Diploma in Trauma and Mental Health-Informed Schools
Practitioner status

10 day training over two terms

Aims and Objectives

On average children wait 10 years to get help for a mental health problem. (The Centre for Mental Health Report: Missed Opportunities: Children and Young People’s Mental Health 2016). So schools are left holding the baby. But in many ways it makes sense for schools to pick up the baton as children spend 190 days a year at school whereas a counsellor coming in once a week can only see a few children. But many teachers feel frightened and de-skilled about working with mental health issues. Two out of three teachers for example, are worried that if they talk to children who self-harm, it will make things worse. (Talking Self Harm Report, 2015) Furthermore 50 percent of teachers say the job is causing them severe stress (mostly because of children’s mental health problems) and many are leaving the profession as a result.

That’s where we come in! Our practical skills based training course supported by over 1000 evidence-based research studies, is designed to inform and empower school staff to help vulnerable children and most importantly how to feel supported and nurtured in the process. The course aims to enable staff to respond effectively to vulnerable children and those who have suffered a trauma or have a mental health issue. The psychologist led supervision element of the course, provides practitioners with key insights and skills as well as vital support and encouragement. Delegates will also learn to use ‘Motional’ – our online tool for assessing, improving, and measuring change in emotional health and wellbeing. It will be particularly useful to schools because of the evidence it provides of non-academic improvement with individual students and across different groups of students. So if you want to change troubled children’s lives, positively impact on school culture, and prevent teachers leaving because of stress, then this course is a must.
Course content

The neuroscience and psychology of child and adolescent mental health and ill-health
• Model One: ACE study (Adverse Childhood Experiences Study) and Protective Factors
• Model Two: Professor Jaak Panksepp’s model of mental health, mental ill-health and theory of change

What do trauma and mental health-informed schools and communities do?
• Model Three: PROTECT/RELATE/REGULATE/REFLECT
• Relationships that heal and corrective emotional experience

Bodies, minds, behaviour and learning
• Regulating stressed/distressed children: the science, the psychology and how to be and what to say
• A wealth of regulatory interventions to calm bodies and brains for learning, reflection and quality of life
• From Pain to Violence and often exclusion. Working effectively with traumatic loss and blocked grief
• The scream in the body (what children have seen, heard and felt) and how to respond
• Emotionally regulating conversations with school staff to prevent them suffering from toxic stress or experiencing secondary trauma

The healing power of talking about feelings and making sense of painful life experiences
• ‘I wish my teacher knew’ They want to tell us. Are we ready to listen?
• Key counselling skills for conversations with troubled children and teenagers
• Helping children/teenagers to make the shift from expressing their trauma through challenging behaviour, to thinking about their trauma in conversation with trusted adults.
• The vital role of psycho-education, mental state talk and coherent life narrative.
• Using sand play, creative media and emotion worksheets for safe processing of life experiences.
• Why empathy heals and different ways of conveying empathy with children and teenagers in schools
• The neuroscience and psychology of different mental health conditions.
• Risk assessment, knowing when to refer on and to whom (specific mental health issues)

Aims and Objectives

The course aims to train school staff and community staff to be mental health literate, and trauma-informed practitioners, who are able to:

Direct work with children and teenagers
• Relate to children in ways that alleviate their suffering, support their learning and make them feel cared for and appreciated
• Know how to respond to children who are in distress/stress states in ways that help them to emotionally regulate, feel psychologically safe and develop the capacity to handle stress well over time
• Relate with children in ways that enhance their self-esteem, confidence and feelings of psychological safety
• Know how to listen and empathise when children want to talk about painful issues and help them reflect and resolve
• Develop an in-depth understanding of what it’s like for a child or teenager to live with a specific mental health issue, and feel comfortable in offering them accurate empathy, understanding and key psycho-education.
• Develop an in-depth understanding of the long term impact of specific adverse childhood experiences and how to enable the child or teenager to work through feelings of anger and traumatic loss.
• Provide children who feel ‘mad’ or ‘bad’ with the relevant psychological and neuroscientific understandings to alleviate negative self-referencing and develop coherent narrative for what has happened to them
• Employ strategies for early intervention (early indicators of mental health difficulties), know limits of competence and refer on to other agencies, when these are available.

Work with other school staff/community workers
• Work to increase the protective factors and ‘safety cues’ in the school culture to prevent adverse childhood experiences from becoming long term mental, physical and societal health problems
• Enable staff to think psychologically about pupils and make empathic responses as appropriate
• Support staff to relate to children in ways that enable them to move from blocked trust to trust
• Educate staff to understand when challenging behaviour and explosive outbursts are likely to be trauma triggers and how to calm children
• Using accessible language, support staff with the brain science and psychological research on child mental health problems and their impact on quality of life and learning
• Educate staff about what children need in their relationships with adults, so they don’t suffer misdiagnosis, distress or additional trauma in the school environment
• Support staff in ways that prevent them suffering from high levels of stress, developing secondary trauma and leaving the profession as a result

How to Apply

Please email Rachel@traumainformedschools.co.uk