Mental Health Pilot Project - V1



Project Introduction

Mental Health issues among children and young people are a significant and growing public health concern. In February 2018, the Mental Health Foundation released worrying statistics that 1 in 10 children suffered from depression or anxiety related issues, with almost half of cases involving children under the age of 14. What is of greater concern is that over half of schools in the UK are not in a position to help these children even though they are often the first point of contact for anxious parents looking for help.



Teachers and those in closest contact with young people often have limited knowledge and do not feel confident in how to support them with mental health issues or bereavement, which can result in a poor response when a young person finally finds the courage to tell someone they ne ed help.

This Project has involved training teachers to deliver a preventative school based programme and provide access to appropriate support and services. It has equipped teaching staff with the knowledge, skills and confidence to enable them to talk openly about mental health issues and bereavement to

children. They have delivered a prevention and early intervention strategy, and will continue to develop positive mental health and well-being across their school and wider school community. They are able to talk to the parents/carers of children and know how to refer them to appropriate sources of support.

The Project Lead created and delivered the project working 15 hours per week, with support from Healthier Together Project Lead, Project Manager, Simon Says Trustees, Chief Operations Officer, Education Lead and Volunteers.

The <u>Healthier Together</u> programme is a web based initiative funded by the NHS, to improve the health and well-being of children and young people in Hampshire, Dorset and the Isle of Wight. Its initial focus has been to improve the care of children presenting with common childhood illnesses such as a fever, diarrhoea / vomiting, abdominal pain etc which can usually be managed at home with a ppropriate guidance. The project started around 4 years ago and has grown in the amount of information that is now available to parents, carers and young people via the website.



Simon Stanley was a 37-year-old teacher from Southampton, Hampshire, when he died from cancer. His wife, Sally, found there was no bereavement support locally for their two sons, Andrew (5) and Tom (2) and there was a wider need to provide resources and information to children, parents, teachers, health professionals and emergency services in Hampshire.

<u>Simon Says</u> became a registered charity in 2001 with the mission to provide support for children and young people up to the age of 18, living in the county of Hampshire, who have a significant person in their life who has died.

Facts & Figures

It is estimated that every 22 minutes a child or young person in the UK is bereaved of a parent.

It is estimated that 1 in 25 of school aged children (between 5yrs and 16yrs) will have experienced the death of a parent or sibling. This does not account for those who have lost another significant person eg grandparent, uncle, cousin or a close friend.

'Simon Says' aims to:

- Offer information and advice to enable them to move forward in their lives, while remembering their significant person
- Provide a telephone support line available to families and professionals seeking advice or support
- Host monthly age appropriate support groups (Basingstoke, Chandler's Ford, Eastleigh, New Milton, Gosport and Portsmouth)
- Offer the opportunity to meet other families who have also been bereaved
- Support and provide advice and training to teachers, and other professionals working with bereaved children and young people. This includes: advice on a bereavement policy; general talks; assemblies about the work of the charity or fundraising; help setting up a group within the school environment; specific resources and session plans
- Hold an annual residential weekend

Simon Says does not receive any government funding and relies on the generosity and goodwill of organisations and individuals.

Click here if you would like to donate to Simon Says

Project Outline

'Let's Learn About Mental Health' aims to:

- tackle the myths that surround mental health issues
- reduce the stigma associated with it
- reduce the barriers to seeking help by raising awareness of sources of support
- promote a supportive and understanding community in schools and the wider community.

Let's Learn About Mental Health has been developed to take account of the Government green paper 'Transforming children and young people's mental health provision' and the current PSHE curriculum.

'Let's Learn About Mental Health' draws on the approach and excellent work carried out by Simon Says in schools using the 'train the trainer' model, supporting bereaved children and families across Hampshire.

Mental health issues or bereavement can affect anyone at any time. Young people are at greatest risk of mental health issues around the age of 12-14, when they are likely to be experiencing and dealing with new feelings for the first time. Phase 1 of the 'Let's Learn About Mental Health' pilot is aimed at **Year 3** and 4 pupils to help them develop the knowledge, resilience and strategies to prevent and manage difficult feelings they may experience, which will help to protect their lifelong mental health.

Why a 'train the trainer' approach?

"Schools have always been on the front line with children's mental health because school is often where issues become apparent, and a school is often a parent's first port of call if they are looking for support."

James Bowen, NAHT Edge, Director of Middle Leaders



The prevalence of mental health disorders and bereavement of children and young people in the UK, as well as the increasing focus on mental health from Government Departments in Education, means the project would be ideally delivered in schools by teachers.

Although some teachers will rightly think that they are <u>teachers and not counsellors</u>, many parents will turn to schools first when they feel that their children are starting to show signs of mental health issues and will often <u>expect teachers to have an answer</u>.

Schools may have to start being prepared for this and will have to start finding a way of supporting pupils or signposting them to the appropriate mental health professionals as the Department of Education and the Department of Health & Social Care want all schools and colleges to have a designated and trained lead in mental health by 2025.



We know that mental health problems affect a significant number of children and young people, with the most recent data suggesting that 1 in 10 children and young people have some form of clinically diagnosable mental health disorder. This level of prevalence equates to around 850,000 children and young people with a diagnosable mental health disorder in the UK today.

