Mental Health and Trauma Informed Schools
Training Courses
In many regions throughout the UK

Our aims, our courses, our awards
Providing training to over 500 primary, secondary, special and alternative schools and community organisations throughout the UK

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The sixteen aims and objectives of Trauma Informed Schools UK

1. Our aim is to address the mental health crisis affecting children and young people in the UK, through providing training in evidence-based trauma and mental health practices in schools and community organisations. We focus on prevention as well as intervention: we aim to support schools to help children and teenagers in such a way that stress/distress does not develop into a mental health problem, learning difficulty or challenging behaviour. Our evidence base of over 1000 research studies (neuroscience, psychology, education, medicine) informs us in this task.

2. With over 1 million children in the UK with mental health problems, counsellors going into schools to see a few children each week will never be enough to address the enormous unmet need. Our aim therefore is to train all school staff to be emotionally available in the ways they relate to children and young people. Children spend 190 days a year at school, so we believe that schools are very well placed to pick up the baton in actively supporting child and adolescent mental health.

3. We aim to train key staff to be able to deliver interventions specifically designed to support children and young people suffering from mild to moderate mental health problems. Because of our experience in providing mental health training in over 500 primary, secondary, special and alternative schools and community organisations, we entirely endorse the research findings of the Government Green Paper, 'Transforming Children and Young People’s Mental Health Provision' (December 2017), which states: There is evidence that appropriately-trained and supported staff such as teachers, school nurses, counsellors, and teaching assistants can achieve results comparable to those achieved by trained therapists in delivering a number of interventions addressing mild to moderate mental health problems (such as anxiety, conduct disorder, substance use disorders and post-traumatic stress disorder).

4. Our trainings are ACE (adverse childhood experiences) informed. Major public health studies (e.g. Felitti and Anda 2010) replicated around the world, have found that when children have suffered several traumatic life experiences, there is a high risk of them developing mental health problems, behaviour problems, learning difficulties, and/or being given a psychiatric misdiagnosis (ADHD, ASD in particular). That said, a wide range of research studies show that ‘social buffering’ provided by emotionally available adults, can interrupt this trajectory. Our training courses aim to optimise the role of these emotionally available adults. We train staff to be able to ‘protect, relate, regulate and reflect’, in ways that help children make sense of what has happened in their lives and so supporting their mental health and quality of life.

5. We are not training school staff and child professionals to be quasi-psychotherapists, rather, we aim to replicate best parenting practices including listening, understanding, showing curiosity about the...
meaning the child has given to a particular life event, emotion coaching, and use of appropriate words to convey empathy. All these ways of relating to children have been shown to be protective factors against mental ill-health, challenging behaviour and learning problems.

6 Our aim is to ensure that schools support children and young people when they need to talk about mental health issues and painful life experiences: ensuring they know exactly when and where to find the emotionally available adults in their setting. The ‘Make it Count’ campaign (Mental Health Foundation, October 2018) found that nearly half a million children in the UK said they had no-one to speak to at school when they were experiencing feelings of sadness or worry. As a result, many said they had sleep difficulties, tended to fight, struggled with homework and/or withdrew socially. Our aim is to change this.

7 Aim 7 is to train staff in ‘narrative competence’, so that when a child or young person approaches them about a mental health issue or painful life event, they know how to respond, or, aware of limits of competence, know when to refer on. Research findings show that two out of three teachers worry that if they have a conversation with a teenager who self-harms, they will make matters worse for that teenager (Talking Self Harm Report, 2015). This common feeling of ‘narrative incompetence’ in school staff leaves far too many children and young people seeking alternative sources of help, e.g. internet sites which tell them to ‘cut deeper’ or simply ‘end it now’. So we train staff in providing accurate empathic responses and ‘finding the words to say it’. The provision of creative media and resources support these vital, often life-changing conversations.

8 We train adults to run ‘specific focus’ mental health groups for children and young people (e.g. groups for young carers, for those who suffer from anxiety or who have experienced parental separation or divorce). Children’s mental health is often compromised because they feel so alone in what they are going through in their lives. So these very safe, and often deeply moving groups, offer children and young people the opportunity to meet others who are going through what they are going through. With confidentiality in place, children sign up to attend with their privacy ensured.

9 Professor Tamsin Ford states that ‘schools are our default line service in relation to mental health’ (2018). In light of this, our aim is to train school staff to be able to catch the vulnerable children in our schools as they are ‘falling’ not after they have fallen. This means that we train key adults in schools in how to help children and young people to make sense of what has happened to them, rather than waiting until the pain of unaddressed trauma has transformed into depression and/or anxiety, suicidal ideation, learning difficulties or challenging behaviour. Central to our evidence base is the finding that 97% of children with no trauma have no learning difficulties (Burke-Harris et al. 2015).

