<b>Failure of school to recognize psycho-social needs of children facing difficulties</b>	Good identification and early intervention for students facing Difficulties
<b>Poor teacher-student relationships</b>	Positive, nurturing relationship with teacher
<b>Disengagement with school</b>	Identity with school or need for educational attainment
<b>COMMUNITY</b>	
<b>Transitions (e.g. urbanization, migration)</b>	Connectedness to community and community organizations
<b>Community disorganization</b>	Organized, supportive communities
<b>Poverty</b>	Adequate financial resources
<b>Discrimination and marginalization</b>	Inclusiveness and embracement of Diversity
<b>Exposure to violence</b>	Safe neighborhoods
<b>Absence of role models</b>	Positive role models
<b>Lack of recreational opportunities</b>	Opportunities for leisure

## Appendix C

### Bullying prevention and intervention in schools

(from [www.stopbullying.gov](http://www.stopbullying.gov))

#### Manage classrooms to prevent bullying

Teachers can consider these ways to promote respect, positive relationships, and order, to help prevent bullying in the classroom

Create ground rules. Develop rules with students so they set their own climate of respect and responsibility.

Use positive terms, like what to do, rather than what not to do.

Support and reinforce school-wide rules.

Be a role model and follow the rules yourself. Show students respect and encourage them to be successful.

Make expectations clear. Keep your requests simple, direct, and specific.

Reward good behavior. Try to affirm good behavior four to five times for every one criticism of bad behavior.

Use one-on-one feedback, and do not publicly reprimand.

Help students correct their behaviors. Help them understand violating the rules results by explaining consequences: *“I know you can stop [negative action] and go back to [positive action]. If you choose to continue, then [consequence].”*

#### Classroom Meetings

Classroom meetings provide a forum for students to talk about school-related issues beyond academics. These meetings can help teachers stay informed about what is going on at school and help students feel safe and supported.

The meetings work best in classrooms where a culture of respect is already established. Classroom meetings are typically short and held at regular scheduled times. They can be held in a student’s main classroom, home room, or advisory period.

Establish ground rules. Children should feel free to discuss issues without fear. Classroom meetings are not a time to discuss individual conflicts or gossip about others.

Reinforce existing classroom rules.

Start the conversation. Focus on specific topics, such as bullying or respectful behaviors.

Meetings can identify and address problems affecting the group as a whole.

Stories should be broad and lead to solutions that build trust and respect between students.

Use open-ended questions or prompts such as: *'How are we getting on as a group?'* *'How are we performing in terms of how we treat one another?'*

Share an example of a student who helped someone at school this week.

Without names, share an example of someone who made another student feel bad.

What did students nearby do? What did you do? Did you want to do something different—why or why not?

If you could describe the perfect response to the situation what would it be? How hard or easy would it be to do that? Why?

How can adults help?

End the meeting with a reminder that it is everyone's job to make school a positive place to learn. Encourage young people to talk to teachers or other trusted adults if they see bullying or are worried about how someone is being treated.

Follow-up when necessary. Monitor student body language and reactions. If a topic seems to be affecting a student, follow-up with him or her. Know what resources are available to support students affected by bullying.

### **Stop bullying on the spot**

When adults respond quickly and consistently to bullying behavior they send the message that it is not acceptable. Research shows that this can stop bullying behavior over time. There are simple steps adults can take to stop bullying on the spot and keep kids safe.

Do:

Intervene immediately. It is ok to get another adult to help.

Separate the children involved.

Make sure everyone is safe.

Meet any immediate medical or mental health needs.

Stay calm. Reassure the young people involved, including bystanders.

Model respectful behavior when you intervene.

Avoid these common mistakes:

Don't ignore it. Don't think young people can work it out without adult help.

Don't immediately try to sort out the facts.

Don't force other young people to say publicly what they saw.

Don't question the children involved in front of other kids.

Don't talk to the young people involved together, only separately.

Don't make the young people involved apologize or patch up relationships on the spot.

### Support students involved

All students involved in bullying—whether they are bullied, bully others, or see bullying can be affected. It is important to support all involved to make sure the bullying doesn't continue and effects can be minimized.