Key Aims

To tackle the myths that surround mental health issues

- To reduce the stigma associated with it
- To reduce the barriers to seeking help by raising awareness of sources of support
- To promote a supportive and understanding school community

These were developed into **Key Messages** and then **Learning Objectives** for each lesson

Key Messages and Learning Objectives

1. Mental Health

- Good mental health allows you to think clearly, enjoy being around your friends and learn new skills. When you have a problem with your mental health it can feel difficult to do everyday things like hanging out with friends, getting work done or doing the things you normally enjoy
- Sometimes we can make ourselves feel better by making small changes to improve your wellbeing.
- It is useful to be able to recognise a range of feelings in yourself and others
- It is important to listen to others and get the support you need

Learning Objectives

WALT:

- Understand what 'mental health' means
- Know the difference between small, everyday feelings and a big feeling
- How to be a good listener
- · How to get the help we need

2. Anxiety

- Anxiety is a feeling of fear or panic. Feeling anxious sometimes is a normal response to fear "fight, flight or freeze".
- If the problem has gone but the feeling of panic or fear stays or even gets stronger, or if it stops you doing fun activities, that's when anxiety becomes a problem
- You can recognise the physical effects of anxiety and break the 'cycle of fear'
- You can use strategies to prevent and manage feelings of anxiety

Learning Objectives

WALT:

- Understand what 'anxiety' means
- Recognise feelings of anxiety in yourself and others
- Use strategies to prevent and manage feelings of anxiety

3. Depression

- We all feel low or 'down' at times but if the negative emotions last a long time, stop you from doing things, or feel very severe, it may be depression
- Depression is a mental illness where you feel very 'down' all the time. It is more than sadness
- Depression can affect anyone, and you deserve help to feel better
- You can get through it by distracting yourself with positive activities, improving your lifestyle and finding help

Learning Objectives

WALT:

- Understand what 'depression' means
- Know who can be affected by depression
- How to improve how you feel if you are affected by depression

4. Self - Harm

- Self-harm is when you hurt yourself on purpose. People usually do it because something else feels wrong. It seems like the only way to let those feelings out.
- If you self-harm it is usually as a result of another problem.
- Any injuries should be treated straight away and not left just because someone has hurt themselves.
- When something happens or someone is feeling emotions that make them want to self-harm, it's good to find other ways to cope.

Learning Objectives

WALT:

- Understand what 'self-harm' means
- Know how to keep our bodies safe
- Use other strategies to manage our feelings

5. Bereavement

- You always carry it with you but your capacity to hold it increases
- It is ok to be sad and it is ok to be happy
- Life goes on and you can still reach your goals
- You are not alone it is something everyone will experience

Learning Objectives

WALT:

- Understand what 'bereavement' means
- Bereavement stays with you but you won't always feel the same
- Know that your life journey may have changed but you can still reach your life goals
 - To know that you are not alone

Project Process

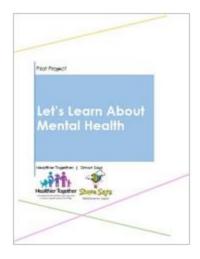
From conception to completion: Step by step process of how schools and the Project Lead work together to successfully deliver the project. Including actions, responsibilities and reporting.



Project Structure

The project has been developed to take account of; the Government green paper 'Transforming children and young people's mental health provision' and the current PSHE curriculum.

Mental health issues or bereavement can affect anyone at any time. 'Let's Learn About Mental Health' is aimed at Year 3 and 4 pupils to help them develop the knowledge, resilience and strategies to prevent and manage difficult feelings they may experience.



The content of the project was developed as below:

- > Research of topic areas
- > Keys messages agreed for each topic
- > Specific learning objectives were created
- > Appropriate and engaging learning activities designed
- > Coverage of PSHE National Curriculum objectives ensured and
- > Links to wider curriculum established
- > Resources created
- > Surveys designed
- > Project quality assured by education and health professionals

The project lead has developed resources to help children learn about their mental health, focusing on the 5 key topics of **mental health, anxiety, depression, self-harm and bereavement**. They have trained teaching staff to deliver these lessons within the school. Staff have been supported by visits to the school and regular communication.

Children have self-evaluated the impact of this intervention work and teaching staff have fed back on the training and resources, and then on the delivery and impact of the project.

'Let's Learn About Mental Health' is a resource pack for teachers and other practitioners working with children in Years 3 and 4. It comprises of six lesson plans designed to improve pupil's understanding of mental health, anxiety, depression, self-harm and bereavement. Pupils will learn:

- to recognise issues
- preventative steps to take
- strategies to manage the big feelings
- the importance of talking about it

• how and where to seek appropriate support

Each lesson builds on the previous one. To achieve the best results they should be delivered in the correct order over a six-week period. The lesson plans and resources for each lesson are provided in print and PDF format. The project has been developed in partnership with mental health and education professionals. It includes **additional teaching support** and **further information** in the form of sign-posting to external resources and advice services, PSHE Objectives and Cross-Curriculum links.

The Design

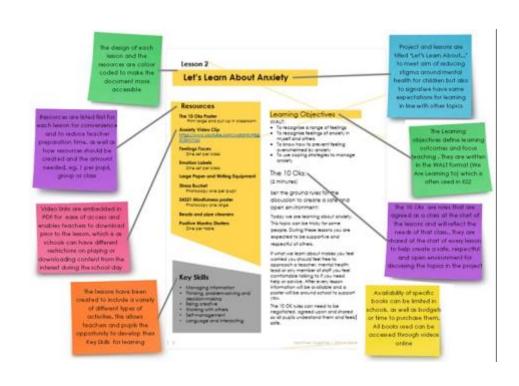
The project was designed to be delivered over 6 lessons.

