



School Mental Health Training



**World Health
Organization**

REGIONAL OFFICE FOR THE **Eastern Mediterranean**

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Lecture 9

Strategies to address behavioural manifestations of common mental health problems 2





Learning objectives

Behavioural manifestations and interventions for



**depression
and sadness**



**suicidal
behaviour**



**hyperactivity,
impulsivity and
inattention**



Strategies to address behaviours that may manifest in the classroom

Strategies are organized into three categories

Tier 1 strategies

address **mild** problems, are simple to implement and can benefit all students in the classroom

Tier 2 strategies

address **moderate** problems and require specific activities tailored to the child with problems

Tier 3 strategies

address **severe** problems, require specific activities tailored to the child with problems, and may necessitate the involvement of additional teaching staff



Universal strategies for helping children with emotional difficulties

Empathic listening and taking a supportive stance

Modelling positive mental health strategies such as relaxation, mindfulness and managing stress

Teach students to tighten and loosen their fingers

Teach students to breathe in slowly and deeply through their nose, hold as they count to five, and slowly exhale

Help students challenge negative thoughts and problem solve

Provide academic support/accommodations to help them during times of stress

Depression or sadness

Students with depression or sadness problems may


- Cry easily, look sad, feel alone or isolated
- Appear anxious or afraid
- Act angrily or irritably
- Demonstrate marked changes in school behaviours
- Find it harder to stay on task, lose concentration
- Be frequently absent from school
- Experience change in academic performance
- Lose motivation





Depression or sadness


Students with depression or sadness problems may

- Abandon favorite hobbies or sports, lose interest in being with peers, and be withdrawn
 - Change their eating habits and sleeping habits
 - Be at increased risk of self-injury, suicidal thoughts and attempts which means every comment should be taken seriously and brought to the immediate attention of the child's parent, mental health specialist, and/or school nurse
 - Be restless or slowed down
 - Misuse drugs and alcohol
 - Struggle with changes in feeling, thinking and perception
 - Express inappropriate guilt
 - Express feelings of not being good enough, worthlessness, failure
 - Speak in a monotonous or monosyllabic manner
 - Express hopelessness
 - Be irritable, e.g. snapping at people for no apparent reason
 - Eat/sleep too much or too little
- 



Mood stability

Students with mood stability problems may

- Show fluctuations in mood, energy and motivation
 - Alternate between fearfulness and recklessness and often appear angry, irritable and/or frustrated
 - Experience episodes of overwhelming emotion such as sadness, embarrassment, elation or rage
 - Have difficulty concentrating and remembering assignments, understanding assignments with complex directions, or reading and comprehending long written passages of text
 - Demonstrate poor social skills and have difficulty getting along with peers
 - **Younger children** frequently exhibit rapid mood swings many times within a day and are more likely to be irritable and prone to destructive tantrums than be happy or elated
 - **Older adolescents** show similar patterns of mood instability as adults, with changes from high to lows, involving high intensity of mood
- 



Case 4: Yasmine, a 10-year-old girl

Yasmine's teachers have noticed she has appeared sad for the last three months.

She frequently cries in class and appears excessively emotional.

She seems distracted and unable to focus even on simple tasks. She no longer feels motivated to complete her work or engage in classroom discussions and looks like she has lost a lot of weight.

At home, Yasmine's parents have noticed that she is irritable and quickly triggered by her sister. She complains of being very tired and unable to focus and of lacking the motivation to do almost anything.





Questions to consider ?


What strategies could be implemented **by the teacher** to support **Yasmine**?

What strategies could be implemented **by parents** to support **Yasmine**?

What strategies could be implemented **by peers** to support **Yasmine**?

Who else could support **Yasmine** and how?


When would you refer **Yasmine** to a **specialist**?



Troubling behaviour
you might see in
the classroom

Intervention

T=Teacher
P=Parent
F=Friends



Negative mood

- | | |
|--|-------|
| Check in with the student to quantify mood (on a 10 point-scale with 10 being happy), and identify pleasurable activities to engage in (take a walk, listen to music, exercise, seek out a positive peer) | T,P,F |
| Identify activities or class projects where the student can work with supportive peers | T,P |
| Help the student evaluate the evidence surrounding negative thoughts | T,P |
| Help students evaluate the evidence for their conclusions ("I'm no good at maths." "Hmmm....what have your math grades been for the past week? All good except today? Wonder why you had one hard day and all the others went well?" | T,P |
| Model and practice positive self-talk ("I can do this.") "Even though I missed the last problem, I can get the next one correct" | T,P,F |
| Allow the student to do alternative tasks or to be in other parts of the room if weepy or sad | T,P |
| Have the student start with familiar, previously successful tasks to get going and then move to new and/or more challenging tasks | TPF |
| Identify study partners who can support and assist with assignments | |
| Have the student write in a journal about moods and write songs, poems | T,P |
| Help the student identify things that contribute to distressing mood states outside of class | T,P |
| Identify a staff response to self-injurious behaviours so that students are assessed without being stigmatized | T,P |



Role play



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

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

Student: They weren't 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'm 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're 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 first have a thought that is unhelpful?

