KidsMatter is a national primary school mental health promotion, prevention and early intervention initiative developed in collaboration with the Australian Government Department of Health and Ageing, beyondblue: the national depression initiative, the Australian Psychological Society, and the Australian Principals Associations Professional Development Council and supported by the Australian Rotary Health Research Fund.

KidsMatter at Living Waters Lutheran School
Alarming statistical trends

- The number one disabling illness in Australia today is neither cancer or heart disease. It’s depression.

- One in five Australians will experience depression in their lifetime.

- Over six million Australians (43%) have either a personal or family history of depression.

- Mental Illness is currently the leading cause of non-fatal disability in Australia.

- Globally, the World Health Organisation predicts depression to become the leading cause of disability by the year 2020.

- In the past thirty years the suicide rate for Australian males aged 15 to 24 has tripled.
Mental health challenges for children

- Children are exposed to increasingly common challenging circumstances, such as family breakdown, parental mental illness or drug/alcohol abuse, poverty and racism.

- Children who do not receive adequate support or have less effective coping skills may develop emotional or behavioural problems.
THE NEW STUDENT
[BY BILL WATKIN,
DEPUTY HEAD, LEIGH CTC, ENGLAND]

On the phone

Text messaging

Internet
Chat room
Email

Listening to
music

Doing homework

Watching TV

Homo Zappiens
Extent of the mental health problems in children

- Nearly one in five children and adolescents will have an emotional or behavioural problem at some time during their youth, regardless of their social circumstances.

- 10% of children will have significant mental health difficulties (e.g., anxiety) at some time in their childhood.

- 3% of school-aged children already suffer from serious mental illnesses (e.g., serious depression, obsessive compulsive disorder).
Government Action

- On July 14th 2006 the Federal and State Governments agreed to a comprehensive package of measures to address mental health issues.
- This package is worth $4 billion over 5 years.
- A new National Action Plan on Mental Health 2006-2011 has been developed to address this, with a significant emphasis on promotion, prevention and early intervention in children.

‘It’s true the noisy and disruptive children get attention and the quietly troubled are usually ignored.’

Ian Hickey, Clinical Advisor to Beyond Blue
APAPDC Projects

APAPDC is committed to building effective, inspirational & sustainable leadership in Australian schools
What is KidsMatter?

- A national mental health promotion, prevention and early intervention initiative for primary schools

- Developed in response to national concern about the mental health of children and the need for coordinated and strategic action

- Recognises that mental health is vital for children’s learning and wellbeing
Development partners

- Australian Government Department of Health and Ageing

- *beyondblue: the national depression initiative*

- Australian Psychological Society

- Australian Principals Association Professional Development Council

- Supported by the Australian Rotary Health Research Fund
The importance of children’s mental health

- Children who are mentally healthy:
  - Learn better and achieve more
  - Are motivated and committed
  - Have positive relationships
  - Are better able to meet life’s challenges
  - Can contribute to their families, friends and society in ways that are appropriate for their age
  - Can more successfully manage the transition to adolescence and adulthood
Why put a mental health initiative into schools?

- Almost all children attend school at some time.
- Schools have a profound influence on children, their families and the community.
- Schools, along with families, have a crucial role in building children’s self esteem and developing their competence.
- School mental health programs have been shown to be effective.
- Teachers are the most frequently consulted professionals (after GPs) by parents of children with emotional or behavioural problems.
- When teachers are actively involved in mental health, interventions can reach generations of children.

‘Our work is not about a curriculum or a teaching method... it is about nurturing the human spirit with love.’

Ron Miller
Benefits for schools

When students’ mental health is prioritised, schools are more likely to achieve:

- Higher rates of academic success
- Fewer classroom behaviour problems
- Higher levels of staff satisfaction
- Reduced special education referrals

‘If our schools graduate young people who are self-aware, can manage their emotions, are aware of others, have good relationship skills, and can solve problems effectively, we’ve given them a terrific start.’ CASEL
Aims of KidsMatter

- Improve student mental health and wellbeing
- Reduce mental health difficulties among students (e.g., anxiety, depression and behavioural problems)
- Increase support and assistance for students who are at risk or experiencing mental health difficulties
KidsMatter approach to children’s mental health

- Based on a comprehensive model that involves the entire school community and all aspects of school life
  - School ‘climate’, policies and practices
  - Teaching and learning
  - Parents, families and community groups
- Builds on what schools are already doing for students’ mental health
Risk and Protective Factors

School Protective Factors
- A sense of belonging and connection
- Positive relationships
- Feeling safe and supported
- Recognition for achievement
- Feeling successful
- Opportunities to contribute
- Positive friendships

School Risk Factors
- Bullying
- Poor attachment to school
- Lack of cultural recognition
- Inappropriate curriculum
- Peer rejection
- Ineffective behaviour management

The School

The Child

Community Factors

Family Factors

Individual Factors
Implications for Living Waters Lutheran School, Alice Springs
We aim to provide a Christ-centered education in a caring and diverse community that equips every child to develop their potential, so that they can shape and enrich their world.
Our school:
370 students
25 teaching staff
13 support staff
Implementing the initiative...

