



WELCOME to the

All in This Together ECHO:

*What's Next? Ideas into Action to Support Mental
Health in Schools*

*Session #1, Setting the Stage: Connecting Mental
Health and Behavior, 28 January 2025*

Funding Statement

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Series Learning Objectives

After participating in this activity, learners will be able to:

1. Recognize when disruptive behavior in the classroom might be a sign of mental health challenges or stress.
2. Describe tools and resources to manage disruptions in the classroom.
3. Discuss mechanisms to engage and collaborate with families of children exhibiting disruptive behaviors.

Series Sessions

Date	Session Title
January 28	<u>Setting the Stage: Connecting Mental Health and Behavior</u>
February 4	<u>Behavioral Therapies: Techniques for the Classroom</u>
February 11	<u>Mindfulness in the Moment</u>
March 4	Sensory and Environmental Strategies
March 11	Language and Strategies for De-escalation
March 18	Navigating Systems, Policies, and Families



Setting the stage: Connecting mental health and behavior in the classroom

Nina Sand-Loud, MD

Becky Parton, LICSW

Children's Current Needs

Depression and Anxiety in children has been increasing over time

- Pre-pandemic - 1 in 5 youth had MH concerns or learning disorder (Osgood et al, 2021), 6-10% had anxiety, 4-5% had depression, *higher rates in teens* (CDC, 2022)
- During Covid - 30-40% of kids said they were anxious, depressed and/or **stressed** (Osgood et al, 2021)

*Keep in mind the disproportionate impact on families who lost jobs, income, housing; families who didn't have access to technology/internet; families living in poverty; people of color; people with disabilities; people with pre-existing mental health concerns; people living in areas with fewer services

Children's Current Resilience

Nearly 4 out of 5 children ages 6 months to 5 years (78%) exhibit all of 4 indicators of flourishing:

- 96% usually or always are affectionate and tender with parents or caregivers.
- 82% usually or always bounce back quickly when things do not go their way.
- 95% usually or always show interest and curiosity in learning new things.
- 99% usually or always smile and laugh.

3 out of 5 children ages 6 to 17 (60%) exhibit all of 3 indicators of flourishing:

- 83% usually or always show interest and curiosity in learning new things.
- 72% usually or always stay calm and in control when faced with a challenge.
- 80% usually or always work to finish tasks they start.

Whole Classrooms

- Teachers have always to be thinking about the “greater good” and balance for the entire classroom
- When one child is dysregulated, it can change the dynamics for the whole classroom
 - Stressful for children and adults to witness
 - May encourage “copy cat” behavior
 - AND... that individual child is struggling and needs help!



ALL BEHAVIOR
Is A Form Of
COMMUNICATION



H. A. L. T.

hungry angry lonely tired

What lies
beneath
behavior?

Underlying
*basic human
need?*

*Developmental
stage?*

Current state
of the *nervous
system?*

Survival
response:
*fight? flight?
freeze?*

*Coping strategy
that no longer
works?*

Structural
changes
in the *brain?*

 **ECHO** PARENTING
& EDUCATION
www.echoparenting.org

Trauma-induced
thinking & conditioning?

How is this
“problem”
the child’s
solution?

How do we respond to stressful situations?



©
publicdomainvectors.org

Flock

Fawn



Fight

Flight



Freeze

THE STRESS RESPONSE IN KIDS

FIGHT

Yelling, Screaming,
Using Mean Words

Hitting, Kicking, Biting,
Throwing, Punching

Blaming, Deflecting
Responsibility, Defensive

Demanding,
Controlling

"Oppositional",
"Defiant", "Noncompliant"

Moving Towards What
Feels Threatening

Irritable, Angry,
Furious, Offended
Aggressive

FLIGHT

Wanting to Escape,
Running Away

Unfocused, Hard
to Pay Attention

Fidgeting, Restlessness,
Hyperactive

Preoccupied, Busy with
Everything But the Thing

Procrastinating, Avoidant,
Ignores the Situation

Moving Away From What
Feel Threatening

Anxious, Panicked
Scared, Worried,
Overwhelmed

FREEZE

Shutting Down,
Mind Goes Blank

Urge to Hide,
Isolates Self

Verbally Unresponsive,
Says, "I don't know" a lot

Difficulty with
Completing Tasks

Zoned Out,
Daydreaming

Unable to Move,
Feeling Stuck

Depressed, Numb,
Bored/Apathetic,
Helpless



Young Children

- Tantrums, outbursts
- Excessive crying
- Clinginess
- Mute or withdrawn
- Unable to focus or sit still during preferred activities
- Extra argumentative