10 Our aim is to ensure that schools become places of healing for troubled children. Instead of isolating, excluding and punishing troubled children (many of whom have a high ACE score or a psychiatric diagnosis), our trainings support schools to offer interventions which address underlying unmet psychological needs, e.g. for emotional regulation, for ‘narrative medicine’, for a shift in the sensory environment, all the while ensuring that we don’t place children in situations that will trigger primitive impulses of fight/flight/freeze. We support school staff to assess and address the underlying causes of challenging behaviour – rather than simply
addressing the behaviour itself (the latter being far more time-costly and stressful for staff than the former).

11 Our interventions are based on research studies which show that teacher-pupil bonding, increases academic achievement and dramatically improves behaviour. This entails ensuring that all children feel known and valued on a personal level by at least one named member of staff, who knows what really matters to the child: their passions, their joys and if they want to talk about it, their pain. Our whole school approach offers a wealth of interventions for meaningful connection between adult and child. We provide written “Relationship policies” for school staff: how to relate to children in ways that promote their best mental health.

12 We believe that from infant to age 18, every child has the right to learn in an enriching environment, one which stimulates their senses and imagination, and soothes and calms when needed. Scientific evidence shows that sensory rich environments impact positively on developing brains, enhance creativity and improve learning at any age: the provision of carefully chosen colour schemes, an array of lovely fabrics, sensory media, plants, water areas and regular time spent with nature and animals. Research also shows that the provision of sensory breaks in the classroom at all ages, will impact positively on mental health, learning and creativity. So our Aim 12 is to support schools to provide enriched environments and imaginative interventions designed to compete with the addictive allure of the 2D world of technology. This is underpinned by research showing that co-operative creative venture lights up the brain with an imaginative intervention design to compete with the addictive allure of the 2D world of technology. This is underpinned by research showing that co-operative creative venture lights up the brain with the intense pleasure associated with recreational drugs and calms and focuses troubled minds as effectively as drugs given for ADHD.

13 Our aim is for schools to become enriched environments for staff too, with active support for their emotional wellbeing. We are acutely aware of poor staff retention in many schools, and the deteriorating mental health in teachers as the result of overwork, stressful school environments and working in competitive, test-driven cultures of fear and judgement. Our training therefore treats the emotional wellbeing, valuing and stress regulation of staff and Senior Leads as a priority. Additionally, we believe that if schools are to become mentally healthy places for all, the value of wellbeing has to start at the very top, with organisations including DfE, Ofsted and the Regional Schools Commissioners, balancing the scales between outcomes (test scores) and emotional wellbeing. We are working to ensure that there is national recognition of the importance of monitoring wellbeing in schools and that Governing Bodies, Trust Boards and Directors make staff as well as pupil wellbeing a key performance indicator for our schools.

14 Our aim is for schools to truly be places of learning where self-awareness and informed insight empowers staff to engage with positive strategies and self-care, within a nurturing community. In developing a well-informed, psychologically and emotionally healthy, empowering cultures of fear and judgement. Our interventions come from evidence-based research on what makes any culture (family/community/ organisation) mentally healthy and what makes it mentally unhealthy. So we work with schools and organisations to implement all the key factors of mentally healthy cultures. For all involved, these include an absence of feelings of threat and danger, a very tangible sense of belonging, an enduring felt sense of psychological safety, meaningful connections, feeling seen and valued, frequent shared laughter.

15 Aim 15 is to support schools to provide Psycho-Education and Child Rights Education. We take findings from psychological, medical and neuroscientific research in order to fully inform children and young people about what they need to know in order to live well – in the classroom and beyond. Research findings show that feelings of hopelessness and powerlessness are hugely detrimental to long-term mental and physical health, hence the need for Child Rights Education to ensure children and young people feel empowered to take control of their lives in the face of threat, danger and abuse, and know that they have a voice which should be heard.

16 Our aim is to transform mentally unwell cultures (children and adults living in fear of being shamed, feeling unknown, unbelonging, not valued) to become mentally healthy cultures. Our interventions come from evidence-based research on what makes any culture (family/community/ organisation) mentally healthy and what makes it mentally unhealthy. So we work with schools and organisations to implement all the key factors of mentally healthy cultures. For all involved, these include an absence of feelings of threat and danger, a very tangible sense of belonging, an enduring felt sense of psychological safety, meaningful connections, feeling seen and valued, frequent shared laughter.
Our training courses

Diploma in Trauma and Mental Health Informed Schools and Communities (Practitioner Status)

12-day University of East London validated course or 10-day course validated by The Institute for Arts in Therapy & Education Level 5.

About this training
Through this ACE (adverse childhood experience) informed course, we aim to empower and inspire staff in your organisation with key psychological knowledge, techniques and interventions to support children and young people’s mental health and learning, whilst being proactive in systemic shift to a mentally healthy culture for all (staff as well as students). The course is based on over 1000 peer reviewed psychological, medical and neuroscientific research studies, and a wealth of practical experience in schools and other settings. The course provides delegates with key insights and skills to be able to identify, reflect on and help change behaviour, mind-sets and life narratives for children and young people suffering from mild to moderate mental health issues. Delegates are empowered to become ‘emotionally available adults’ in the school, proven through social buffering, to interrupt the trajectory from childhood adversity and disadvantage to physical, mental and societal ill-health. The course covers a wealth of deeply moving and creative interventions for emotional regulation and relational change enabling vulnerable children to trust, feel valued, and make sense of what has happened in their lives.