- Staff and parent survey
- Mental Health map addressing the four components of KidsMatter
- Initial component planning
- Prioritisation is critical
The four components of KidsMatter

**Component 1:**
A positive school community

**Component 2:**
Social and emotional learning for students

**Component 3:**
Parenting education and support

**Component 4:**
Early intervention for students who are at risk of or experiencing mental health difficulties
## Component Plan

**Contact:** Sharyn

### Component 4:

Early intervention for students who are at risk or experiencing mental health difficulties

**Key:** priority on-the-go

<table>
<thead>
<tr>
<th>Status</th>
<th>ACTIONS (FROM STEP 6)</th>
<th>RESOURCES REQUIRED (FROM STEP 6)</th>
<th>INDIVIDUAL/GROUP RESPONSIBLE FOR EACH ACTION (FROM STEP 6)</th>
<th>IMPLEMENTATION TIME FRAME (START &amp; FINISH DATES) (FROM STEP 6)</th>
<th>REVIEW DATE (FROM STEP 6)</th>
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</thead>
<tbody>
<tr>
<td></td>
<td>Providing parents with information and training to recognise children experiencing mental health difficulties</td>
<td>Pamphlets, training, websites, newsletter, other agency input, KM PO</td>
<td>Karen K, KM PO, staff</td>
<td>TBA</td>
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<td></td>
<td>Create a flow-chart of identification process; include parents in chart and Student Services Intervention First</td>
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<td></td>
<td>Create an efficient way to gather/collate and pass on information from teacher to teacher; Link to comp 1 - database</td>
<td>Trial hand over sheet; Appropriate technology; Confidential storage access</td>
<td>Student Support Team; Linda, Sharyn, Karen, Paul; Convenor needed; Karen will source Terms of Ref from Claire</td>
<td>Wk 1, Tm 4, Wed 3.15pm – 5pm to decide on appropriate protocols, checklist, bookings, etc</td>
<td>End of each term</td>
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<tr>
<td></td>
<td>Establish clear protocols and roles for staff when working with other professionals</td>
<td></td>
<td>Support Team During initial meeting</td>
<td>Wk 1, Tm 4, Wed 3.15pm – 5pm</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Student Support Team; incorporate, BM, Spec. ED, Wellbeing with support from SSB &amp; other agencies</td>
<td></td>
<td>KM Action Team; staff, MT</td>
<td>Wk 1, Tm 4, Wed 3.15pm – 5pm</td>
<td>Review mid 2008</td>
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Component 1:
A positive school community

**Our initial focus:**
- Welcoming environment and friendly spaces to gather
- Increased visual celebration of the school’s cultural diversity
- More engagement with the wider community & other schools
Welcoming and friendly school environment

- ‘Class Parent Carer’s’ supporting new families
- Linking SEWB with family conversations
- More playground shaded relaxing areas
Component 2: Social and emotional learning for students

Our on-going focus:

- Effective all age social and emotional learning curriculum
- Fun & engaging activities
- Integrated spiritual & practical
Effective social and emotional learning curriculum taught to all students

- Whole staff training in TRIBES TLC process – 4 days prior to school year beginning
- TRIBES is our collaborative whole school approach, blending ages & SEL activities
- Combining eclectic whole-school SEL programs covering the 5 core competencies (e.g., Friendly Schools Friendly Families) plus individual and small group support (e.g., Seasons For Growth)
Component 3: Parenting support

Our on-going focus:

- Engaging parents in SEWB
- Sharing talk about feelings
- Valuing family dynamics
- Explore parenting problems
Provision of parenting information and education

- ‘The Parent Meeting Room’: Creating Welcome
- Engaging parents by interest areas
- Running special support meetings
- Pastoral Care Coord. going to homes
- Linking with Child & Family Support Specialists & Student Service Referrals
The quickest way for a parent to get a child’s attention ... is to sit down and look comfortable.
Component 4:
Early intervention for students who are at risk of or experiencing mental health difficulties

Our initial focus:
- Processes for addressing the needs of students who are at risk or experiencing mental health difficulties
Processes for addressing the needs of students who are at risk or experiencing mental health difficulties