*All of this has to be considered within the context of normal child development, looking at milestones and reasonable expectations

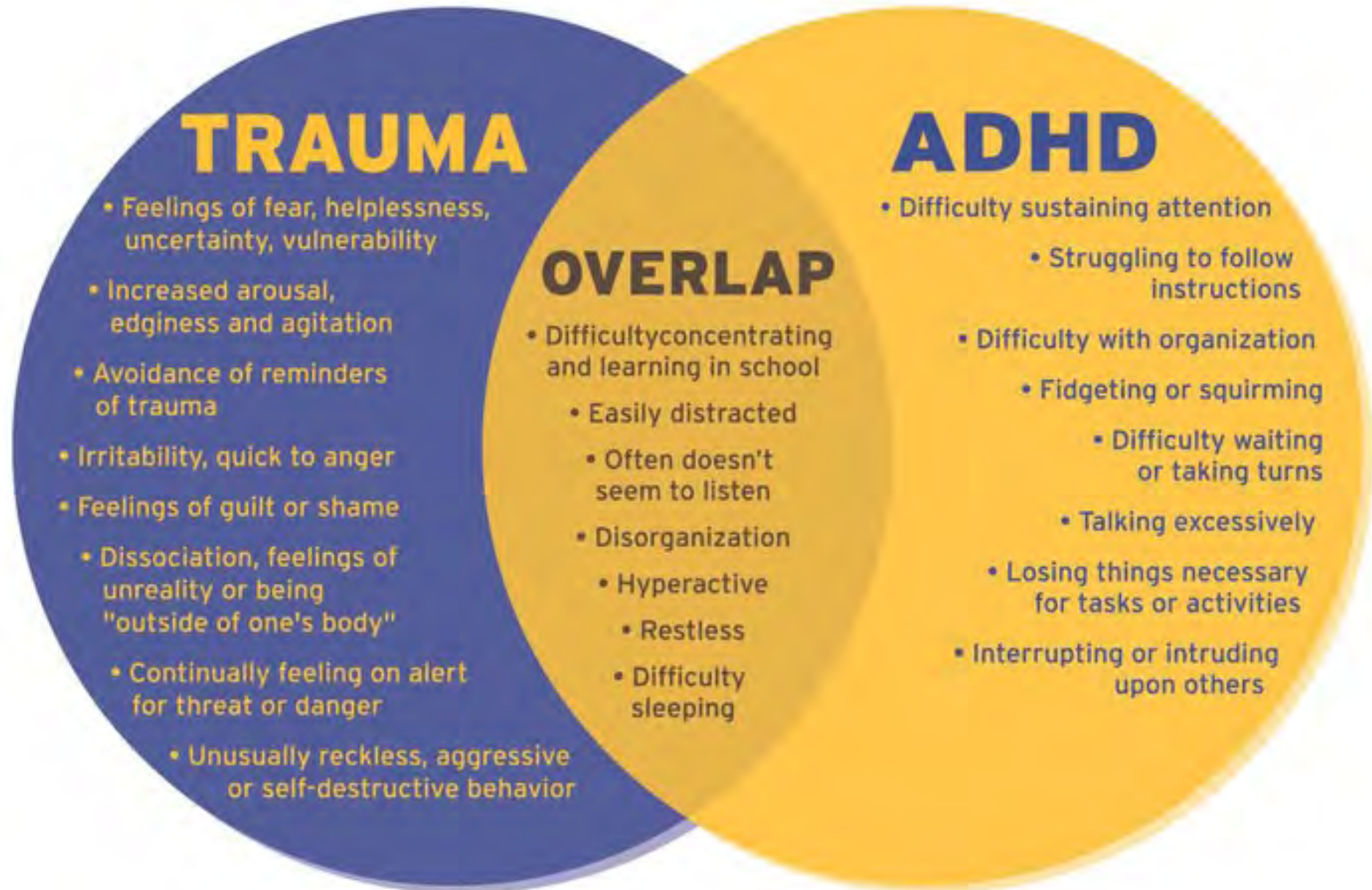
Signs of Anxiety in the Classroom

- Worry, might look like perfectionism or hyperfocus on a specific worry
 - Social anxiety; Performance anxiety
 - Overly sensitive to criticism
- Irritability, anger
- Trouble concentrating
- Withdrawal from activities; Avoidance of new or difficult activities
- Drop in grades, change in school or sports performance
- Sleep problems
- Substance use to cope
- Physical complaints (stomachaches, headaches)
- Panic Attacks

