



# Alexandra

Primary School

**Aspire, Perform, Succeed**

## Wellbeing Support Handbook

### **Whole, Happy, Healthy**

March 2021

To be read in conjunction with:

- Bereavement Policy
- Behaviour Policy 2020 Covid-19 Addendum
- Child Protection and Safeguarding Policy 2019 and Appendix 2020
- Whole, Happy, Health well-being strategy
- DfE policy from the Wellbeing for Education Return Project
- Public Health England's Every Mind Matters campaign.

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## Return to Education

Following the most recent lockdown at the start of 2021, adults and children alike may return to school with a wide range of feelings and emotions, some feeling elated others feeling more anxious.

They will bring a lot of different experiences, some of them traumatic e.g. a sudden loss in the family, experiences of illness or fear of illness, challenging economic circumstances, or strained family relationships. Current or new stress or trauma, may lead to past trauma resurfacing.

Children may not always present themselves as we would expect following these events, some of which we may be unaware of, and so we need to look out for any signs or signals that may suggest a child is struggling. We should also ensure that we provide regular opportunities for children to share their thoughts in a range of different contexts from whole class PSHE sessions, through to small group work and 1:1 as needed. It is important to realise that everyone has had different experiences through this pandemic and this can lead to a wide range of thoughts and feelings and some will have been affected more than others. Compassion for each other, and for ourselves, is key.

The purpose of this document is to introduce some of the signs and symptoms to look out for as well as provide some ideas and strategies to best support the recovery of wellbeing and resilience for the whole APS community within the context of the COVID-19 pandemic. It has been based on current DfE policy from the Wellbeing for Education Return Project along with Public Health England’s Every Mind Matters campaign.

This document should be used in conjunction with Whole, Happy, Healthy, the Safeguarding and Bereavement Policies.

### Initial Thinking Concerning Children’s Return to School

Strengths - what will the children be better at following lockdown?	Opportunities - what will the children need lots of when they return?
<ul style="list-style-type: none"> <li>• Independence</li> <li>• Self-organisation</li> <li>• Working at their own pace</li> <li>• Freedom</li> <li>• No time constraints</li> <li>• Technology</li> <li>• Typing / photography</li> <li>• Maturity</li> <li>• Potential life skills</li> <li>• Had time to mature in themselves, life skills, developments</li> <li>• Know themselves better</li> <li>• Technology – accessing google classroom</li> <li>• Being more collaborative</li> <li>• Built more confidence and improved their performance</li> <li>• More independent with their learning</li> </ul>	<ul style="list-style-type: none"> <li>• Opportunities to read, out loud, in groups, to oneself</li> <li>• Recap on 8 reading strategies</li> <li>• recap school routine, they will be out of practice</li> <li>• social time</li> <li>• encouragement to persevere</li> <li>• structure and routine</li> <li>• time to work practically with partners</li> <li>• consistency</li> <li>• social expectations</li> <li>• boundaries</li> <li>• time to build independence in a structured way</li> <li>• re-establish relationships</li> <li>• time to adjust</li> <li>• reassurance</li> <li>• chances to talk</li> </ul>

<ul style="list-style-type: none"> <li>• Children who access remote learning have progressed in some areas with their learning</li> <li>• Families are more aware of their child's learning, their strengths and areas to develop</li> <li>• Typing skills</li> <li>• Being able to communicate better with adults, i.e. parents and teachers</li> </ul>	<ul style="list-style-type: none"> <li>• build stamina in sessions</li> <li>• get lots of fresh air, time to move – move away from a table</li> <li>• Chance to ask questions</li> <li>• Happy and welcoming staff, no judgements, careful of what we say.</li> </ul>
<p>What will school need to provide in the short and medium term for children?</p>	
<ul style="list-style-type: none"> <li>• Time to rebuild social skills and talk with their peers</li> <li>• Time with the teacher to reconnect, whole class, small group and 1:1</li> <li>• Build stamina and motivation for learning</li> <li>• Routine and structure to build stability</li> <li>• Regular brain breaks</li> <li>• Gross motor skills – focus on PE</li> <li>• Fine motor and handwriting skills</li> <li>• Recap on key learning</li> <li>• Revisit how to develop emotional literacy – wellbeing, resilience, resourcefulness, questioning and collaboration and team work.</li> <li>• Oracy in Maths – chances to explain their thinking and listen to other's explanations</li> <li>• Transition activities to prep for next year</li> <li>• Recap on behaviour expectations, class charters, focus on kindness and doing your best.</li> </ul>	

**In 2017 one in nine children (10.8% of children aged 5 to 16 years were identified as having a probable mental health disorder. In 2020 this statistic rose to one in six (16 %) in 2020**

**During the pandemic, some groups may have been disproportionately affected:**

- Individuals with existing mental health problems
- Individuals with educational needs or disabilities
- BAME
- Individuals from economically disadvantaged backgrounds
- Individuals with social care needs.

This list is not exhaustive and children who don't fall into any of these groups may also need additional support.



## Relationships

A whole school approach to wellbeing is key to post COVID-19 recovery with relationships being key.



5 key principals of WSA  
<https://www.aep.org.uk/recovery-re-introduction-renewal>

*(Whole School SEND 2020)*

Building positive relationships is not about trying to befriend the students or being the 'cool' teacher, positive and effective student-teacher relationships are formed through time, sincerity and trust. Get to know each individual finding out their likes, hobbies and interests, this builds a bank of information that can be used later to start conversations and build a positive relationship and mutual trust.

As adults we are aware of people who try to form instant, superficial relationships in the same vein allow the relationships with your students to form over time.

Remember the things that children at APS have said they want teachers to do, as this will also build relationships:

- Greet me each day at the door;
- Ask about me and be interested in how I am doing;
- Really listen to me;
- Smile at me;
- Laugh with me;
- Trust me to do independent learning;
- Let me find my own answers;
- Tell me how I am doing;
- Have high expectations of me;
- Arouse my interest and curiosity – tell stories that are relevant, interesting and funny;
- Give me challenging work.