- Special Focus Weekly Wellbeing Team meeting focusing on individual student & family support, with teacher back-up addressing challenges
- Contract with specialist agencies for student counselling, small group work (e.g., Anxiety), and family referrals when intervention needed
- Broadening the staff oversight of children at risk
Well Being Team Model

- **Meeting Structure**
  - Plan for action:
    - Student need
    - Issues
    - Additional information
    - Support required
    - Actions and Personnel
    - Review date if necessary
  - Reports from each stakeholder

- **Learning Support**
  - Assessment of learning needs
  - Individualized programming
  - Learning needs supported through individual or class strategies

- **Wellbeing Team**
  - May only be short-term
  - Case conference style
  - Roles and Responsibilities defined per case

- **Pastoral Care Co-ordinator**
  - Caseload
  - Seasons / Anxiety
  - Class Parents
  - Contact person for staff, students, and families
  - Staff wellbeing
  - P & F / Parent co-ordination
  - New students

- **Pastoral Care**
  - Individual support (emotional first aid)
  - Contact person
  - Link to outside agencies
  - Specialist programs eg Seasons or Anxiety

- **Crisis**
  - Needs to be managed by Principal

- **Principal**
  - Needs to be informed for parental follow-up
  - To support staff wellbeing initiatives

- **Staff Needs**
  - 1 Staff meeting per term is needed to focus on: staff wellbeing; signals for ‘children at risk’; student support team / wellbeing report
TRIBES
About Tribes

• Creating positive schools and classrooms
• Comes out the States
• Has been around for about 30 years
• Is the work of Jeanne Gibbs and many others
• Is a collaborative approach to teaching and learning
Students achieve because they:

- feel included and appreciated by peers and teachers
- are respected for their different abilities, cultures, gender, interests and dreams
- are actively involved in their own learning
- have positive expectations from others that they will succeed.
Core Values

- Christ-centered
- Love
- Forgiveness
- Compassion
- Service
- Humility
- Appreciation
- Respect
- Diversity
- Endeavour
The clear purpose of the Tribes process is to assure the healthy development of every child so that each one has the knowledge, skills and resiliency to be successful in a rapidly changing world.

The illiterate of the 21st century will not be those who cannot read and write, but those who cannot learn, unlearn, and relearn.

Alvin Toffler
Tribes, How it Works

Tribes is a step-by-step process to achieve specific learning goals. Four agreements are honored:

- attentive listening
- appreciation/no put downs
- mutual respect, and
- the right to pass.
Students learn a set of collaborative skills so they can work well together in long-term groups (tribes). The focus is on how to:

- help each other work on tasks
- set goals and solve problems
- monitor and assess progress
- celebrate achievements.
The learning of academic material and self-responsible behavior is assured because teachers utilize methods based upon:

- brain-compatible learning,
- multiple intelligences,
- cooperative learning and
- social development research.
If at first
you do succeed,
try not to look
too astonished.
The Tribes Process
Tribes uses:

- Strategies for active learning

- Energizers for refocusing the class

- Reflection to make connections between learning
Schools are not buildings, curriculum, timetables and meetings.

Schools are relationships and interactions among people!

Johnstone and Johnstone
Where to from here for KidsMatter at Living Waters?
Evaluation - Action Plans around the four components evolve as programs show their effectiveness
Evaluation of KidsMatter

- Evaluation by Flinders Uni. shows signs that this approach is on the leading edge of improving mental health for students.

- Awareness of specific jargon not the issue – but knowing that kids are actively sharing feelings & experiences in class.

- Parents appreciate the way kids lead talk at home and reflect on behaviours.
KidsMatter 2009

- Australian National Primary Schools Mental Health initiative involving >100 schools is due to be completed Dec 08
- The KidsMatter partners have extended the trial until Dec 09
- A systemic regional approach utilising existing school support personnel to deliver PD and work with school leadership & action teams is likely to be adopted
- All schools will have access to the website, overview booklet, programs guide, carer & teacher resource packs & the evaluations
KidsMatter Resources

- Implementation Manual and Flow Charts
- Programs Guide and Resource Sheets
- Website - www.kidsmatter.edu.au (newly revamped)
- e-newsletter
- Project Officer advice & networking schools

*See resource flyers for more information*
School as a protective factor

“For some children, school …may be the on environment where they have access to reliable, trustworthy adults who believe in them and care for them.”

Alexander, T, A Bright Future for All, Scotland, 2003
“Kids can walk around trouble, if there is some place to walk to and someone to walk with”

McLaughlin et al 1994

“To create these places and to be that ‘someone’ we must, first and foremost, support our own resilience.”

Bonnie Benard 1996
I would be unstoppable. If I could just get started.