□ Resource: <https://childmind.org/article/signs-of-anxiety-in-teenagers/>

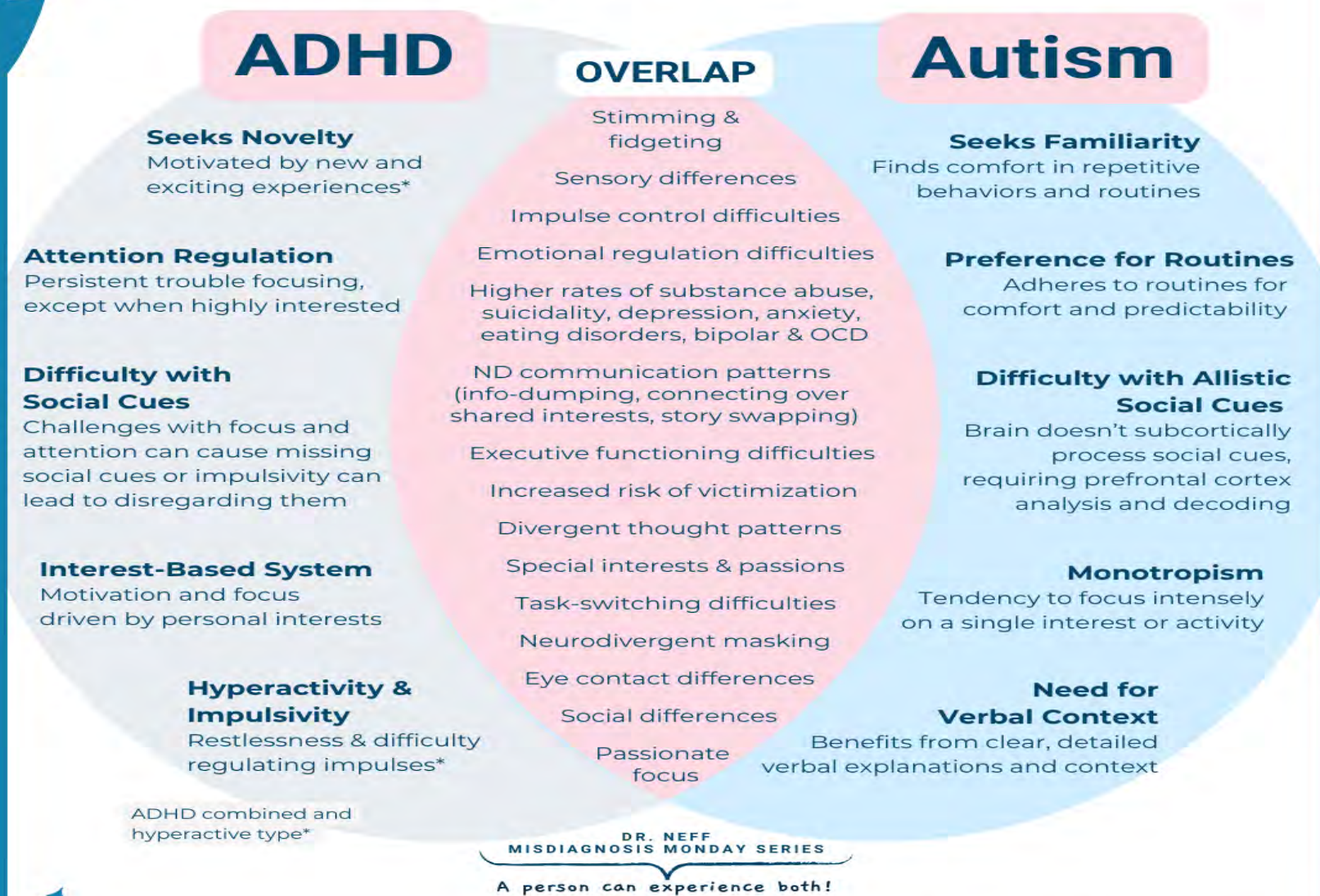
Signs of Depression in the Classroom

- Irritability, anger
 - (Sudden) Change in mood or demeanor (from how the youth acted previously)
 - Tired, lack of energy (can be hard to distinguish from lack of sleep)
 - Not turning in work, change in grades or effort
 - Less interested in peers, activities or hobbies
 - Missing school and/or coming in late
 - Mentioning death or suicide out loud or in classwork
-
- Helpful to rule out trauma, life changes or big events, lack of sleep in general
 - If you have a relationship with the student and traditional methods of engagement aren't working, could be due to Depression
 - Resource: <https://kidshealth.org/en/parents/depression-factsheet.html>