## Wellbeing and Learning

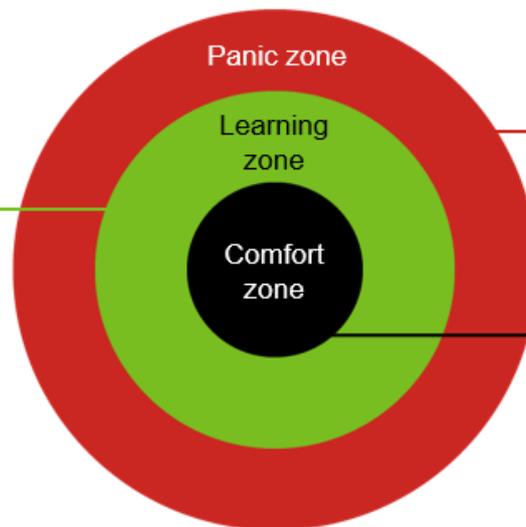
In order to help children get back to learning in the classroom, it is important that their mental health needs are being supported.

### What Helps To Engage Our Thinking Brain?



**Learning Zone**  
The 'sweet spot' in learning  
Here the student is stretched and growing

#### Learning Zone Model



**Panic Zone**  
Over stressed,  
learning is blocked  
Arena for 'toxic stress'  
and 'trauma'

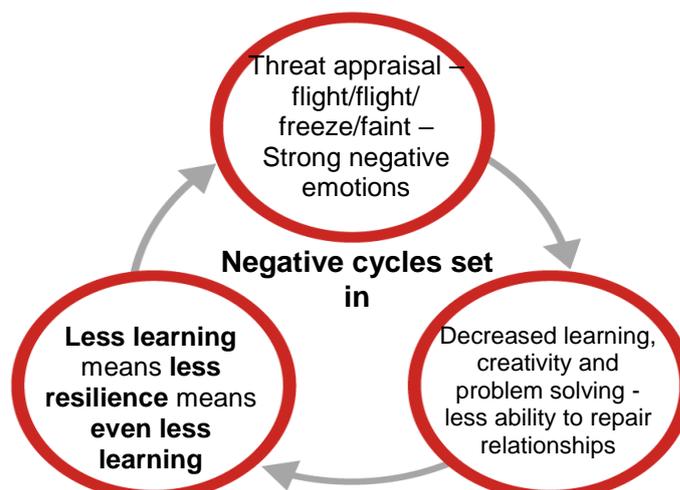
**Comfort Zone**  
Safe, boring, not  
challenged  
limited new learning

*(Vygotsky 1978) (Senninger 2000)*

Children are only able to learn effectively when they feel emotionally regulated. Some stress or challenge is normal and needed for resilience, but each individual has different amounts they are able to cope with based on their past experiences or trauma, something that might be only mildly challenging for one child may send another into the panic zone and therefore unable to learn

It is important to acknowledge that "stretched and growing" may feel different for different pupils e.g. for a shy pupil, speaking in class may be stretched and growing, for another it may be answering an extra challenge question.

### What Does the 'Panic Zone' Look Like?



## Anxiety

### What is Anxiety?

Anxiety is something that can take many forms in children in young people and it is something that everyone experiences at low levels as part of everyday life. For some it can become more challenging to cope with.

Anxiety can be broadly categorized as someone who has an overestimation of danger in a situation as well as an underestimation of their own ability to cope with it. An example someone who suffers from social anxiety may worry about being involved in social interactions and how they will act or what they will say in that situation this would be paired with a fear that if it went wrong they wouldn't be able to cope with this.

Anxiety usually has fear and avoidance at its core.

### What to look out for

People suffering from anxiety may display one of more of the following:

<b>Thoughts</b> <ul style="list-style-type: none"><li>• “What if...” thoughts – worrying</li><li>• Catastrophic thinking</li><li>• Uncontrollable, obsessive thinking even after reassurance</li><li>• Thinking they are going crazy</li><li>• An absence of thought – their mind goes blank</li></ul>	<b>Behaviours</b> <ul style="list-style-type: none"><li>• Avoidance of certain situations</li><li>• Excessive reassurance seeking</li><li>• Social withdrawal and isolation</li><li>• Increased irritability</li><li>• Decreased ability to perform normal daily activities</li><li>• Impaired ability to meet the responsibilities at home or school</li><li>• Worrying (more than you would expect)</li></ul>
<b>Feelings</b> <ul style="list-style-type: none"><li>• Fear</li><li>• Worry</li><li>• Nervousness</li><li>• Uneasiness</li><li>• Panic</li><li>• Helplessness</li><li>• Despair</li><li>• Overwhelm</li><li>• Distress</li></ul>	<b>Physical Sensations (when our body goes into fight or flight mode)</b> <ul style="list-style-type: none"><li>• Dizziness</li><li>• Tiredness</li><li>• Heart palpitations</li><li>• Muscle aches and tension</li><li>• Trembling or shaking</li><li>• Dry mouth</li><li>• Excessive sweating</li><li>• Shortness of breath</li><li>• Stomach aches/nausea</li><li>• Pins and needles</li><li>• Sleep difficulties</li><li>• Cognitive symptoms</li><li>• Changes to bladder/bowel movements</li></ul>

# Recognising and Responding to Anxiety

As the return to school approaches, the prospect of being around others may be daunting after the experience of lockdown. Some, whether adult, teenager or child, may have spent extended periods shielding, isolating from their friends and family. Even those viewing the return with anticipation and excitement may also suffer with underlying fears about safety. Anxiety is not always easy to spot and can be masked by other emotions and behaviours and we may not recognise the fears that sit beneath. Some common things to look out for.....





