



# Relationships and mental health

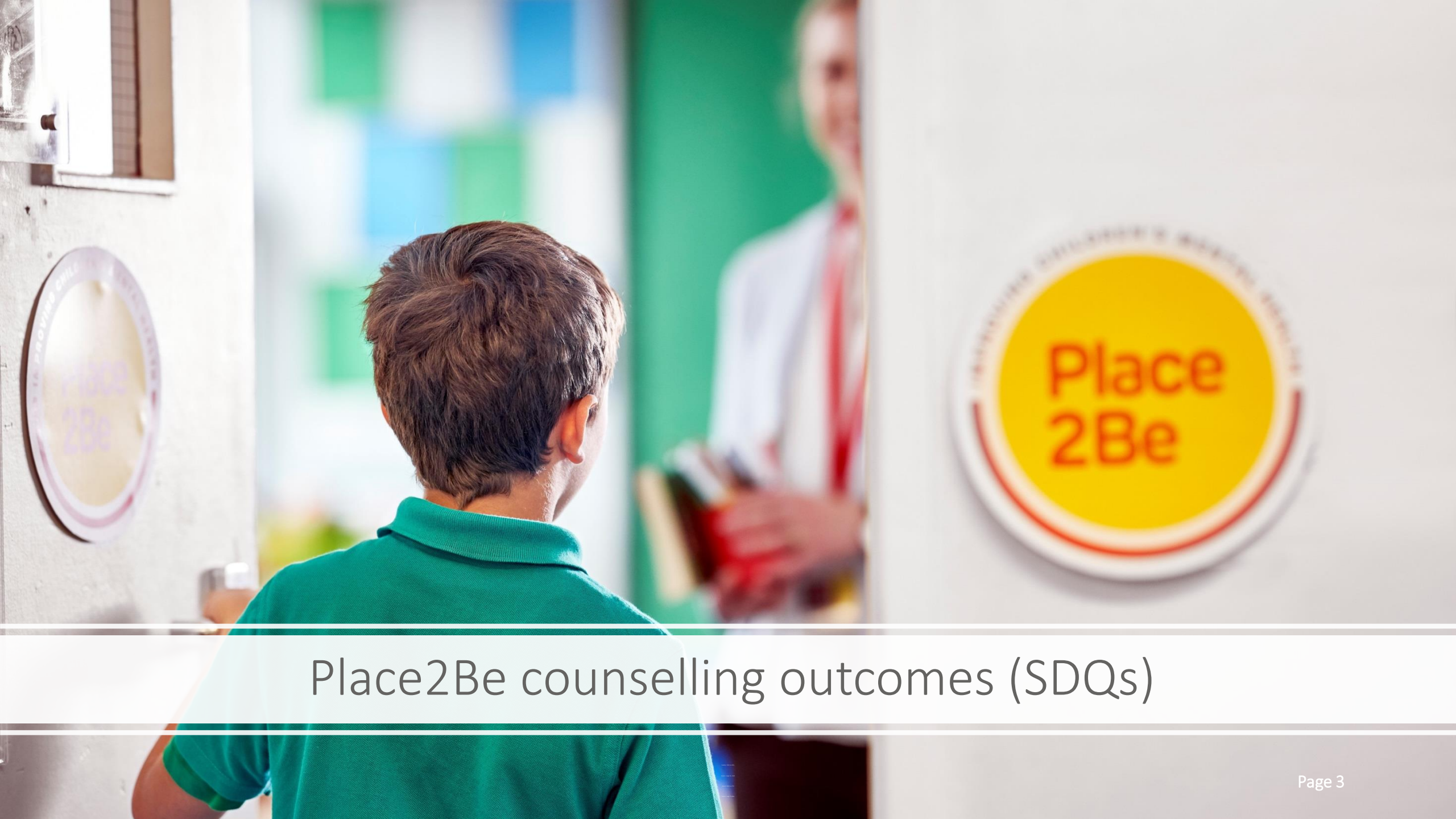
October 25 2019

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# Place2Be in 2018/19:

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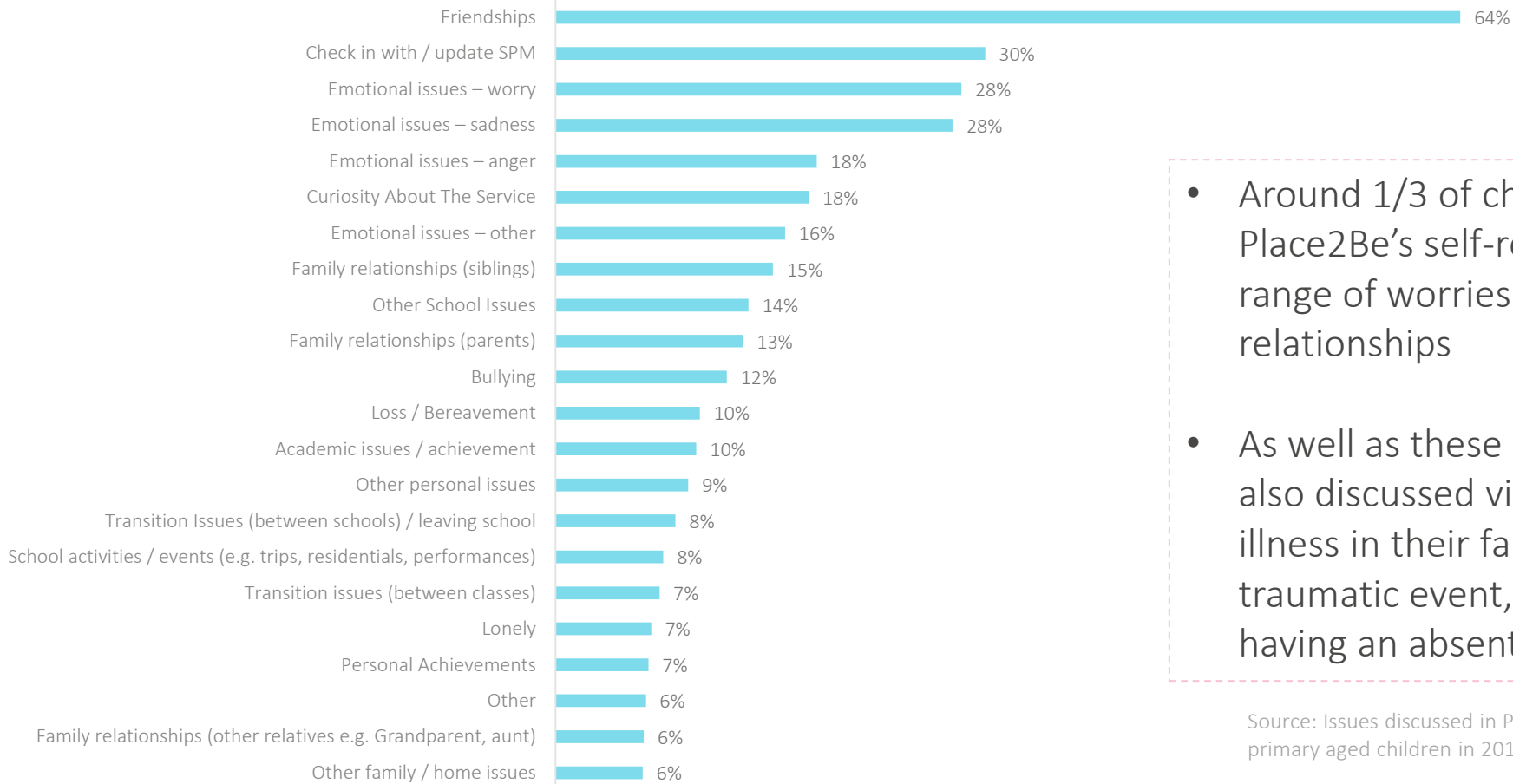
- Place2Be worked with **639 schools**, reaching **364,080 children and young people**.
  - **5,359 pupils** accessed one-to-one weekly support
  - **37,981 pupils** booked their own Place2Talk appointment
- **194 schools** – and **359 teachers** – accessed our School Leaders programme.
- **409 teachers** across **124 schools** completed our Class Teacher programme.
- **547 people** completed a qualifying course through Place2Be.