Misdiagnosis Monday

ADHD vs Autism



This diagram represents common patterns but may not reflect everyone's individual experiences. There's significant diversity among Autistic and ADHD people. For more information and a full write-up, visit neurodivergentinsights.com/misdiagnosis-monday

ADHD

HYPERFOCUS
REJECTION SENSITIVITY
PROCRASTINATION
ADDICTION PRONE
SHORT TEMPER, OPPOSITIONAL
IMPULSIVITY, RECKLESSNESS
POOR ORGANISATION, PLANNING & TIME MANAGEMENT
EXECUTIVE DYSFUNCTION

LOW DISTRESS TOLERANCE
EASILY OVERWHELMED
EMOTIONAL SENSITIVITY
OVERREACTION
DISTRACTABILITY
RESTLESSNESS



POOR EATING HABITS
SLEEP DIFFICULTIES
SOCIAL DIFFICULTIES
WORK DIFFICULTIES
LOW SELF-CONFIDENCE
POOR CONCENTRATION

LOW SELF ESTEEM
LACK OF MOTIVATION
IRRITABILITY
GUILT

SADNESS
LOW MOOD
HOPELESSNESS & DISPAIR
SUICIDAL IDEATION
FOGGINESS
OVERSLEEPING
DEREALISATION & DEPERSONALISATION
ANHEDONIA
NOT CARING

AVOIDANCE
FATIGUE, LOW ENERGY

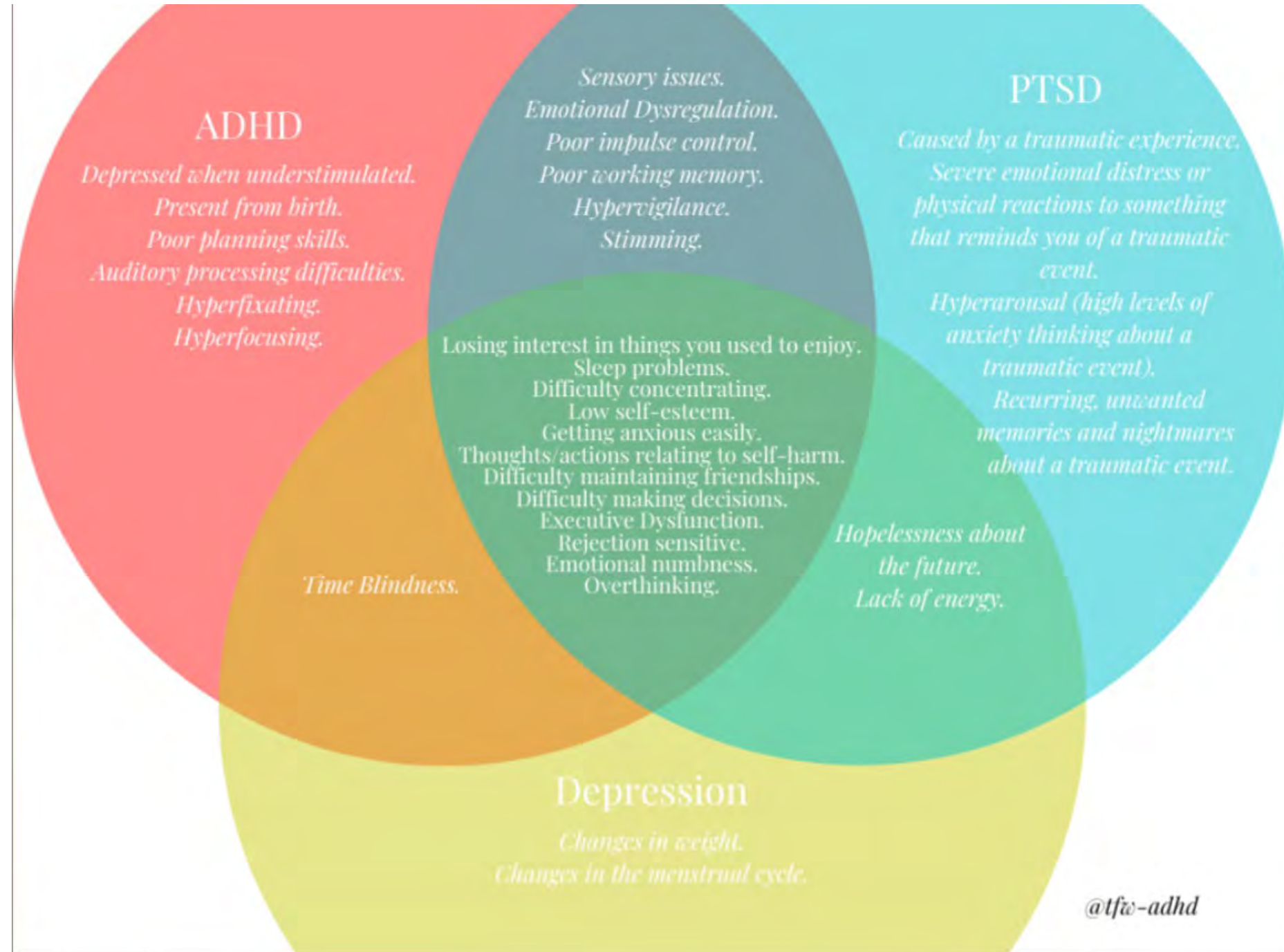
FEAR & PANIC
SOCIAL PHOBIA
PERSISTENT WORRY
WAKING EARLY
PHYSICAL SYMPTOMS:
ELEVATED HEART RATE,
SWEATING, TREMBLING VOICE,
TENSION, NAUSEA, UPSET
STOMACH
CARING TOO MUCH
FIGHT OR FLIGHT MODE
OVERTHINKING
IMPOSTER SYNDROME