### SOMATISATION

- Expression of anxiety as physical symptoms in the body
  - Headache
  - Nausea
  - Stomach ache
  - Sickness or diarrhoea



### OVER COMPLIANCE

- Agrees without thought
- Robotically good to avoid detection
- Discounts own needs to see to others
- Overly helpful

### WITHDRAWN

- Distant, aloof, hard to reach
- Avoids interaction with others
- Stays on the outside of groups
- Low energy
- Disengaged, non-participative



## Inward

### Mobilisation/Immobilisation Dissociative/Freeze/Flight Responses



### INEFFECTIVE SELF-REGULATION

- Self harm
- Substance misuse
- Over exercising/activity
- Difficulty in acknowledging the need for or accepting help



### DISRUPTED EATING

- Loss of appetite
- Controlling eating
- Over eating to obscure/cover up anxiety
- Obsession or aversion to particular foods
- Picky eating



### DISRUPTED SLEEP

- Waking early
- Night terrors and nightmares
- Difficulty falling asleep
- Bedwetting

## Ways of Responding

- **Notice, describe and wonder aloud** - 'It seems like it's really important for you to feel like you're in control of things right now, I'm wondering why that might be?'
- **Offer supportive care** 'what could I do that would be helpful right now?' 'Would it be helpful if I.....?'
- **Accept and validate the perspective of the individual, even if this is different from your understanding of events** 'so you are letting me know just how awful you are feeling about this, I can understand why you would feel that way'
- **Avoid distracting, minimising or problem solving for the individual**
- **Offer opportunities to move, teach self regulation strategies and practice these together**

- **Offer a lower stimulus environment** - a quieter area with fewer people, a space outside
- **Show genuine interest** - 'can you help me understand how this is for you?'
- **Be conscious of your own breathing and body language** - make it audible and slow it down, stay steady and regulated
- **Teach the neuroscience of how the body and brain responds to fear** - this helps to normalise and remove any shame
- **Be warm, empathic and non-judgemental**
- **Hold limits and boundaries whilst maintaining connection** - gentle on the individual, firm on behaviour and expectation
- **Offer sensory breaks and a sensory diet if appropriate to support regulation**



[www.traumainformedschools.co.uk](http://www.traumainformedschools.co.uk)

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## **When to be concerned**

Some anxiety or nervousness in certain situations is normal for most people, but sometimes it can become a cause for concern.

- Symptoms have been occurring for a prolonged period
- The symptoms are becoming life interfering or there is an escalation of the symptoms they are experiencing
- More symptoms begin to accumulate
- You begin to see signs and symptoms of other disorders developing.

## **Strategies to support**

The 5Rs can be used to talk to individuals to support them with strategies they can use to help them manage their feelings of anxiety.

If there is a concern about a member of the school community struggling with ongoing anxiety, it is important that you follow the whole school policy as outlined in Whole, Happy, Healthy and Safeguarding policies by speaking to a DSL in the first instance who will take the relevant next steps.

## **Some simple things everyone can do to support a person suffering with anxiety:**

- Suggest they try to focus on what is going on around them and to let go of the panicky thoughts
- Address or test negative expectations
- Address uncertainty where you can
- Promote sense of control (avoid too many choices)
- Support manageable steps to overcome fears
- Support young people to get active 'have a go' and put fears to the test rather than overthinking
- Provide a quiet space to start practicing deep breathing

Check in again on their anxiety levels (self-rate 0 to 10), use these to help them reflect on what makes a difference.

## **Some options if anxiety persists:**

Local Wellbeing Practitioners/Early Help  
Educational Psychologist  
School Counsellor  
CAMHS  
School pastoral support

## Example Case Study

Steven has transitioned into Year 6 at Primary School. He has a diagnosis of ASD and ADHD and is awaiting a decision about an Education Health Care Plan (EHCP). Steven has not attended school during lockdown as family were shielding due to his dad having a medical condition. Parents are very anxious about his SEND needs being met on his return to school following lock down. They are very reluctant to allow him to attend school due to the risks of him bringing the infection into the home.

### Steven's View:

Steven was very anxious about returning to school and is still reluctant to leave parents at home. He is worried that he is going to struggle with the work in Year 6 as he has found the home learning very difficult. Steven also feels quite socially isolated as he has not seen any of his friends out of school. He is also worried he may pass Covid-19 onto his dad.

### Actions taken:

Steven has spoken to his parents about his concerns. They have recognised his worries and reassured him that it is understandable to be worried.

He is going to make an effort to talk to some of his friends who are in his class and try to develop some social interaction online when he isn't in school.

He has talked to his class teacher about how he is feeling. The teacher has recorded details of the conversation and recommended he joins a year group lunch clubs to build his social interactions with others in school.

Class teacher and SENDCO met with Steven to discuss his feelings and concerns.

Key information from the meeting about Steven has been provided to all necessary staff so that all are aware of his circumstances and know how best to support him in school.

Class teacher, Year Group Leader, DSL and SENDCO will monitor Steven closely and arrange regular catch-ups.

Follow-up meeting arranged with parents to review progress and EHCP decision later in term. Refer to school Pastoral Support for further support with anxiety if required and refer to external agencies as needed.



#### Steven:

- Steven **recognises** he is worried and uses his **relationships** to discuss his concerns
- He **reflects** on the future and starts to make **changes** based on a new plan
- These steps help to **regulate** Steven's feelings and emotions
- Doing this will help Steven build his **resilience** and **coping** skills to successfully complete Year 6 and his transition to Secondary School

#### School:

- School **recognise** concerns about wellbeing
- School uses strategies to build positive **relationships** with Steven and his parents who are also anxious
- School adopt strategies to allow time for **reflection** and help Steven **regulate** his feelings and emotions
- Doing this will help Steven build his **resilience** and **coping** skills to successfully complete Year 6

## Low Mood

Everyone feels low or down from time to time. It does not always mean something is wrong. Feeling low is common after distressing events or major life changes, but sometimes periods of low mood happen for no obvious reason.

You may feel tired, lacking confidence, frustrated, angry and worried. But a low mood will often pass after a couple of days or weeks.

If you're still feeling down or no longer get pleasure from things for most of each day and this lasts for several weeks, you may be experiencing depression. The tips on this page should help, but you may also want to find out about what further support is available.

**Signs of low mood are loss, demotivation and rumination (chronic feelings of shame, guilt, regret, anger or envy)**

Feeling sad is a normal human reaction, but what could it look like when it starts to affect someone's life?