The structure of each lesson is the same:

- 1. Share Learning Objectives
- 2. 10 Oks
- 3. Teaching Input
- 4. Learning activities
- 5. Plenary
- 6. Closure
- 7. Poster to signpost online resources

Example lesson below:





Outcomes and Impact

Key Outcomes

- Teachers reported greater confidence in talking, supporting and teaching children about mental health, its related issues and bereavement
- Children showed significant improvement in the' transfer of knowledge'
- Parents' feedback highlights the need for information meetings in schools delivering the project
- No significant impact on pupil's attendance or school's incidences of bullying, suspensions or exclusions - yet!

Project Reach

- 6 schools across Hampshire
 - 3 train the trainer workshops
 - 2 twilight sessions hosted by Simon Says
 - 1 session run at Oliver's Battery Primary School
- 30 Teaching Staff Trained
 - Head Teachers
 - Deputy Heads
 - Teachers
 - Inclusion Leaders
 - PSHE Leaders
 - SENCOs
 - TAs
 - LSAs
 - Nearly 400 pupils participated
- 1 Parents' Meeting
 - 15 parents attended
 - 2 Governors
 - 1 teacher and 1 PSHE Leader

School's Data

Schools were asked to provide data for the classes involved in the project:

- Attendance rate
 - Number of incidences of:
 - Bullying
 - Suspensions
 - Exclusions

The data was collected at two points throughout the project: the half term prior to delivery of the project (Autumn 1) and at the end of the half term the project was taught (Autumn 2).

There were **no significant** findings to report from the data received.

Recommendation:

Data is collected as part of a longitudinal study, with a control group, to see if there is a longer term impact on attendance, bullying, suspensions.

Pre and Post-Project Survey

School staff participating in the training workshops were asked to complete the <u>Pre-Project Survey</u> prior to starting the training. When the project lessons had been delivered in schools, teaching staff were asked to complete the <u>Post-Project Survey</u>, which had additional questions about the project.

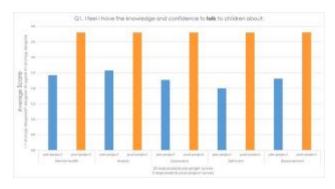
These were available to complete on paper or online via Google Docs.

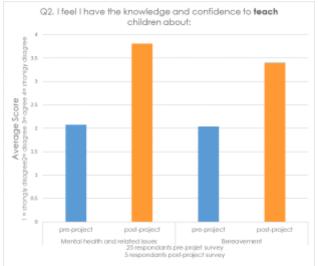


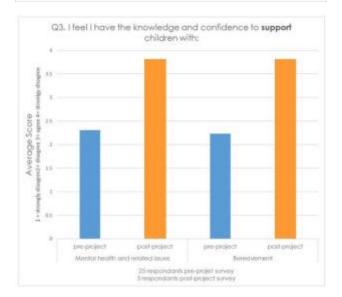
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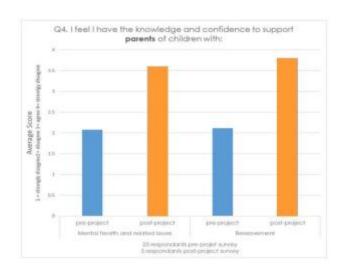
School Staff Survey Results

Knowledge and Confidence









Findings:

Improved knowledge and confidence of teaching staff to talk to, teach and support children with project topics

ALL teaching staff reported improvement in talking to, teaching and supporting children with mental health, anxiety, depression and bereavement

Improved knowledge and confidence of teaching staff to support parents

Recommendation:

Changing 'support parents' to 'talk to parents' in questionnaire as the wording may be ambiguous and reassuring and signposting is how we envisage teachers supporting parents

Require schools to have a parent information meeting to insure buy-in and project lead available to address parent comments or concerns

Develop the content and design of the Parent Guidance could be to be more accessible

Training and Resources Results

Workshop	5 out of 5 respondents reported that 'yes' it was useful and informative							
	5 out of 5 respondents reported that 'yes' it was an appropriate length							
	5 out of 5 respondents reported that 'yes' it prepared them to deliver the lessons							
Project Resource Pack	5 out of 5 respondents reported that 'yes' it was useful and accessible							
	5 out of 5 respondents reported that 'yes' it supports the National Curriculum							
	5 out of 5 respondents reported that 'yes' it enabled them to teach the lessons							
Project	5 out of 5 respondents reported that 'yes' they would recommend the project to other teachers or schools							

Findings:

100% of teaching staff agreed that the workshop was:

- · Useful and informative
- Appropriate length
- · Prepares teachers to deliver the project

100% of teaching staff agreed that the resources were:

- · Useful and accessible
- Supports the National Curriculum
- · Enables teachers to deliver the lessons

100% of teaching staff would recommend this project

Recommendation:

Send Pre-Project Questionnaire via email to school staff prior to training

> Have facilities available at training for attendees to complete online

Set up automated reminder for postquestionnaire

Training Workshop Feedback Results







QUESTION 10. Any comments from the children?