## Place2Be counselling outcomes (SDQs)



# Self-referral to Place2Talk



- Around 1/3 of children in primary school use Place2Be's self-referral service to discuss a range of worries including anxiety and their relationships
- As well as these common issues, children also discussed violence in the home, mental illness in their family, being a young carer, a traumatic event, sleeping difficulties and having an absent parent

Source: Issues discussed in Place2Be's Place2Talk service by primary aged children in 2017/18, N=35,740

WELCOME

# What does relationship mean to you?

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## **1. The way in which two or more people or things are connected, or the state of being connected**

- The state of being connected by blood or marriage
- The way in which two or more people or groups regard and behave towards each other
- An emotional and sexual association between two people

# What is ‘Mental Health’?

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Mental health is defined as a state of wellbeing in which every individual recognises his or her own potential, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to his or her own community.

World Health Organisation, August 2014

“Mental health does not indicate a state of perfection or saintliness. It is essentially about ordinary living – about physical and emotional well-being, the capacity to live a full and creative life and the flexibility to deal with its ups and downs...

It is moreover, like physical health, not static; it ebbs and flows, functioning well and not so well and carrying, at any given time, its own difficulties or sticking points.”

Peter Wilson, 2002



# Why mental health matters

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- **One in eight** children and young people have a diagnosable mental health problem
- **Fifty percent** of those with lifetime mental health problems first experience symptoms by the age of **14**
- Among teenagers, rates of depression and anxiety have increased by **70% in the past 25 years**
- **NHS England** estimates that poor mental health costs the economy, NHS and society **£105 billion** a year in England



# Relationships – both protection and risk for mental health

Our learning about ourselves  
happens *in relation to others*

- Can be positive and promote resilience
- Can be negative and engender vulnerability



# Attachment theory – our earliest experience of relationship

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- Useful for understanding a child's behaviour in class and around school; getting 'behind' behaviour and understanding the 'message'
- Evolutionary survival requires attachment to caregivers
- Important implications for understanding adults, how they behave and typical styles of being with/working with others