HIGH BP & CORTISOL

ANXIETY

GENERALISED, SOCIAL, PERFORMANCE

DEPRESSION



How can we support students?

- Students can't learn if they don't feel safe
 - Physical, emotional, social safety
- Students need to be fed
- Students need caring, consistent adults
- Adults have a shared language about trauma/stress, learning
 - Have a clear plan for unsafe situations/ behavior expectations
- Look at the whole child's well-being
- Teach new skills and give students time to practice them
- Partnership with parents/ caregivers
- Peer support for the adults who work in the school

RESOURCE

<https://www.nctsn.org/trauma-informed-care/creating-trauma-informed-systems/schools>

There are fact and tip sheets:

- Child Trauma Toolkit for Educators
- Fact Sheets based on age/grade about impact of trauma
- “Trauma Facts”
- Self Care tips

FACT: One out of every 4 children attending school has been exposed to a traumatic event that can affect learning and/or behavior.

FACT: Trauma can impact school performance.

- Lower GPA
- Higher rate of school absences
- Increased drop-out
- More suspensions and expulsions
- Decreased reading ability

FACT: Trauma can impair learning.

Single exposure to traumatic events may cause jumpiness, intrusive thoughts, interrupted sleep and nightmares, anger and moodiness, and/or social withdrawal—any of which can interfere with concentration and memory.

Chronic exposure to traumatic events, especially during a child's early years, can:

- Adversely affect attention, memory, and cognition
- Reduce a child's ability to focus, organize, and process information
- Interfere with effective problem solving and/or planning
- Result in overwhelming feelings of frustration and anxiety

FACT: Traumatized children may experience physical and emotional distress.

- Physical symptoms like headaches and stomachaches
- Poor control of emotions
- Inconsistent academic performance
- Unpredictable and/or impulsive behavior
- Over or under-reacting to bells, physical contact, doors slamming, sirens, lighting, sudden movements
- Intense reactions to reminders of their traumatic event:
 - Thinking others are violating their personal space, i.e., "What are you looking at?"
 - Blowing up when being corrected or told what to do by an authority figure
 - Fighting when criticized or teased by others
 - Resisting transition and/or change

FACT: You can help a child who has been traumatized.