Children's Questionnaires

Pupils participating in the project were asked to self-evalute the impact of the project through two questionnaires, that were accessible online via Google Forms. The first questionnaire was completed at the start of Lesson 1 and at the end of the project in Lesson 6.

The <u>'Let's Learn About Mental Health'</u> and <u>'We've Learnt About Mental Health'</u> Questionnaires consisted of three parts:

1. Transfer of knowledge (ToK)

Children record an open-ended response to 'What do you know about mental health/anxiety/depression/self-harm/bereavement?' It is scored against a list of vocabulary taught in the project.

2. Well-being Index (WBI)

Children record whether 'strongly agree, agree, disagree or strongly disagree' to 6 statements that indicate well-being, for example: 'I think lots of people care about me'

3. Coping Strategies Survey (CSS)

Children record how much ('never, a little, pretty much, a lot, other') they use 9 different coping strategy approaches such as 'I wish really hard that things were better'

2. Let's Learn About Mental Health	the part was their set hand
As dearf of our Paris Improve, we have learned about mental health consent dispersions such again, and prospersional. You have signed about a round baseling how to account he have not again about 40000 to the last disease as anything to the Control of the Control of the Control disease as anything to the Control of the Control of the Control of the Control of the	ng.
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Recommendations:

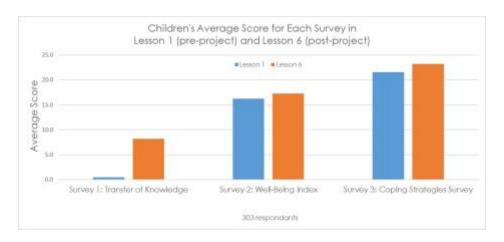
Due to time and feasibility constraints, all children completed the questionnaires on paper and they were posted or collected by project team

The format of the follow up questionniare was adapted from 4xA4 to 1 double sided A4 to improve data input efficiency and reduce printing costs for schools

Consideration should be taken of the time between training date and the project start date to allow teachers time to prepare resources and book facilities to ensure all questionnaires are completed online

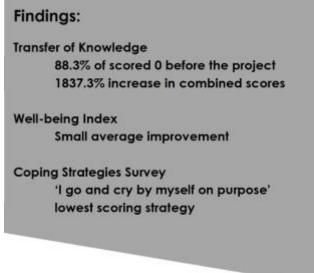
Children's Results

The chart below shows the difference between lesson 1 and 6, for the 3 surveys of the questionnaire, for respondents that provided pre-project and post-project data. The **average** score is shown for **each survey** (Tok, WBS, CSS) for lesson 1 (pre-project) and Lesson 6 (post-project). There is a **significant improvement** of the **transfer** of **knowledge** scores but, as expected, less for the other surveys.



The chart below shows the **average** score for **each question** of the three surveys (ToK, WBI and CSS) in the Children's Questionnaire





Recommendations for delivery:

The children completed the project at the end of Autumn 2, which is the half term before the Christmas Holidays. The self-evaluation scores for WBI and CSS could have been impacted by external influences so the project should be repeated in different school terms throughout a year

Repeat the project as a longitudinal study using a control group to assess if the increase in knowledge has an impact on well-being and coping strategies in the long term and how well the knowledge is retained over time

The questionnaires were intended to be anonymous however pupils put their names on them! Teachers could be provided with participant numbers which they would assign to their class. Therefore, if any children are flagged up as needing support; only the school will be able to identify the child

Recommendations for Well – Being Index:

Although adapted from existing studies of children the same age, some teachers feedback that their pupils found the wording of some statements challening. Adapting the Well-being Index to questions about how children feel most of the time, at home and at school and indicating this using emoticons that are scored could be beneficial

Develop children's questionnaire to enable pupils to directly reflect on the impact of the project for them and the school environment

Recommendations for Coping Strategies Survey:

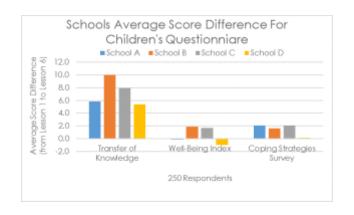
Remove lowest scoring coping strategy "
go and cry by myself on purpose" – preproject children may feel uncomfortable to
admit, post-project it may be seen as an
unhelpful strategy

Replace the 9 coping strategies and rating how often you use them, with multiple coping strategies, and specifically strategies included in the project, for children to select which ones they use. Also an 'other' option and the opportunity to give details would provide better quality data on the impact of the project

Project Impact: Children

Comparison of Schools Average Scores

Shown in the chart below are the **4 out 6 schools** participating in the project provided both the pre and post children's questionniare data in time to be included in the project report.



Findings:

School A* and D had the lowest improvement score from the Transfer of Knowledge survey AND for the Well-being Index and [School D] Coping Strategies Survey

*Teaching staff at School A expressed concern for their cohort's feeling of well-being before the project

School B and C had the highest improvement score from the Transfer of Knowledge survey AND for the Well-being Index and [School C] Coping Strategies Survey

Recommendation:

Develop WBI and CSS survey to better reflect the impact on the pupils

Project should be a longitudinal study to see a more accurate impact of the project for the children

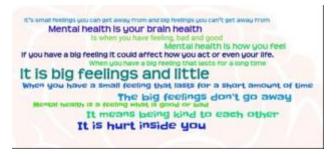
Project Impact: Children

Comparison of a sample of children's responses from Transfer of Knowledge survey in the children's questionnaire from Lesson 1 (Pre-Project) and Lesson 6 (Post-Project)

1: What do you know about mental health?