### Things you might notice

Becoming quiet and withdrawn

Becoming irritable with temper flares

Alternating between being withdrawn and irritable

Looking tired or as though they haven't slept properly

Distancing themselves from their friends and staying by themselves

Poor attendance

Deterioration in self-care

Self-harm

### **Possible triggers for low mood/depression**

- bullying and problems with peers
- being exposed to adversity including child abuse
- life changes (including living through the Covid outbreak)
- death of a parent, loved one or friend
- parents splitting up
- school problems
- moving away from home or country
- other members of the family being depressed
- having other illnesses

### **Useful questions to have in mind when talking to someone with low mood**

- What is difficult at the moment?
- What is less difficult at the moment? -if you had to choose one thing
- What's it like getting up for school in the morning?
- What are you having for lunch today?
- What's happening this weekend for you?

Using terminology such as 'less difficult' may elicit a more open response as many people with low mood struggle to identify what is 'good' at that moment, so asking them what they find good about their current lives would just get a response of 'nothing'.

Ask open questions rather than closed to give them the opportunity to talk and give you more information about how they are feeling – 'What's it like...?'

### **Indicators of increased risk – suicidal thoughts or feelings**

A small number of children experiencing low mood or depression will feel that life is no longer worth living. These feelings will usually have built up over a time or in reaction to a specific event. Many things can prompt suicidal feelings and thoughts; these include children who:

- are living with mental illness
- are experiencing abuse
- are being bullied and being a bully (with a personal history of victimisation)
- are experiencing complex grief
- have very low self-worth
- live with complex family issues (such as parental disputes, neglect, hostile and chaotic home environments)

Development of social and emotional skills and identifying children with low mood and getting them help early, we can prevent escalating thoughts of self-harm.

If you are worried a child is at risk, you should speak to one of the Designated Safeguarding Leads as a matter of urgency who will contact other agencies as necessary.

## Example Case Study

Anita is in Year 5. She was always a bubbly girl prior to the lockdown with Covid-19. Anita was at home during the lockdown and did not use the online education offer from school.

On her return in September you notice that she seems low, and not her usual self, maybe lost some weight, not looking well. She seems to be avoiding her friends and her mind seems to wander in class – a change. She can't seem to get her thoughts together. 3 weeks later things seem to be getting worse, not better.

### What school could do to help Anita

- See Anita and offer her **support, encourage** her to engage.
- Use **active listening**. What has changed for Anita? Be curious about her experiences
- Help her to choose an activity, perhaps one she has enjoyed previously and encourage her to re-engage. Perhaps a physical activity or creative outlet.
- Consider how peers might help, for example being paired up with a friend to help in class, drama or sport.
- Help to re-establish her confidence in small steps in class and overcome fears she had from lockdown.
- Let her know she is supported and you are looking out for her.
- If Anita's mood does not improve consider further supports, such as school counsellor if available.
- Make time to be together, don't push it but be ready to hear and listen.
- Be sensitive that she may prefer to talk to someone else. That's OK, support her.
- Encourage her to get more active, because low mood feeds off inactivity.
- Help her to choose anything that she used to like doing. Encourage someone she trusts at home or school (depending on the activity) to do it together, a walk, a game, a favourite TV show. Small simple things done together in a calm warm way can make all the difference, even washing up together or cooking together.
- There may be community networks/peers to reconnect Anita with.
- If faith is important, there may be linked networks.

## Trauma and Stress

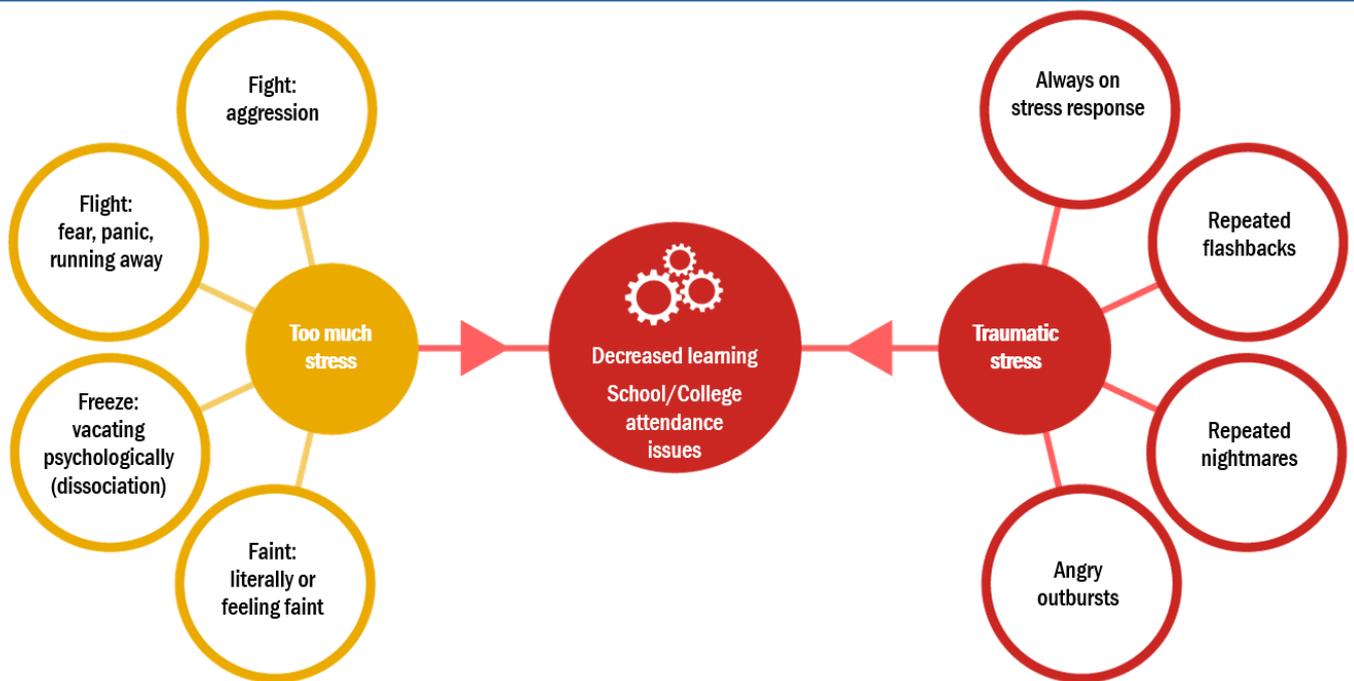
What is trauma?