### Supporting young people who are bullied

**Listen and focus on the child.** Learn what's been going on and show you want to help.

**Assure the child that the bullying is not their fault.**

**Know that children who are bullied may struggle to talk about it.**

Consider referring them to a school counselor, psychologist, or other mental health service.

**Give advice about what to do.** This may involve role-playing and thinking through how the child might react if the bullying occurs again.

**Work together to resolve the situation and protect the bullied child.** The child, parents, and school or organization may all have valuable input. It may help to:

Ask the child being bullied what can be done to make him or her feel safe.

Remember that changes to routine should be minimized. He or she is not at fault and should not be singled out. For example, consider rearranging the classroom or bus seating plans for everyone. If bigger moves are necessary, such as switching classrooms or bus routes, the child who is bullied should not be forced to change.

Develop a game plan. Maintain open communication between schools, organizations, and parents. Discuss the steps that are taken and the limitations around what can be done based on policies and laws. Remember, the law does not allow school personnel to discuss discipline, consequences, or services given to other children.

**Be persistent.** Bullying may not end overnight. Commit to making it stop and consistently support the bullied child.

### **Avoid these mistakes:**

Never tell the child to ignore the bullying.

Do not blame the child for being bullied. Even if he or she provoked the bullying, no one deserves to be bullied.

Do not tell the child to physically fight back against the child who is bullying. It could get the child hurt, suspended or expelled.

Parents should resist the urge to contact the other parents involved. It may make matters worse. School or other officials can act as mediators between parents.

**Follow-up.** Show a commitment to making bullying stop. Because bullying is behavior that repeats or has the potential to be repeated, it takes consistent effort to ensure that it stops.

## Address bullying behavior

Parents, school staff, and organizations all have a role to play.

**Make sure the child knows what the problem behavior is.** Young people who bully must learn that their behavior is wrong and harms others.

**Show children that bullying is taken seriously.** Calmly tell the child that bullying will not be tolerated. Model respectful behavior when addressing the problem.

**Work with the child to understand some of the reasons he or she bullied.**

For example:

Sometimes children bully to fit in. These young people can benefit from participating in positive activities. Involvement in sports and clubs can enable them to take leadership roles and make friends without feeling the need to bully.

Other times children act out because of something else—issues at home, abuse or stress may be going on in their lives. They also may have been bullied. These young people may be in need of additional support, such as mental health services.

### Use consequences to teach.

Consequences that involve learning or building empathy can help prevent future bullying. School staff should remember to follow the guidelines in their student code of conduct and other policies in developing consequences and assigning discipline. For example, the child who bullied can:

Lead a class discussion about how to be a good friend.

Write a story about the effects of bullying or benefits of teamwork.

Role-play a scenario or make a presentation about the importance of respecting others, the negative effects of gossip, or how to cooperate.

Do a project about civil rights and bullying.

Read a book about bullying.

Make posters for the school about cyberbullying and being smart online.

**Involve the children who bullied in making amends or repairing the situation.**

The goal is to help them see how their actions affect others. For example, the child can:

Write a letter apologizing to the student who was bullied.

Do a good deed for the person who was bullied or for others in your community.

Clean up, repair, or pay for any property they damaged.

**Avoid strategies that don't work or have negative consequences.**

Zero tolerance or 'three strikes, you're out' strategies don't work. Suspending or expelling students who bully does not reduce bullying behavior. Students and teachers may be less likely to report and address bullying if suspension or expulsion is the consequence.

Conflict resolution and peer mediation don't work for bullying. Bullying is not a conflict between people of equal power who share equal blame. Facing those who have bullied may further upset children who have been bullied.

Group treatment for students who bully doesn't work. Group members tend to reinforce bullying behavior in each other.

**Follow-up.** After the bullying issue is resolved, continue finding ways to help the child who bullied to understand how what they do affects other people. For example, praise acts of kindness or talk about what it means to be a good friend.

From [www.Stopbullying.gov](http://www.Stopbullying.gov). Accessed July 28, 2016.

## Appendix D

### Examples of school intervention programs from the Eastern Mediterranean Region

Very few school interventions from the EMR have been reported in the literature.