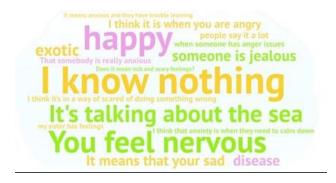


2 - Lesson 1



3 - Lesson 6

2: What do you know about anxiety?



4 - Lesson 1

when you feel extremely worried is sometimes when you get worried, anxious and scared when you feel nervous about something anyone can feel it

5 - Lesson 6

3: What do you know about depression?

When people get stressed
Bored
When people have loads of people telling them to do loads
sadness or weird In a way scared Sad, lonely, no friends
It's about whether you are angry or OK really sad
when there's something you've never done before
like when you're abit grunny? I think it means a bit embarrassed
A very bad tummy
When you are jealous
Wanting to do something exciting
people share their hair eff

6 - Lesson 1

It's a really bad sadness, if you don't tell anyone it will get bigger When you feel said about something like a percavement is one, one sacres and you an net seek you are not seek you might need help When you're very, very sad A big feeling that stays there for a long time A big feeling to a says there for a long time A big seeking that stays there for a long time.

7 - Lesson 6

4: What do you know about self-harm



8 - Lesson 1

When you put yourself in danger I know it means dangerous Self harm is when you kell you kell yourself on purpose there you hart yourself when you are said the prove to when you hart yourself on purpose because you're angry when you hart yourself on purpose because you're angry when you hart yourself on purpose because you're angry when you hart yourself on purpose because you're angry when you hart yourself on purpose because you're angry when you hart yourself on purpose because you're angry when you do something dangerous Is when someone is hursnig themselves and they are angry at something

9 - Lesson 6

5: What do you know about bereavement?



10 - Lesson 1

Intersection at the year the second plan before because second has also been second and and upon test year plan emerges as in horse.

When a loved one dies and you shut down

Its when a restate of yours dies and you get sail

When someone dies and you want to be store and don't want to play with anybody.

It meas a member of your family does or has concern and they die

bear someone dies and you get and and the beare firm a while like membry.

It meas a member of your family does or has concern at they die

bear someone dies and you get the part of the beare firm a while like membry.

It a shall seemed also in your family also want plans brinking absolut it.

A close family member or friends dies and you are very upset.

Project Impact: Example of Children's Work



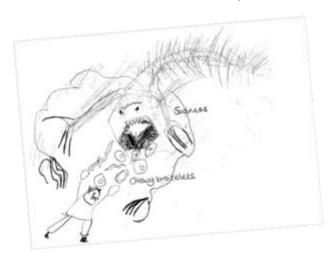
12 - Stress Bucket Activity



13 - Memory Jar Activity



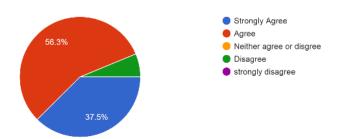
14 - Rollercoaster C.B.T Activity



15 - Representing Depression

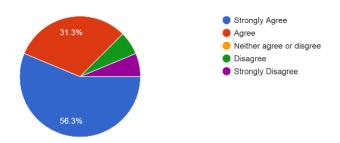
Parents' Feedback

I understand what our school is trying to achieve for the children.



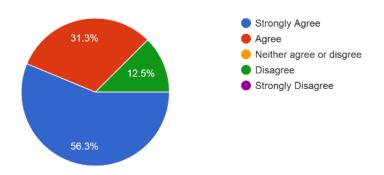
I am pleased my child is learning about how to recognise mental health issues in themselves and their friends.

16 responses

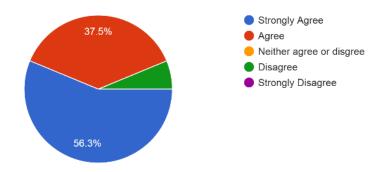


I am pleased my child is learning positive strategies to prevent and manage mental health issues.

16 responses

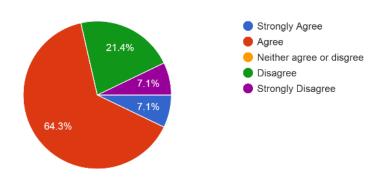


I feel it is important to talk about mental health and bereavement with my child.



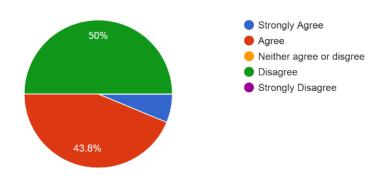
My child feels happier in school.

14 responses

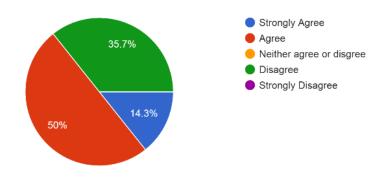


My child is managing their feelings better.

16 responses

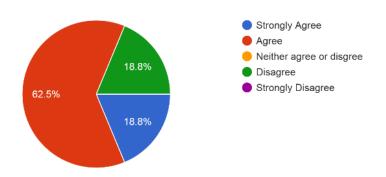


I feel pupils at the school have better relationships with one another.