When stress is **too much, too sudden**, then trauma occurs:

- Loss of control, threat to life, or the individual's perception of these
- Witnessing a relative seriously unwell or dying in traumatic circumstances from Covid-19

Current trauma can reactivate previous trauma.

### Stress and trauma: what does it look like?



Both too much stress and traumatic stress can lead to decreased learning and engagement.

### Trauma in the context of COVID-19

The COVID-19 pandemic has led to an increase in ACE's (Adverse Childhood Experiences) which are potentially traumatic events that occur between the ages of 0-17.

- Racism, homophobia, transphobia and other forms of discrimination, intolerance and abuse
- Domestic abuse (escalating concerns)
- Child abuse or neglect (escalating concerns)
- Young carers (supporting a parent/carer who is shielding)
- Economic impacts (losing jobs)
- Online bullying during lockdown

Most people recover with everyday support through social scaffolding but some will need specialised support.

## What can we do to support children who are suffering from trauma?

### Build relationships:

- Ensure safety and protection from harm
- Support calming of mind and body
- Re-establish learning confidence in small steps
- Build on coping strategies
- Be sensitive to different cultural contexts e.g. impact of racial trauma like killing of George Floyd

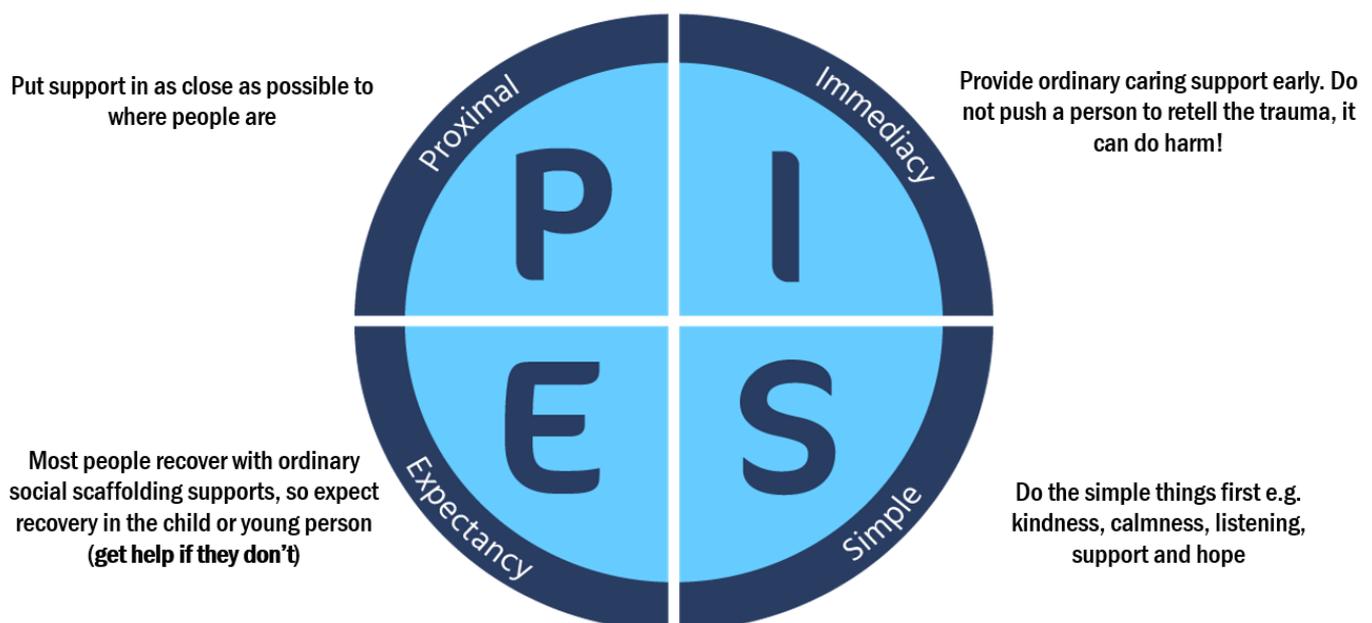
### Respond to Adverse Childhood Experiences (ACEs) including:

- Recent trauma, historical traumas, racial traumas (e.g. intergenerational, post-slavery), chronic complex trauma
- Much more learning is available and advisable including [MindEd ACEs sessions](#), these are free and you don't need to login or register.

Major public health studies such as the cdc.gov have shown that when children who have suffered several painful life experiences and do not get the help and support they need; there is a high chance of them going on to suffer in terms of their mental health and wellbeing. Schools can provide a secure/safe base and an opportunity to experience relationships that heal minds, brains and bodies. Through small interactions which support communication and connection, can make all the difference

PIE- can be a practical framework to support individuals through trauma. I think this emphasizes how day to day interactions can make a big difference for the majority of individuals who have suffered trauma.

## Helping those with trauma

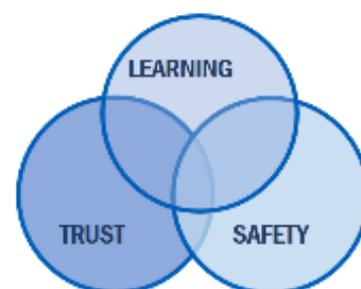


## PACE Approach - Adapted from the work of Dan Hughes

These ideas can be seen in the context of developmental trauma-It is important to focus on relationships (in particular trust and safety) as well as learning. **Our pupils will need us to focus on trust, safety and learning.** This approach is about rebuilding trust, thinking about barriers to trust and how to overcome these using the **PACE Approach** (Playfulness, Acceptance, Curiosity and Empathy)