However, readers are referred to the review by Fazel and colleagues (Fazel et al, 2014) on school interventions from other LMIC. Those reported from the EMR were mostly in war related trauma settings, so the generalizability of the results is questionable. Below are some studies conducted in the EMR.

#### **1- Intervention Effectiveness Among War-Affected Children: A Cluster Randomized Controlled Trial on Improving Mental Health (Quota et al, 2012)**

**Location:** Gaza, Palestine

**Intervention:** Children in school classes were randomized into intervention ( $n = 242$ ) and waitlist control ( $n = 240$ ). The intervention group participated in 16 sessions of teaching recovery techniques (TRT) and the controls received normal school-provided support. Data on Posttraumatic Stress Symptoms (PTSS), depressive symptoms, and psychological distress were collected at baseline (T1), post-intervention (T2), and 6-month follow-up (T3).

**Main Findings:** At T2, the intervention significantly reduced the proportion of clinical PTSS among boys. In girls it reduced the symptom level and proportion of PTSS in girls who had a low level of peri-traumatic dissociation.

#### **2- Effectiveness of School-Based Intervention in Enhancing Mental Health and Social Functioning Among War-Affected Children (Peltonen et al, 2012).**

**Location:** Gaza, Palestine

**Intervention:** 225 Palestinian children participated and were divided into the intervention group ( $n = 141$ ) and a control group ( $n = 84$ ). A school mediation

intervention (SMI) aimed at improving social functioning through methods of problem

solving, conflict resolution, and dialogue skills and at enhancing mental health through caring for peers and preventing disruptive and aggressive behavior was conducted. Participants reported symptoms of posttraumatic stress disorder (PTSD), depression (CDI), psychological distress (SDQ), and quality of friendship, pro-social behavior, and aggressiveness at baseline at the beginning of school year (T1) and at post-intervention 8 months later (T2).

**Main Findings:** Participating in SMI did not decrease symptoms or increase friendship quality and pro-social and nonaggressive behavior. However, SMI was effective only in limiting the deterioration of friendships and pro-social behavior across the intervention period. Authors noted that the findings may be partly explained by severe military violence during the academic year under inspection.

### **3- Group crisis intervention for children during ongoing war conflict (Thabet et al, 2005).**

**Location:** Gaza, Palestine

**Intervention:** Children with moderate to severe posttraumatic stress reactions were allocated to group intervention (N = 47) encouraging expression of experiences and emotions through storytelling, drawing, free play and role-play; education about symptoms (N = 22); or no intervention (N = 42). Children completed the CPTSD-RI and the CDI pre- and post-intervention.

**Main Findings:** No significant impact of the group intervention was established on children's posttraumatic or depressive symptoms. The authors suggested that continuing exposure to trauma and the non-active nature of the intervention were behind these findings.

### **4- Effectiveness and specificity of a classroom-based group intervention in children and adolescents exposed to war in Lebanon (Karam et al, 2008)**

**Location:** South Lebanon

**Interventions:** All students (n=2500) from six villages, most heavily exposed to war, received a classroom-based intervention delivered by teachers, consisting of cognitive behavioral and stress inoculation training strategies. A random sample of treated students (n=101) and a matched control group (n=93) were assessed one month postwar and one year later. Mental disorders and psychosocial stressors were assessed using the Diagnostic Interview for Children and Adolescents - Revised with children and parents. War exposure was measured using the War Events Questionnaire. The prevalence of major

depressive disorder (MDD), separation anxiety disorder (SAD) and post-traumatic stress disorder (PTSD) was examined pre-war, one month post-war (pre-intervention), and one year post-war.

**Main Findings:** The rates of disorders peaked one month post-war and decreased over one year. There was no significant effect of the intervention on the rates of MDD, SAD or PTSD. Post-war MDD, SAD and PTSD were associated with pre-war SAD and PTSD, family violence parameters, financial problems and witnessing war events.