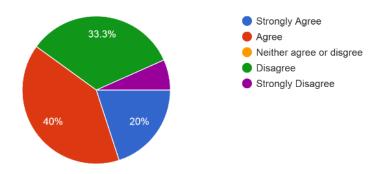
I feel the school supports my child with mental health issues and bereavement well.

16 responses

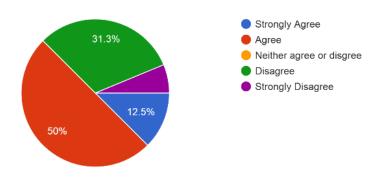


I feel better able to support my child's mental health.

15 responses

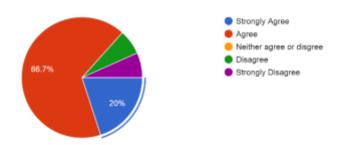


My child is talking to me more about their feelings or worries.



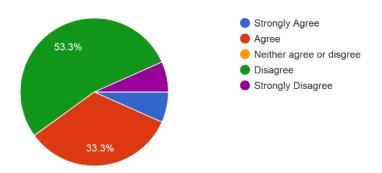
I would recommend this project to other parents.

15 responses



My child is less anxious or stressed out.

15 responses



Recommendation:

Including 'name of school'
data field and 'attended
Parent Information Meeting:
yes / no' so it is possible to
see impact of parents
attending. Feedback from
parents where a meeting
was held was very positive

Do you have any further comments or experiences you would like to share?

9 responses

My child has recently lost one nan to cancer and her other nan has just moved away. So the bereavement and saying how you feel etc. was perfect timing.

I agree with the principle but think maybe Year 3 is a little too young

These questions are very difficult to answer. My child doesn't have a mental health issue and i really have no idea if the project impacted him positively or not. I have had to select disagree where i may have selected 'neither agree nor disagree'. My daughter has been very anxious as we have had two bereavements in our family this year and was womed that she would stand out. If anything she seems less content and more angry than I've seen her, with outbursts and tears most days.

My child didn't speak about it at home at al. When I asked him he said he didn't understand a lot of the questions so probably hasn't answered correctly. Maybe some individual children may have benefited from these lessons, but on whole I think it was unnecessary at this age.

Whilst I understand this topic is very important I think year3/4 children are too young for some elements of this topic and feel that this is planting a seed in some areas

My child does get anxious but I noticed an improvement in her confidence over Christmas, and she coped better in potentially stressful situations.

There is nowhere on this form for neither strongly agree or disagree. That would give you a better questionnaire. The teachers were very open about it but I have not noticed any changes in either children

Findings:

Parents providing feedback are polarised – either very positive or very negative

Parents express misconceptions, misunderstandings and a lack of knowledge about mental health and bereavement in children

There still seems to be a lot of stigma around mental health, related issues and bereavement. Also a lack of buyin for a preventative approach

Recommendation:

Deliver Parent Meeting for all schools involved in the project to insure better understanding of project and buy-in from schools and parents

Add quotes, facts and figures to introduction of Feedback Questionnaire to highlight importance of a preventative program

Include links to Heathier Together and Simon Says website resources for support

Collect Individual's email addresses, with consent, to address comments or concerns

Recommendations

Further recommendations from pilot project (phase 2) Secure buy-in and resources to roll out KS2 project to all schools across Hampshire –following the recommended process to ensure buy-in from schools and parents.

Extend the time frame of the project to 1 year. This will enable more liaison and collaboration with health professionals, education leads and schools

Explore SEND data implications

Roll out project in existing participating schools in (Year 5 and 6) as teachers reported a similar need in their cohorts

Need buy-in from SENCO or named Mental Health Lead and SLT. Engage with schools through SENCO

Need buy-in from ELSA or pastoral support. Attend training and be available for follow up for children flagged as needing additional support

Need clearer information for parents and evidence that supports talking about mental health issues with young children

<u>Research</u> justification for addressing these topics, especially self-harm, with this age group with a view to it being included in the ongoing curriculum. Present this information in an accessible format

When developing the parent resources; include videos from project shared with parents

The sustainability of the project could be improved if out-sourcing the project design by engaging with training schools in order to develop further resources and to the deliver the train the trainer course.

Develop programme for KS3 (repeat with cohort who already participated in project in KS2) and KS4

- Refer to cycles of anxiety and depression
- Discuss hormones and how chemicals interact the brain

Decide if more or alternative topics are required (at all Key Stages), consider:

- Relationships
- Bullying, including cyber bullying
- E-safety
- Eating disorders
- Coping skills 'toolbox'
- Individual crisis plan
- · Physical health and wellbeing

Aligns with need for all schools (primary and secondary) to offer mental health education by 2025

Engage parents to determine parent advocacy for KS3 programme

Expand Audience of the Project

 Schools, ELSA, Nurture Group Network, future funders, Public Health leads, Education leads, NQT training, clusters

Future Developments

The sustainability of the project could be improved if out-sourcing the project design

Develop programme for KS3 (repeat with cohort who already participated in project in KS2) and KS4

- Refer to cycles of anxiety and depression
- Discuss hormones and how chemicals interact the brain

Decide if more or alternative topics are required (at all Key Stages), consider:

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- E-safety
- Eating disorders
- Coping skills 'toolbox'
- Individual crisis plan

Aligns with need for all schools (primary and secondary) to offer mental health education by 2025