### PACE Approach

- **Playfulness:** Light, hopeful, open and spontaneous. Especially the non-verbal elements to communicate safety –e.g. “*Hey, It’s great to see you. I thought of you at the weekend when I saw...*”
- **Acceptance:** Listening to understand. Respecting the individual experience of the other person. Finding ways of demonstrating that s/he is worthwhile and wanted including correction being carried out while maintaining connection –e.g. “*We will work this out together. Help me to understand so that I can help.*”
- **Curiosity:** Non-judgmental, not-knowing, active interest in the others’ experience. Curiosity leads to reflection and learning (including solving problems collaboratively) –e.g. “*Are you ok? I’m worried about you. What’s going on?*”
- **Empathy:** Felt sense of the other; actively experienced and communicated with compassion / care. When someone understands you it creates a strong connection –e.g. “*Thank you so much for telling me. That sounds really stressful.*”



The aim of interactions using a PACE approach is to overtime, ‘wear down the blocked trust and to turn the blocks into bridges.’ Dan Hughes

### How do we make the classroom a safe, secure place for learning; in which the individual feels confident to take risks?

Relationships are key- if the young person lacks trust, they may be overly controlling/hostile or the opposite may be true and they may see the teacher as a rescuer/source of safety and become overly reliant/dependent on the adult both in terms of their social needs, but also their approach to learning.

Thinking in terms of safety- issues may arise in terms of a child’s awareness/sensitivity to the proximity of an adult- for example, if the student is overly watchful/anxious, do they want an adult to be close or do they find individual attention challenging, could this impact on where they are seated in the classroom?

In terms of learning: some young people may have difficulty in relation to the task demands, they may struggle to stay in the ‘learning zone’, or struggle to be vulnerable enough to take risks, to not know something, or may fear failure. Equally if children have been subject to high level of stress, either in the long or short term; they may struggle with higher order

thinking tasks such as creative thinking or imagination. As a result they may need support for learning in these areas, such as support with short term goal setting, tasks broken down into smaller steps or strategies to support organisational skills or meta cognitive thinking.

Overall, the key emphasis for PACE, for children who have experienced trauma and are struggling to cope is an equal emphasis on building Learning skills as well as building Trust and Safety. The aim of interactions using a PACE approach is to overtime, 'wear down the blocked trust and to turn the blocks into bridges.' Dan Hughes

### **What else can adults do to help?**

- Validate the child's feelings/empathise; "It seems as if you are finding this really hard". "This has made you feel really angry today"
- Make sure that the child knows they are being listened to. Show that you are trying to hear what they are saying through their behaviour.
- Learn to 'read' the child's non-verbal responses (e.g. facial expressions, tone of voice etc.). These are more accurate cues to how a child is feeling than what they say.
- Try not to say "don't be silly", "it doesn't matter", "it's not important". It may be trivial to you but not to them.
- Make sure the child knows "I want you here". Threats of removal or exclusion cause fear and panic. They reinforce the child's feelings that they are bad, unwanted and have to be sent away.
- Avoid negative comments and sarcasm, which will only reinforce the child's belief that they are valueless.
- Avoid describing behaviours using emotive words, like 'manipulate' or 'lying'.
- Encourage the child/young person to think about their coping strategies.
- Find other ways to communicate with the child if emotional vocabulary is limited e.g. through play or drawings/pictures.
- Sometimes it's helpful to avoid questions – instead make guesses and see how the child reacts to them.
- Explain clearly any changes in routine and staffing – including why there is a different teacher (they might think it's their fault that a teacher has left).

- Consider seating the child near a wall so they feel more secure and don't need to keep scanning around them for danger.
- Enhance a sense of safety and security through routines and predictability, structured activities, and close supervision.
- Help the child to remember past events so that they can develop a more balanced perspective on the present, e.g. how they coped previously when they felt anxious in a similar situation.
- During busy/noisy times of the school day (e.g. break times) plan for them to be with reassuring people and in quieter areas where they can feel safe.
- Prepare for ways to defuse situations before they reach crisis point, e.g. change to a less stressful activity, listen to music, a story, or distract with a walk etc.
- Connect before correcting.

### **Seeking additional or specialist help:**

Remember to do the simple things first:

Implement the whole school approach

Speak to parents/carers to encourage everyone to work together

Remember safeguarding – speak to a DSL

If concerns persist the DSL or SENDCo will refer on to specialist support from:

- Mental Health Support Team Practitioners
- Educational Psychologists, (where available),
- CAMHS, School Support Teams.
- School Nurses and/or school counselling services
- Hounslow Youth Counselling Service

## Bereavement and Loss

This section should be used in conjunction with the school Bereavement Policy.

### What is grief?

Grief is the experience of losing someone or something of significant value.

“Grief is the intense and painful pining or pre-occupation with somebody or something now lost” (Murray Parkes 2007)

This could be death of a loved one due to bereavement, or other significant loss or change due to changes in financial circumstances or security, loss or changes in carer behaviour, change in terms of feelings of safety and support structures around the individual. It is important to also acknowledge that children may experience strong feelings of loss and even grief about a variety of losses- this might be loss of grades and subsequent opportunities; loss of friendship, loss of cherished objects, loss of relationships, loss of any hoped for future or loss of trust in others.

## Child development , understanding grief

- **Under 2** - too young to understand death but they respond to the absence of a care giver and emotional responses of others.
- **2 and a half to 4 years of age** - concrete understanding of the world, may have some concept of death depending on experience, death may be caused by thoughts and feelings, interested in physical and biological aspects of death, may think death is reversible.
- **4 -7 years of age** - infant age children may begin to have some understanding of the finality of death and the concept that a persons body no- longer works.
- **7-10 years of age** - begin to understand that death is final and universal, may be curious about the details of death, such as rituals- cremation or burial.
- **10 -12 years** - pre-adolescents perceive death in much the same way as adults. They may be able to think about both the biological and emotional process of death/bereavement.
- **12 years plus** - teenagers are at a stage when they are developing their identity and independence, they may be beginning to separate from their parents/carers. Family relationships/beliefs are challenged and a significant bereavement can cause major upheaval and threat to them.

### Stages of Grief

In many cases, these are the stages of emotional reaction to grief but the feelings and persistency of the feelings depends on the circumstances of the death and the significance of the loss for the individual.