## Appendix E

### Screening tools that can be used at schools

From [www.schoolpsychiatry.org](http://www.schoolpsychiatry.org)

Massachusetts General Hospital School Psychiatry Program

Table of Checklists for Preliminary Mental Health Screening	For Ages (Years)	Who Completes Checklist: Number of Items	Time to Complete (Minutes)	View Free Online?
Child Behavior Checklists (CBCL)	1.5- 18	Parent, Teacher: 118 Student: 112 Clinician: 96-99	15-20	
Behavioral Assessment System for Children, 2nd Ed. (BASC-2)	2-21 8-21	Parent : 134-160 Teacher: 100-139 Student: 139-185	Parent, Teacher: 10-20 Student: 30	
Child/Adolescent Psychiatry Screen (CAPS)	3-21	Parent: 85	15-20	YES
Connors 3	3-17	Parent: 49 Teacher: 28	30	
Home Situations Questionnaire (HSQ)	4-11	Parent: 16	5	YES
School Situations Questionnaire (SSQ)	4-11	Teacher: 12	5	YES
Pediatric Symptom Checklist (PSC)	6-16	Parent: 35	5-10	YES
SNAP-IV-C Rating Scale-Revised	6-18	Parent, Teacher: 90	10	YES

Beck Youth Inventories of Emotional and Social Impairment (BYI)	7-14	Student: 5 self-reports, 20 each	5-10 per inventory	
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\*\*\*\* Please note that the CBCL and Connors are available in Arabic.

## Appendix F

### Resources

Please note the WHO does not endorse any of these resources and they are available here for the reader's reference:

#### Regional

1. Teacher's Manual. Institute for Development, Research, Advocacy and Applied Care (IDRAAC). Beirut, Lebanon (2012)
2. Minhas, F. et al. Training Manual on Mental Health for School Teachers. Institute of Psychiatry, Pakistan (2008).
3. [www.mawared.org](http://www.mawared.org)
4. Regional Example of a school mental health program: Report: School mental health project in Somalia. The Arab Journal of Psychiatry (2013) Vol. 24 No. 1 Page (46 - 51)

#### International

1. Massachusetts General Hospital School Psychiatry Program.  
[www.schoolpsychiatry.org](http://www.schoolpsychiatry.org)
2. University of Maryland technical resource center for school mental health.  
<http://csmh.umaryland.edu/Resources/ClinicianTools/index.html>.
3. UCLA School Mental Health website: <http://smhp.psych.ucla.edu>
4. [www.schoolmentalhealth.org](http://www.schoolmentalhealth.org)

5. Child Mind Institute.

[http://support.childmind.org/site/PageNavigator/Events/2012\\_SUfK\\_Topics2\\_APA.html](http://support.childmind.org/site/PageNavigator/Events/2012_SUfK_Topics2_APA.html)

6. Stopbullying.gov

7. Embry D and Biglan A. Evidence-Based Kernels: Fundamental Units of Behavioral Influence.

8. <http://www.clemson.edu/olweus/Training%20Materials/Section%2004-->

[SchoolWide%20Elements/Fundamental%20Units%20of%20Behavioral%20Influence\\_Embry\\_Biglan%20Tab%204%20Doc%207.pdf](http://www.clemson.edu/olweus/Training%20Materials/Section%2004--SchoolWide%20Elements/Fundamental%20Units%20of%20Behavioral%20Influence_Embry_Biglan%20Tab%204%20Doc%207.pdf)

### **Training Manual**

Weare, K. and Gray, G. PROMOTING MENTAL AND EMOTIONAL HEALTH IN THE EUROPEAN NETWORK OF HEALTH PROMOTING SCHOOLS. A Training Manual for Teachers and Others Working with Young People (1995).

### **Books**

1. Patel, V., Aronson, L., Divan, G (2013). A School Counsellor Casebook. New Delhi. Byword Books Ltd.

2. Atkinson, M. and Hornby G. Handbook of School Mental Health. Routledge (2002).

3. Weist, M.D.; Lever, N.A.; Bradshaw, C.P.; Owens, J.S. Handbook of School Mental Health. 2nd ed. 2014.

### **Videos**

1. <https://www.youtube.com/watch?v=P8QaLGj0mWo>

2. <https://www.youtube.com/watch?v=mjnupvbpHY8>



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