- Follow your school's reporting procedures if you suspect abuse
- Work with the child's caregiver(s) to share and address school problems
- Refer to community resources when a child shows signs of being unable to cope with traumatic stress
- Share Trauma Facts for Educators with other teachers and school personnel

RESOURCE

<https://www.echotraining.org/trauma-informed-schools/>

There are graphics and tip sheets:

<https://www.echotraining.org/resources/>

Nonviolent paradigm is an increased “understanding of the importance of using relational healing for relational injury.”

 **DOs AND DON'Ts OF A** 
TRAUMA-INFORMED
COMPASSIONATE CLASSROOM



1 **CREATE A SAFE SPACE**
Consider not only physical safety but the children's emotional safety as well.

2

ESTABLISH PREDICTABILITY

Write out a schedule and prepare children for transitions. It helps create a sense of security and safety.



3 **BUILD A SENSE OF TRUST**

Follow through with your promises and in situations where changes are unavoidable be transparent with your explanations.

4

OFFER CHOICES

Empower students and offer "power with" rather than "power over" strategies.



5 **STAY REGULATED**

Help your students (and yourself!) stay in the "Resiliency Zone" to promote optimum learning. Have regulation tools ready to help students bumped out of the zone into either hyperarousal (angry, nervous, panicky) or hypoarousal (numb, depressed, fatigued).



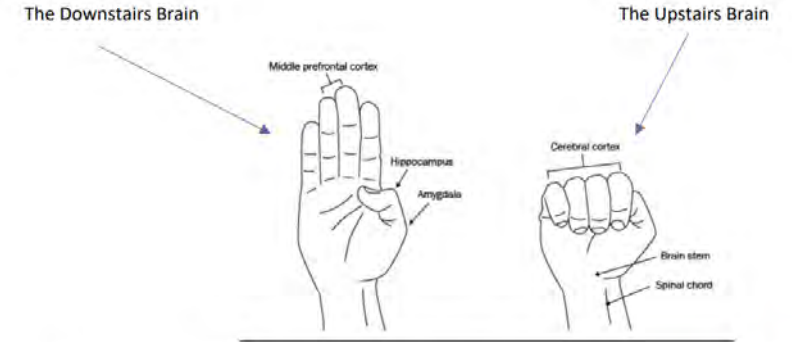
There's really only one **DON'T**
Let's not punish kids for behaviors that are trauma symptoms.



RESOURCE

<https://www.fosteringresilientlearners.org/>

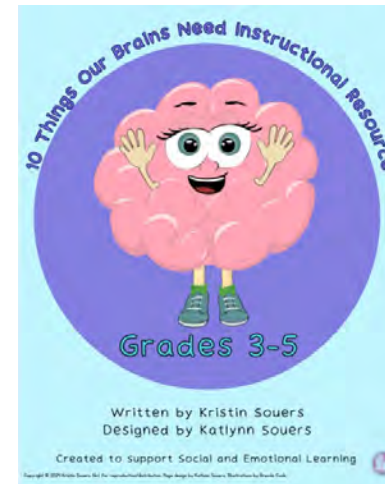
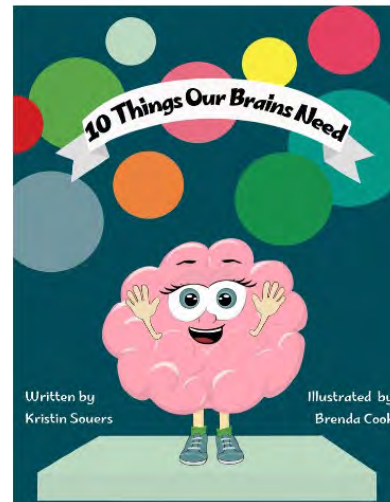
Includes handouts and study guides, new children's book



- Constant activation of the stress response overloads developing systems with potential serious, life-long consequences for the child.
- Living in toxic stress can cause the stress



Sleep 	Deep Breaths 	Laughter 	Healthy Food
Exercise 	10 Things your Brain Requires to be Healthy & Ready to Learn		Limited Screen Time
Challenge 	Gratitude 	Water 	Teamwork





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All in This Together ECHO:

What's Next? Ideas into Action to Support Mental Health in Schools

Session #2, Behavioral Therapies: Techniques for the Classroom, 4 February 2025



Behavioral Therapies: Techniques for the Classroom

Caroline Christie, LICSW, CSSW

A Review of What We Already Know

Thanks to Dr. Sand-Loud and Becky Parton, MSW

Depression and Anxiety in children has been increasing over time

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*Keep in mind the disproportionate impact on families who lost jobs, income, housing; families who didn't have access to technology/internet; families living in poverty; people of color; people with disabilities; people with pre-existing mental health concerns; people living in areas with fewer services

How Are Students Showing Up?