- **Shock** - can be physical pain or numbness. Numbness can act as a defence mechanism so we are able to cope with immediate jobs

- **Denial** - in a significant bereavement this occurs generally within 14 days can last minutes, hours or weeks-bereaved person behaves that the dead person is still alive
- **Anger and Sadness** -are part of the growing awareness of the loss, waves of strong feelings that you don't have control over, yearning, anger, sadness, guilt, 'if only...'
- **Detachment** - getting on with things, which leads to re-organisation and acceptance
- **Reorganisation** - the bereaved person is able to re-learn the world consider changes
- **Acceptance**

### Key Messages in the Context of COVID-19 (applicable to all ages and people)

- Adults, children and young people alike will have suffered in this pandemic and the principles of support apply across all ages
- Adults, children and young people bring a lot of different previous experiences, some traumatic e.g. sudden deaths in the family, current or past illness, challenging economic or other circumstances.
- Current stress/trauma can lead to past trauma resurfacing
- We have all had different experiences, thoughts and feelings due to the pandemic
- Remember care and compassion for each other, and for yourself

## Bereavement: What do we mean and what can we do in the context of Covid 19?

Loss and bereavement are common but very difficult events in life.  
They have become complicated by the Covid-19 pandemic.



### Bereavement

Some young people have been unable to say goodbye and grieve in the usual way.

This has been amplified by the loss of access to routines and parts of their support network.

There are many different circumstances.

Lockdown may have caused earlier bereavements to be reawakened



### Action:

- Ask families to alert your school/college as to whether they have had a bereavement and the circumstances.
- Be open and alert to hearing and responding flexibly to different circumstances
- Implement the 5 Key Principles for Whole School/College recovery:
  - ✓ 1. put wellbeing first
  - ✓ 2. re-affirm strengths
  - ✓ 3. prioritise relationships
  - ✓ 4. safety and routines
  - ✓ 5. acknowledge change and loss
- Build on the 5 Rs - relationship, reflection, recognise, regulation and resilience

Children and young people can suffer **other losses** due to Covid-19, including:

- School life
- Transitions
- Social opportunities/loss of family contacts/worries about relatives-missing hugs from family
- Sporting activities
- Friendships
- Trust in adults
- Economic/loss of employment

## How can we help?

### Actions



#### Action:

- Routines and relationships in school are important
- For younger children, 1:1 pretend play may help them. Follow their play, don't lead it
- Older children may welcome a regular chat and check-in: creative activities also help
- Being clear on plans and what is happening
- Remember children with other vulnerabilities; a bereavement is likely to compound difficulties such as:
  - ✓ Previous traumatic loss
  - ✓ Young carers
  - ✓ Looked after children
  - ✓ Ongoing family psychiatric disorder
  - ✓ Physical vulnerabilities
  - ✓ Hidden disabilities (e.g. autism)