Engage parents to determine parent advocacy for KS3 programme

Expand Audience of the Project

Schools, ELSA, Nurture Group Network, future funders, Public Health leads, Education leads, NQT training, clusters

FAQ sheet for teachers if leading the Parents Meeting

Useful Links



16 - Talking Mental Health — Anna Freud



17 - Simon Says YPG - Every hour, every day



Improving the health of children and young people in Dorset, Hampshire and the Isle of Wight

www.what0-18.nhs.uk[1]



www.simonsays.org.uk^[2]



ONUNE, ON THE PHONE, ANYTIME childline.org.uk 0800 1111 Childline.org.uk



anxietycanada.com[3]



https://headspace.org.au/youngpeople/what-is-mental-health[4]



https://youngminds.org.uk[5]

References

https://www.anxietycanada.com/sites/default/files/Healthy Thinking for Younger Children.pdf Mental Health LessonAnxiety – Classroom Resources For Schools

http://www.southglos.gov.uk/documents/Classroom-Resources.pdf

Cbt The Rollercoaster Story

https://drpatrickkeelan.com/psychology/teaching-children-how-to-use-cognitive-behavioural-therapy-the-roller-coaster-story/

Childline

www.childline.org.uk

Effectiveness of a Mental Health Promotion Program to Improve

Coping Skills in Young Children: Zippy's Friends

https://www.sciencedirect.com/science/article/pii/S0885200606000032

Headspace Mental Illness Fact Sheets

https://headspace.org.au/assets/Uploads/Mental-Illness-Fact-Sheets-mg.pdf

Healthier Lives Together Project

Healthy Thinking for Younger Children

https://stem4.org.uk/

The Anxious Child

https://www.mentalhealth.org.uk/sites/default/files/anxious_child.pdf

The Emotional Barometer

http://www.aet-idp.org.uk/IDP-DVD-ROM/resources/pns seal emo barometer.pdf

Measuring And Monitoring Children and Young People's Mental Well-Being: A Toolkit for Schools and Colleges

https://www.annafreud.org/media/7202/01-talking-mental-health-lesson-plan.pdf

Mental Health Lesson

https://www.bbc.co.uk/news/health-38148892

National Curriculum in England – KS 1 And 2 Framework Document

https://assets.publishing.service.gov.uk/...data/.../PRIMARY national curriculum.pdf

On Edge: Self-Harm Resource Pack

https://www.seemescotland.org/media/6804/onedgepack02.pdf

PSHE Association 'Preparing To Teach About Mental Health and Emotional Wellbeing'

https://www.pshe-association.org.uk/system/files/Mental%20health%20guidance_0.pdf

PSHE Curriculum

https://www.pshe-association.org.uk/curriculum-and-resources/curriculum

Simon Says: Primary Resource Pack

http://www.simonsays.org.uk/downloads-2018/

Stem 4

The Stress and Coping Questionnaire for Children

https://www.researchgate.net/publication/260833575 The stress and coping questionnaire for children School version and asthma version - Background and Questionnaire

What's Inside the Zebra's Mind

https://www.ehlers-danlos.com/wp-content/uploads/Bulbena-Cabre-Whats-Inside-the-Zebras-Mind-S.pdf

Young Minds

https://youngminds.org.uk

Thanks

Funded by:

Healthier Together

Simon Says

We would like to thank the schools staff and the year 3 and 4 pupils for being part of the project, and for the enthusiasm, diligence and wisdom they brought.

Farleigh Preparatory School, Andover

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Oliver's Battery Primary School, Winchester

Kanes Hill Primary School, Southampton

St Mark's C of E Primary School, Southampton

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Ann Langran - Trustee, Simon Says

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Rosie Barber - Project Lead

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Jess Dring - Volunteer, Simon Says

Rachel Collins - Volunteer, Simon Says

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Amanda Lees - Senior Researcher Health and Wellbeing Research Group, University of Winchester

Appendix

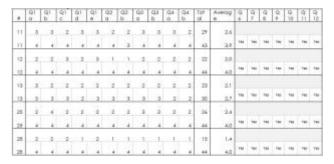
School Staff Data

Pre-Project

	Q1p	Q1b	Gic	Gld	Ole	G20	GSb	G3a	GSb	G4q	Q4b	Total	Average
11	3	- 3	2	3	3	2	2	3	3	3	2	29	2.6
12	2	2	3	2	3.	(1)	t	2	2	2	2	22	2.0
13	3	2 3	2	2	2	2 2	2	2	2 2	2	2	23	2.
14	3		2 2	1	1		2 2	3	2	2	2 2 3	23	2
15	2	2	2	2	2	- 2	2	3	2	2	2	23	2
16	2 2	- 2	2	1	2	- 2	3	2 2 3	3	2	3	24	2
17	2	3	2 3	2	2 2	2 2	2 2	2	2	2	2 2	23	2
18	2	3	3	2	2	- 2	2	2	2 2	2	2	25	2.
21	2	- 1	1	- 1	1	1	1	1	1	1.	9.	12	1.
22	2	2	1	1	T.	1	1	1	1	2	2	15	1,
23	3	3	3	3	3	.3	3	3	3	2 3	2	33	1 3
24	3	3	3	3	2	3	3	2		3	3	31	2
25	2	4	2	2	2		3 2	3	3	2	3 2	26	2.
26	2	2	2	2	2	2	2	2	2	2	2	22	2
27	1	3	2	2	2	1	1	2 2	1	1	1	17	1.
28	2	2	2	1	2	- 1	1		1	1	1	15	1.
29	3	3	3	3	3	2	- 2	2	- 2	2	2	27	2
31	3	3	2	3 2	3	2 3	3	3	3	2 2	3	30	2
32	3	3	3	2	3	3	2	3	3	2	2	29	2
33	- 4	- 4	4	2	3	4	3	. 3	3	3	3 3 2	36	3
34	2	2		2	3	3	3	3	3	3	3	29	2
35	3	3	2 3 2 2	3 2	3	3	3	3 3	3	2		31	2
36	2 3	2	2	2	2	2	2	2	2	2	2	22	2
37	3	2	2	2	3	4	t	2	3	2	2	23	2
38	2	3	2	2	2	2	2	2	2	2	2	23	2
39	. 2	2	2	2	2	2	2	2	2	2	2	22	2
Total	63	67	59	52	60	54	53	60	58	54	55		£. 10
Average	2.4	2.6	2.3	-20	2.3	2.1	2.0	2.3	2.2	2.1	2.1		