- Reduced Awareness and Focus
 - Why you get upset, why you feel the way you feel, what are your goals?
- Emotional Dysregulation
 - Fast, intense mood changes, mood dependent behaviors, steady negative mood
- Impulsivity
 - Acting without thinking, escaping or avoiding
- Interpersonal Problems
 - Pattern of difficulty keeping relationships steady, getting what you want, boundaries, isolation

Distress Tolerance to Address Impulsivity

- Caregiver Distress Avoidance
 - Intolerance of strong emotional responses
- Incongruence Between What you see and What you get
 - Social media and a lack of present moment awareness
- Pathologizing Behavior
 - All emotions are appropriate

What Impulsivity Can Look Like & What It's Trying to Achieve

- Disruptive (what does it get you?)
- Self-Harm
- Substance Misuse
- Excessive Screen Time
- High Risk Behaviors
- Lying
- Sleeping
- Procrastinating

Skill Building For Distress Tolerance

- Psychoeducation
 - We don't have to be sneaky
- Emotion Identification
 - Students who don't know how they feel experience more distress. There is more than mad, sad, and happy
- Validate Without Solving Or Removing
- Ensure Support And Accommodations Are Strength Based

Dialectical Behavior Therapy DBT

- DBT is an effective treatment for people who have difficulty controlling their emotions and behaviors
- DBT aims to replace problem behaviors with skillful behaviors
- DBT skills help people experience a range of emotions without necessarily acting on those emotions
- DBT skills help students navigate relationships in their environment

Crisis Survival Skills

- Stressful
- Short-Term
- Not resolvable in the Moment
- Impulse Behaviors Might Make It Worse

ACCEPTS: Distract with ACCEPTS

Activity

Contribute

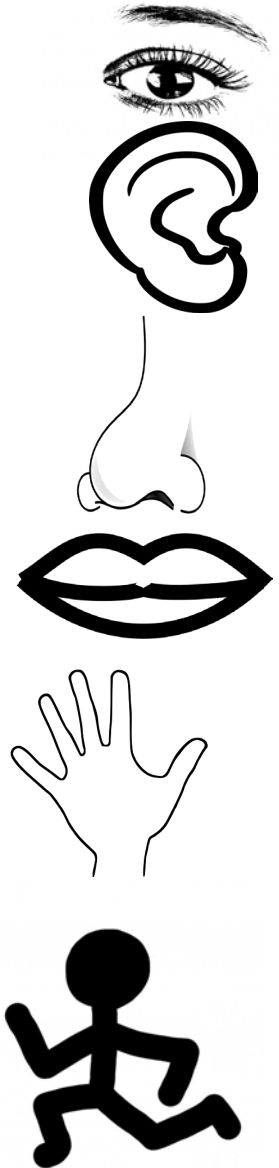
Comparison

Emotions

Pushing away

Thoughts

Sensations



Self-Soothe with Six Senses

Look at photos, posters, people, out windows...notice

Listen to music, nature, play and instrument, sing

Put on lotion, perfume, cookies, coffee

Eat favorite foods and drinks, notice what you're eating

Pet a dog, brush your hair, use an ice pack, sensory tool

Stretch, run, walk, yoga, dance

Using Pros and Cons to Manage a Crisis

Coping skillfully with pain and impulsive urges leads to better results and positive momentum towards goals

Accepting Reality

Doing Things We Don't Want to Do

Pros and Cons Exercise

	Pros	Cons
<p>Old Way: Acting Impulsively (Leaving Class, Getting removed)</p>	<p>Distraction (ST) Avoid Pain(ST) Feel Better (ST)</p>	<p>Miss work fall behind (LT) Removed from community (ST/LT) Feel guilt/shame (ST/LT) Reality Returns (ST/LT) Miss chance to learn skill (ST/LT)</p>
<p>New Way: Tolerating Distress by choosing a skill</p>	<p>Better chance of understanding work (LT) Better chance of connecting (ST/LT) By using skills and feeling mastery, self-efficacy and pride increases (ST/LT) Developing skills to use in many areas of life (LT)</p>	<p>You don't escape hard feelings (ST/LT) Pain is not immediately resolved (ST) Requires work and effort (ST)</p>