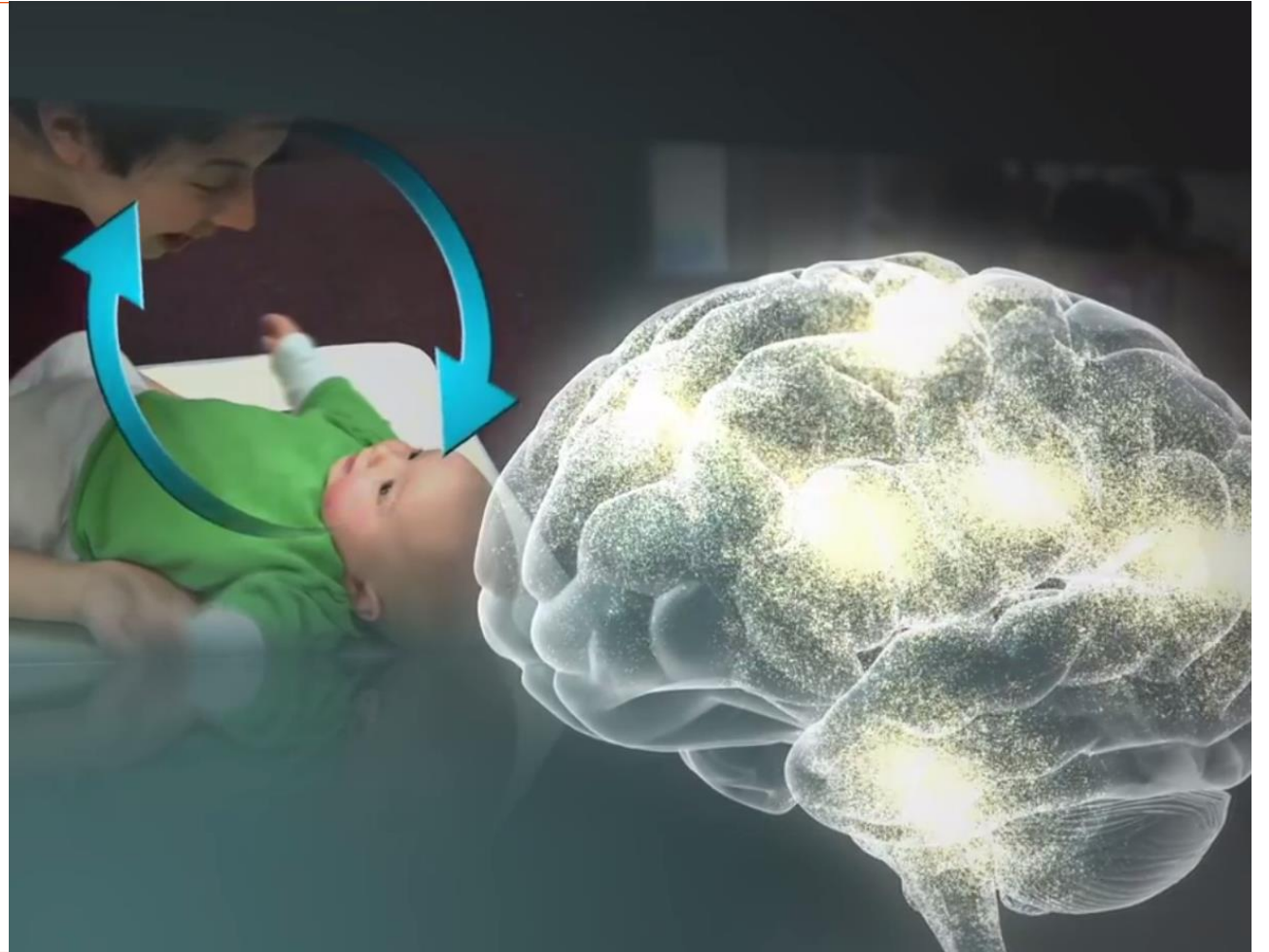
# Forming Attachments



# “Serve and Return”

- Interactions shape brain architecture
- Attunement is making an accurate return to a baby’s serve (needs)
- Lack of attunement can disrupt the shaping of brain architecture
- Can leave the body’s stress system flooded

Harvard Center on the the Developing Child





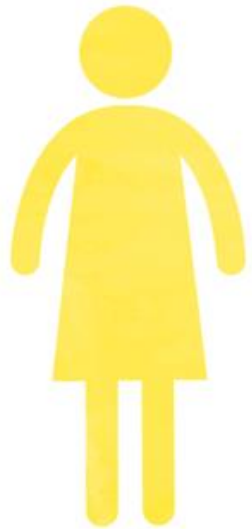
# Attachment theory – our earliest experience of relationship

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- **Attachment behaviour** is what a child does to draw **primary attachment** figure's attention to their needs
- Children develop strategies when they face perceived stressful or dangerous situations (their **attachment system** is activated)
- Through repeated process of **attunement** the child develops a secure **internal working model** (the way they think about themselves and the world around them e.g. “mum responds to me therefore the world is safe”)

# Attachment Theory

I am safe and loveable. I know where to go for help if I need it. The world is mostly a pretty safe place.



I am not sure what is going to happen next and I'm worried. I might tell you to go away and be very clingy



Go away! Leave me alone. I don't need you and I don't care about anything or anybody. If you come too close or if I'm in danger I might lash out