Student: Hmmm... 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



Case 5: Mona, a 17-year-old girl

Mona has been having a hard time at home. She met an older male that she wants to marry and her parents found out about it. They told her that she is too young to get married and demanded she end the relationship immediately.

Apart from going to school she is no longer allowed to leave the house without a family member.

At school her teachers noticed that she had become distressed and appeared distracted and sad. It came to the attention of her teacher that she had told her best friend at school that she was thinking of ending her life. A few days later Mona swallowed 20 pills from her mother's medication.





Questions to consider ?


What strategies could be implemented **by the teacher** to support **Mona**?

What strategies could be implemented **by parents** to support **Mona**?

What strategies could be implemented **by peers** to support **Mona**?

Who else could support **Mona** and how?

When would you refer **Mona** to a **specialist**?



Troubling behaviour
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the classroom

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Suicidal thoughts or behaviour

Strengthen protective factors against suicide, including good relationships with classmates and teachers and access to support inside and outside the classroom T,P,F

Identify students who may be at risk of suicide (sudden or dramatic changes in behaviour or performance, giving away material possessions) T,P

Establish dialogue with any distressed and/or suicidal young person and understand that the teacher should not be alone in the communication process T,P

Respond to students who may be at risk of suicide (talking or writing about dying, feeling hopeless or having no reason to live) by taking necessary actions T,P


Constantly supervise any student identified as at imminent risk (or make sure they are supervised by an adult) until they can be seen by a professional T,P

Escort the student to see a professional and provide additional information to help in the assessment. The professional should notify parents T,P



Inattention

Students with inattention problems may

- Not listen when spoken to
 - Have difficulty paying attention or staying on task
 - Not complete tasks and make careless errors
 - Forget tasks and materials (jackets, books, pencils, homework)
 - Daydream or appear spacey
 - Have a very messy/disorganized desk area
 - Lose objects
 - Avoid activities that require sustained mental effort
- 



Hyperactivity and impulsivity

Students with hyperactivity and impulsivity problems may

- Have difficulty paying attention and staying on task
- Not complete tasks and make careless errors
- Make choices without thinking them through
- Blurt out answers before the teacher finishes the question
- Interrupt the teacher and other students
- Talk too loudly
- Fidget/have difficulty remaining still

Other children may get easily frustrated with them and they may become frustrated with peers and themselves





Case 6: Hassan, a 7-year-old boy

Hassan's teacher notices that he is not able to sit still in class. He is always disrupting the class and disturbing other students. When his teacher asks him to stop he says he can't help it. Other children complain that he is always in their space.

He frequently finds himself distracted by other students and everything that happens in the class seems to capture his attention. His teacher feels he is behind despite being a very smart student. His attention is poor even when the teacher talks to him directly.

On speaking to his mother the teacher learns he also seems hyperactive at home. He makes decisions without really thinking about their consequences and is always jumping around and breaking things. He is not organized and often loses his notebooks and homework.





Questions to consider ?


What strategies could be implemented **by the teacher** to support **Hassan**?

What strategies could be implemented **by parents** 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**?



Troubling behaviour
you might see in
the classroom

Intervention



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Inattention

Preferential seating – seat student at the front of the class T,P

Post rules, the daily routine, and a school calendar in a fixed place (e.g. front of classroom, refrigerator at home) and go over daily T,P


Break steps down and have the child repeat them back T,P

Allow extra time to complete tasks (not at recess as the student often needs to discharge energy) T,P

Provide the student a copy of notes or an audio record T


Underline, circle, or highlight key terms in reading material for the student T,P

Have a staff member help the student write responses T,P



Troubling behaviour
you might see in
the classroom

Intervention



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Disorganization

Have students check in after doing the first 1 or 2 problems to ensure they are following the correct steps T,P

Praise/reinforce children for doing the right thing when they follow steps, organize their desk, and achieve other goals prioritized for the student T,P


Keep extra materials (pencils, books when possible) at school and at home T,P

Help the child organize his/her desk and workspace, for example place papers in coloured folders T,P

Have the child use a daily assignment book and check it before the student leaves for home T,P

Allow the child to complete sentences already started or paragraphs structured for them ("I am in favour of _____. The first reason supporting this is _____") T,P


Allow the student to leave early to the next place/class with a peer or another staff member T,P,F



Troubling behaviour
you might see in
the classroom

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Hyperactivity

Provide breaks for the student to move about

T,P

Break tasks down into 10–20 minute segments so that students can move within the classroom

T,P

Provide alternative outlets for physical activity: have the child raise a hand, count to 5, then raise the other hand; have the student wiggle fingers/toes to relax (and not be disruptive)

T,P,F

Provide goal-directed tasks such as distributing papers

T,P,F

Impulsivity

Clarify rules of personal space (stand 1 floor tile/3 arm lengths apart, use your inside voice after the other person has stopped speaking, etc.)

T,P,F

Allow the child a designated place in lines (between 2 pro-social peers)

T,P,F

Allow the student to leave early with another staff or peer to the next place/class

T,P,F

Thank you



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