WELCOME to the

*All in This Together ECHO:
What's Next? Ideas into Action to Support Mental
Health in Schools*

*Session #3, Mindfulness In The Moment:
Practical Approaches to Supporting Mental Wellness
in the Classroom, 11 February 2025*



Mindfulness In The Moment: Practical Approaches to Supporting Mental Wellness in the Classroom

Gretchen Moulton

**Student Success Coordinator
Haverhill Cooperative Middle School ~ North Haverhill, New
Hampshire**

I provide student support by:

- Helping the student identify with their role as a student.
- Setting expectations to ensure student success.
- Providing structures that support the desired outcome.
- Building and consistently maintaining a meaningful relationship with students.
- Choosing “harm and repair” over “shame and punishment” (Restorative Practices)

Becoming aware of...

- Relationships
- Student Identity
- Restorative Practices

Relationships

Building relationships is the single-most important piece to the puzzle when it comes to providing support. Having a solid foundation with students allows for both laughter and celebration, as well as a safe place to land when tough conversations need to be had. This goes for parents as well.

“How do I build relationships?”

- INQUIRE - LISTEN - INQUIRE AGAIN
- How the student FEELS is EVERYTHING.
- Get them to talk
- Be consistent - Set boundaries and stick to them
- Set clear expectations and teach students how to reach them
- ~~ALLOW~~ REQUIRE VULNERABILITY Be vulnerable yourself and expect the same expression in return

Student Identity

It cannot be assumed that students know how to be students today. As silly as that sounds, due to multiple factors including but not limited to COVID, living life in front of a screen, and the way the world is modeled for them and what they are subscribing to, students are struggling with “how to do school”. Teachers are taking the brunt of the fallout from the multitude of aspects that are deterring student success and they are burning out. Helping students gauge where they are at and where they want to go as a student can open up a whole new world.

“How do I help develop student identity?”

NO JUDGEMENT ZONE!

Keep things positive and focused on progress, not perfection

Brainstorm the role of “student” and “teacher” with your students

Create a list of attributes - nothing is off limits!

Independently choose 3 aspects that can be achieved

Journal the 3 - Review consistently and make action plans

Come up with a way to be ACCOUNTABLE

If you’ve developed that relationship, accountability will not feel like an attack.

Restorative Practices

With a focus on “harm and repair” rather than “shame and punishment”, Restorative Practices provides a way to truly maintain the relationships you’ve built with your students while providing much needed accountability when things go awry. Restorative Practices is also a fantastic tool that can be used proactively to build community and develop a stronger bond.

A stronger bond = SAFETY

“How do I utilize Restorative Practices?”

Begin using Affective Statements (Impact of student’s behavior)

States the feeling, names the behavior, and states the action you would like to see

Ask Affective Questions (Open-ended to help elicit emotion)

“What happened?” - Gain perspective

“What were you thinking at the time?” - Reflect

“What have you thought since?” - Reflect

“Who was affected by what you did?” - Accountability

“In what way?” - Accountability

“What do you think you need to do to make things right?”

Student Success



Behavior is the highest form of communication.

When a student's mental health is suffering, you will see it far before it can be articulated. You may not feel qualified, but hopefully now you have a new approach and greater understanding so that more support can be given.



When students FEEL better, they DO better.

Offering a transparent and vulnerable space for students to express what they need to get out in order for them to move forward can be of huge benefit.

Where do you land?

Six horizontal black lines, each starting and ending with a small black dot, arranged vertically. These lines are intended for a user to mark their position on a scale.

Creativity

Communication Skills

Ability to Ask Questions

Compassion

Flexibility

Good Listener

FINAL THOUGHTS: FACULTY & STAFF

Self-Care

YOU ARE IMPORTANT.
Attending to your self-care and own mental health is key! If necessary, seek guidance.

You're Not Alone

Sometimes it can feel like we are on an island. That's simply not true!
Be vulnerable and speak up if things feel heavy or overwhelming.

Your Best Is Enough

Practice assuming positive intent with yourself and with others. *"Everyone is doing the best they can with the resources they have available."*

**Thank you for this opportunity
and thank you for your time.**

Gretchen Moulton

Student Success Coordinator

Haverhill Cooperative Middle School, North Haverhill, NH

Email: gmoulton@sau23.org

Call or text: (603) 991-6526