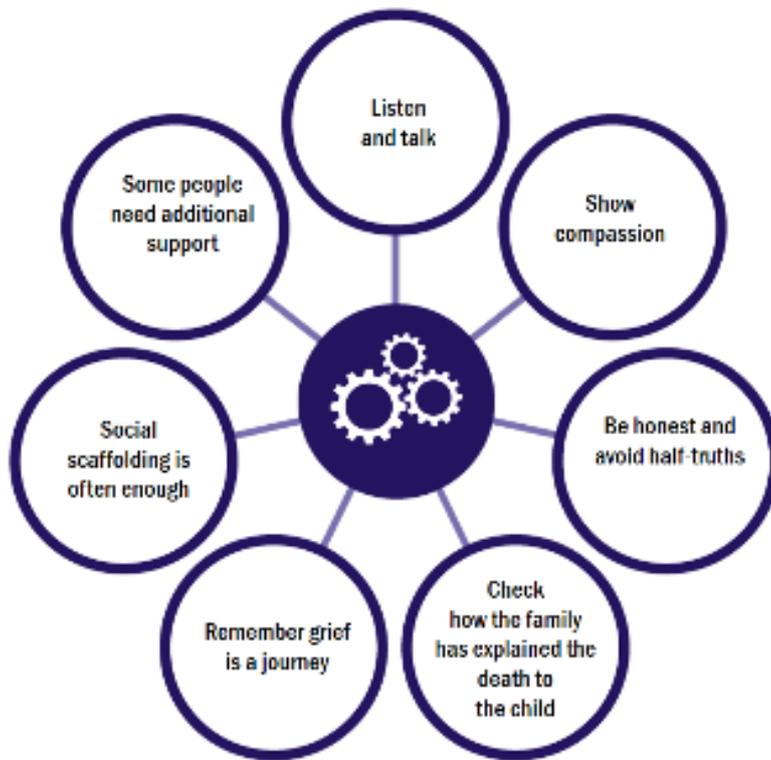


Regular chat and check in

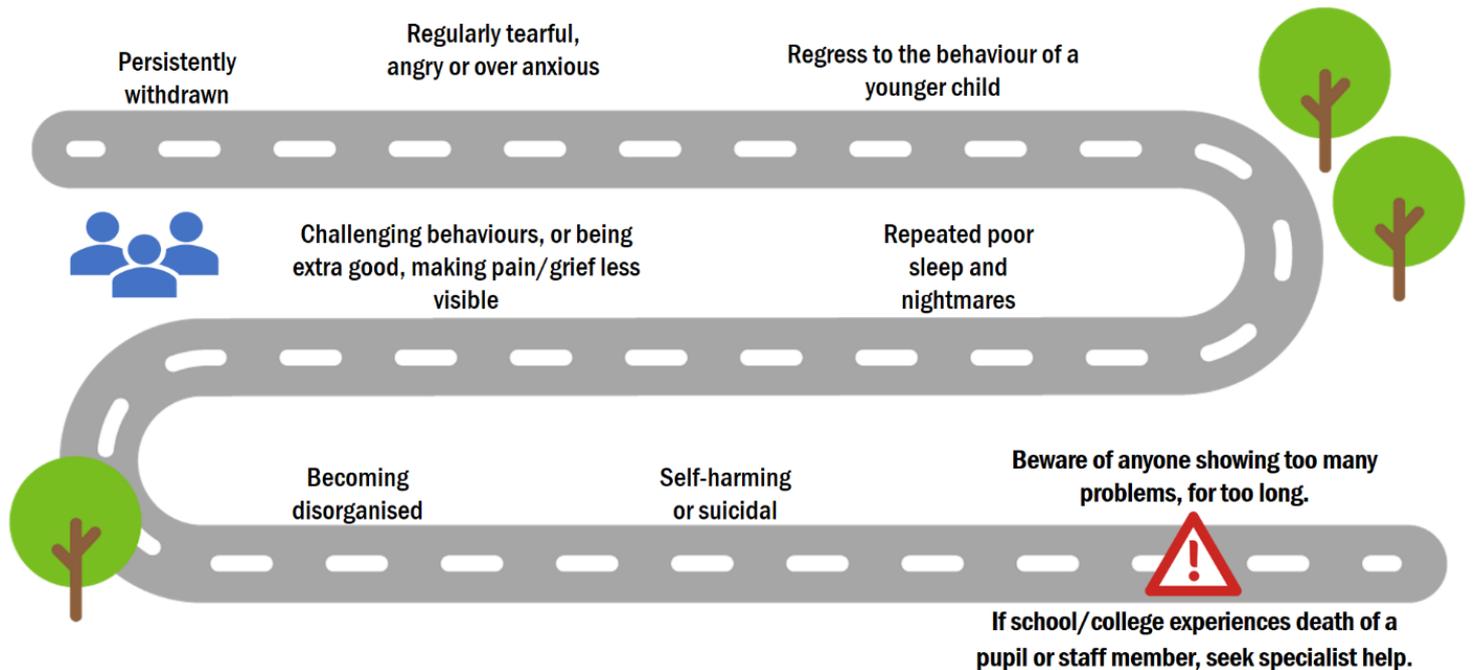
With autistic children, the ability to understand what is coming and plan for it, will be most impactful.

**'Remember grief is a journey' it is important to note that grief is not linear. Children can move in and out of their grief and will revisit it as they grow and that is part of the journey. Children don't 'move through' their grief, it stays with them and can come back and different points e.g. times of general transition, specific topic triggers (e.g. anniversaries) and particularly during changes to routines and uncertainty, which is inevitable at this time.**

## Things we can do to help – Relationships and Communication



## Behaviours that might indicate need for more support following bereavement or loss



When talking to a child about the death of someone close to them, it is important to use the words ‘death/died’ rather than ‘loss/passed away’ as these can confuse children into thinking that it is possible for the deceased person to return.

## Example Case Study (Death of a Parent)

Josie' lived at home with her mother, father and older brother. Josie's dad died suddenly from a heart attack when she was in year 5.

Josie's class teacher was in her second year as a teacher and offered support from her perspective as her classroom teacher.

In the first few weeks and months, Josie's mother struggled to cope with the death of her husband, as she was also caring for her elderly parents, whilst also working part time and she is worried about how she will make ends meet. Since the bereavement, Josie's mother felt that Josie had been quiet at home, both she and her brother tended to spend a lot of time in their rooms.

Josie was described by her teacher as a well behaved child at school who always tried her best in class.

Josie was unsure about how she fits in with her friends and how she could talk about her feelings with her friends. She felt different.

### Josie's Challenges

- Eager to please, at first Josie struggled to share her feelings.
- Josie was struggling to connect with her existing friendship group.
- Josie was missing attending her swimming training sessions and missed the regular routine and meeting up with swimming friends.
- Josie didn't want to worry mum, she spent a lot of time in her room either colouring or playing on the I pad.

### Support Offered

- Josie's teacher **recognised** Josie's difficulties and planned for additional support.
- Josie was given space to **reflect** on her feelings and she had time a nurturing adult to support her gave Josie had a timeout card she could use, this helped her to recognise and **reflect** on her own emotional needs.
- Josie teacher **recognised** that she needed some additional support and training was sought by the school.
- Josie was able to start to share her feelings and connect with trusted adults through supportive **relationships**.
- Josie was offered support in emotional **regulation** such as mindfulness activities.
- Josie's teacher took things at Josie's pace, showed patience and took Josie's lead to help support her **self-regulation** skills.
- Josie's teacher sought informal support from colleagues for her emotional **regulation**.
- Josie's **resilience** was supported over time. Over time she sought less direct support from her teacher and TA and her independence grew.

- Step by step, Josie gradually resumed more of her daily routines, including school work, spending time with trusted friends both in and outside of school, and playing for sports teams in school.
- Josie's teacher did check in with Josie's family with Josie, at an important point of transition in the first term of secondary school. Her teacher reported that Josie is now flourishing.

### **Useful questions to have in mind**

- What has the child been told and what they understand?
- How to tell the rest of the class or form and other staff about what happened?
- How the child will return to school?
- How the child will be supported in school if they get overwhelmed or upset – who they can talk to and where they can go?
- How to balance flexibility and structure e.g. with handing in homework on time, contributing in class?
- What are the key dates that the school should be aware of (e.g. the birthday of the person who died, the anniversary of the death)?
- Any changes to the pupil's emergency contacts and ways of keeping in touch with the family?
- How the child's needs and wishes will be reviewed over time?

### **Checklist of key actions from the individual's perspective**

- Please talk to me about how to let the rest of the class and staff know what has happened
- Ask how I am feeling. It may not be obvious
- Check in with me once a week so that I know you are still supporting me from a distance
- Arrange for me to get extra help with my work
- Talk to me about what has happened. I may need more information, advice and education about loss (Jo Bird)
- Understand what I will not 'get over it' or 'put it behind me' but with time I will learn to cope with all the changes
- Help me to find new dreams of the future and make plans
- Realise that I have a lot on my plate. I will keep up as best I can
- Let me know about groups for children and young people who are also coping with loss and change (Jo Bird)
- Give me extra encouragement for all the things I am managing to do and keep me in mind