Whole Staff Training in Trauma and Mental Health Informed Schools

3 or 6 hours

About this training
TISUK’s whole staff training empowers staff by delivering evidence-based information drawn from neuroscience, psychology and medicine regarding the main causes of mental ill-health, challenging behaviour and emotional blocks to learning. Delegates will then learn about recovery through our model called Protect, Relate, Regulate, Reflect. Evidence based theories of change will be explored, practically applied through a wealth of tools, techniques and interventions which can be easily implemented in your school or organisation (all time and money saving). Understand how to positively impact your whole school culture to become mentally healthy for all.

Senior Leads Training

2 days

About this training
Inspire change and gain the knowledge and understanding of how to lead and fully implement a trauma and mental health informed approach in your school or organisation.

Certificate in the Art and Science of Therapeutic Conversation with Children and Young People

5 days

For delegates who have already been trained in emotional wellbeing for children (attended a course of at least 6 days, involving work based learning and an assessment process). Application only. Please write to info@trauintformedschools.co.uk for an application form

About this training
Delegates will learn key conversational skills on how to respond when children approach them for help with a mental health issue or distressing life event. We entirely endorse the research findings of the Government Green Paper, ‘Transforming Children and Young People’s Mental Health Provision’ (December 2017), which states: There is evidence that appropriately-trained and supported staff such as teachers, school nurses, counsellors, and teaching assistants can achieve results comparable to those achieved by trained therapists in delivering a number of interventions addressing mild to moderate mental health problems (such as anxiety, conduct disorder, substance use disorders and post-traumatic stress disorder). Yet the ‘Make it Count’ campaign (Mental Health Foundation, October 2018) found that nearly half a million children in the UK said they had no-one to speak to at school when they were experiencing feelings of sadness or worry. Additionally, two out of three teachers worry that if they have a conversation with a teenager who self-harms, they will make matters worse (Talking Self Harm Report, 2015). Our aim is to change all this. So this course will empower practitioners in knowing how to make accurate empathic responses, in ‘finding the words to say it’ and in helping children and young people make sense of what’s happened in their lives. The provision of creative media and resources support these vital, often life-changing conversations.

Diploma in Counselling Teenagers (age 12–25)

25 days over weekend and school holiday days only (after attending the Diploma course in Trauma and Mental Health Informed Schools and Communities, which forms Module One of this training).

After successful completion of this course delegates are eligible to apply for nationally recognised registration as a Counsellor with Teenagers.

About this training
This deeply moving course comprises a wealth of appropriate therapeutic interventions, work based learning, supervision and clinical skills practice. The course will also equip delegates with evidence based psycho-education, namely all the vital knowledge needed to help teenagers make informed decisions about key aspects of their lives e.g. relationships with peers, partners and parents, gender and sexuality, anxiety, depression, peer pressure, use of social media, drugs, alcohol, self-harm, the skill of happiness and what to do with their life. The course will also train delegates to be able to run specific focus mental health groups in a safe highly structured way. For many teenagers their mental health is compromised because they feel so alone. So these groups offer teenagers the opportunity to meet others who are going through what they are going through. Specific focuses include: ‘The pain of being dumped’, ‘Living with regret and how to resolve’, ‘Being a young carer’, ‘Experiencing parental separation/divorce/domestic violence’, ‘Having a parent in prison’, ‘Experiencing sibling abuse’. Our Placement Officer will find you a placement in an area of your choice or look to approve your own choice of placement.
Mentally Healthy School/Organisation Awards

Trauma and Mental Health Informed School/Organisation Awards

If you think that your school or community organisation is Mental Health Informed or Trauma and Mental Health Informed, you may want to apply for one of our four prestigious awards:

1. Mentally Healthy School Award
2. Mentally Healthy Organisation Award
3. Trauma and Mental Health Informed School Award
4. Trauma and Mental Health Informed Organisation Award

The awards are awarded and presented jointly by the Centre for Child Mental Health and Trauma Informed Schools UK. If successful you will be invited to attend our prestigious awards ceremony. At the ceremony you will be awarded a certificate and a plaque for your organisation or school. In order to apply, please submit two sides of A4 outlining how you have implemented a mentally healthy and/or trauma informed approach in your setting, to info@traumainformedschools.co.uk

If successful at this stage we can move forward to inspection (see www.traumainformedschools.co.uk for full procedure).

TISUK Consultancy Visits

One of our Senior TISUK Consultants will come to your school or organisation and offer bespoke advice and support to implement a trauma and mental health informed approach. This will be guided by our evidence-based Implementation checklist.

The consultation package consists of two half-day visits and a follow-up report highlighting both the strengths of your setting and points for development. We can also incorporate a Skype consultation depending on the needs of the school.

If after the first visit your school is ready to apply for one of our TISUK Awards, the cost of the Award visit will be included within the consultation package. If you are ready to apply for the Award after the second visit, we will offer a reduced price for the Award application process.