School Staff Data

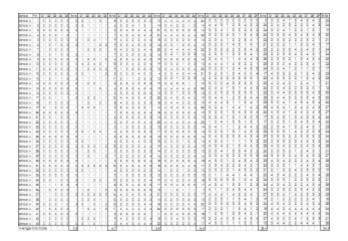
Post-Project



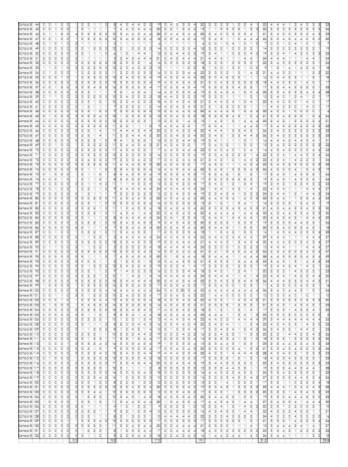
Children Questionnaire Data

(sample includes participants who provided pre and post-project responses)

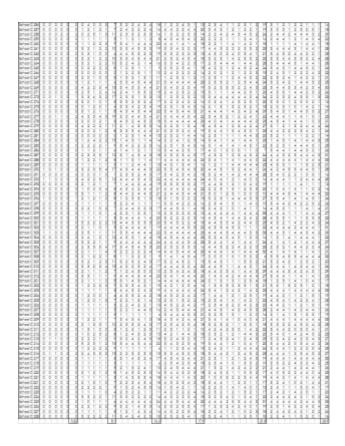
School A



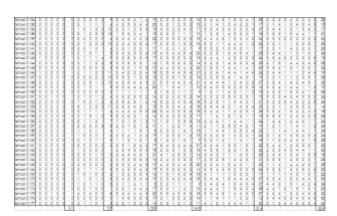
School B



School C



School D



School Comparison Data

Average Score For Each Survey In Children's Questionnaire For Each School Pre And Post-Project

35	School A	School B	School C	School D
Transfer of Knowledge	5.9	10.0	7.9	5.4
Well-Being Index	-0.1	1.9	1.7	-1.0
Coping Strategies Survey	2.0	1.6	2.1	0.1

Average Score Difference for Each Survey in Children's Questionnaire for Each School

	- Ita	nater of K	nowledge	9		Rid-Belty	g Indee	Coping Strategies Survey				
School	A			D	A	8	10	D	TA		C	II.
Lesion 1	0.8	0.5	0.2	0.1	16.8	17.2	16.2	15.8	72.4	21.2	21.8	23.
Leagun 6	6.7	10.5	8.1	5.5	16.6	19.3	12.9	14.8	24.5	22.8	23.7	23.

Parent Feedback Data

- 13	01	Q2	Q3	Q4	Q5	Q6	Q7	08	Q9	Q10	Q11	Q12	Total	Average
	3	4	4	4	3	3	3	3	3	3	3	3	39	3.3
	4	4	4	- 4	4	- 4	4	- 4	4	- 4	- 4	.4	48	4.0
	4	3	3	3	1	2	2	2	2	2	3	3	30	2.5
	. 4	4	4	4	3	2	2	2	4	4	4	4	41	3.4
	3	3	3	3		2	2	2		2	3	3	26	2.6
	3	4	4	4	2	2	2	3	2	2	2	3	33	2.5
	3	3	3	3	3	3	3	3	3	3	3	3	36	3.0
	3	.4	4	4	2	2	2	2	2	2	3	3	33	2.5
	4	4	- 4	3	3	3	3	4	3	3	- 3	3	40	3.3
	4	4	4	4	3	3	3	3	-3	- 4	4	4	43	3.6
	3	- 3	3	4	3	3	2	3	3	3	3	.3	36	3.0
	3	4	4	4	3	3	2	3	3	3	3	3	38	3.5
	3	1	2	2	2	2	1	1	2	1	2	1	20	1.2
	2	2	2	3	3	2	2	3	2	2	2	2	27	2.3
	4	4	4	4	3	3	3	3	3	3	3	3	40	3.3
- 5	50	51	52	53	38	39	36	41	39	41	45	45	-	411
ige	3.3	3.4	3.5	3.5	2.7	2.6	2.4	2.7	2.8	2.7	3.0	3.0		

Resources