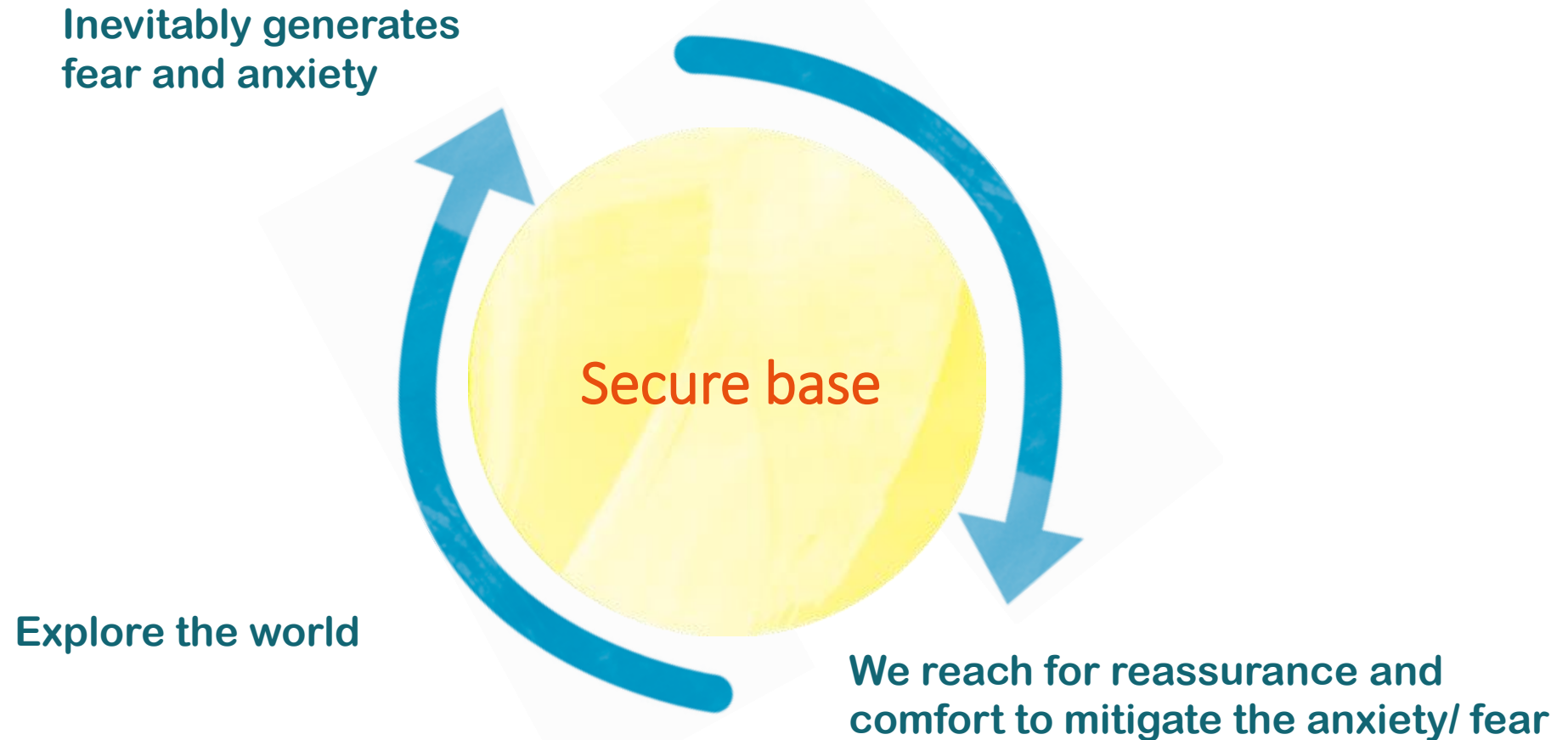


I have no model of safety, sometimes I might withdraw or maybe attack. My responses may be bizarre and unpredictable.

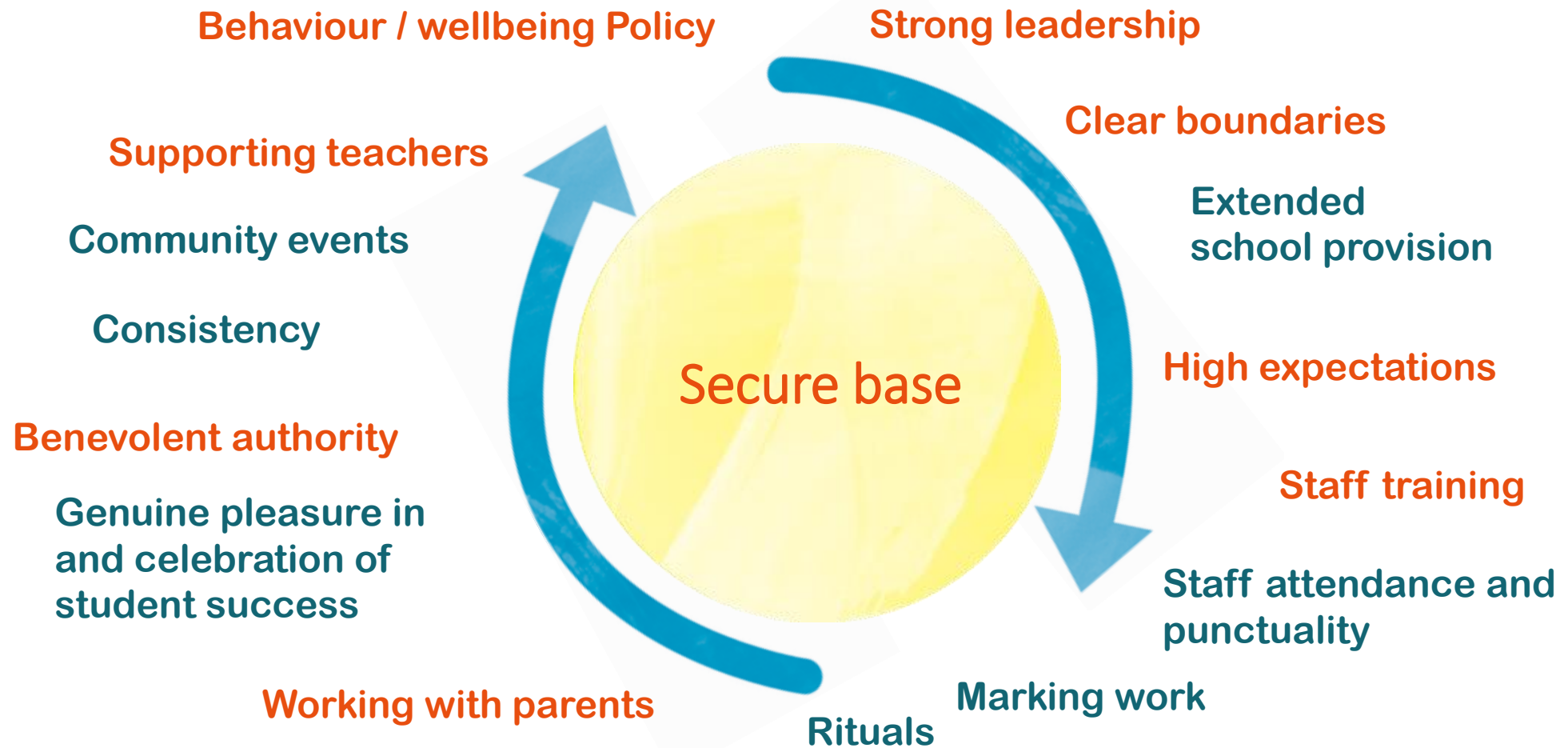


# Secure Base / Safe Haven

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# Secure Base / Safe Haven





# Attachment and the classroom

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- The strategies children with insecure attachments use are necessary (given what they have learnt to expect in their relationship). These help the child remain safe.
- It is not the child's behaviour that needs to change but **their experience with the primary and secondary attachment figures**; i.e. the 'danger' needs to be removed for the child to be able to re-learn how to feel secure in a relationship.

(McKinsey Crittenden 2008)



# Relationships in schools

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- Friendship groups
  - A place to learn about empathy and mutual respect
  - A place to learn about personal power and how to use it kindly
  - A reflection of adult models of groups
- Adult / child relationships
  - How is the power differential managed? Benevolent authority?
- How do the relationships of adults in your school community support the positive mental health of the whole community?

# Relationships – both protection and risk for mental health

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- How can you embed positive mental health and wellbeing in your school?
  - Through teaching in the RSE curriculum
  - Through making mental health everybody's business in schools
  - Making relationships important for everyone
  - School as a safe haven
  - Staff as secondary attachment figures

- Attachment
- Whole School Approach
- Risks and Protective Factors
- Staff Wellbeing
- Working with Parents
- Vulnerable Children

k/risks-and-protective-factors/school-based-risk-factors/relationships-and-belonging/

Course: MHC - Sch... School assessment... Mental Health Cha... Place2Be > A&F So...

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About Website feedback Login / Register **CONCERNED ABOUT A CHILD?**

Getting started Resource Library **Risks and protective factors** Mental health needs Whole-school approach

## RELATIONSHIPS AND BELONGING

Generally, for a child to flourish and achieve in school they need to feel that they belong and are a valued part of the school community. School belonging or school connectedness involves feeling 'personally accepted, respected, included, and supported by others in the school social environment' (Goodenow, 1993).

There is also evidence that this feeling of belonging is an important protective factor as children transition between schools. It has also been linked with improved mental health, reduced involvement in risky behaviours and as a buffer against the effects of disadvantage.

Studies show that poor relationships between children and staff in primary school affect self-esteem and are linked to poorer attainment and poorer mental health. Poor relationships with school staff should act as an alarm bell to invest additional effort with these children, tracking their wellbeing and helping them get extra support if needed.

**What is covered?**

- Children who may be at most risk
- Protective factors: what schools can do
- View resources

[www.mentallyhealthyschools.org.uk](http://www.mentallyhealthyschools.org.uk)





Activity

# Contact information

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