

# **Children's Mental Health**

## **Anxiety and Resilience**



L. M Campbell  
Principal, Kimbolton School  
**Term 3, 2018**

## **Acknowledgements**

I sincerely thank the Kimbolton School Board of Trustees and staff for their support, which enabled me to undertake my sabbatical project. I especially thank relief Principal Elizabeth Schaw for covering for me during the term of my sabbatical.

Thank you to the Ministry of Education for recognising the benefits of sabbaticals, not only to principals and their schools but to their colleagues and their students, and for providing the funding to enable sabbatical release.

My thanks go to Rachel Anderson, Family and Education Consultant (ACROSS and Children who THRIVE) for sharing her knowledge and expertise so willingly with me. Thanks too, to Rachel for putting me on track and reminding me to set parameters for my research. There is so much to learn!

Thank you also to Leigh-Ann Griffiths – Professional Development: Children/Youth and Anxiety (practical ways of managing children's anxiety and preventing the escalation of anxiety) for the workshops she runs and her practical ideas.

## **Executive Summary**

We all know a child who seems to over-react to what appears the slightest thing to others. They may completely lose it and run and hide; they may become aggressive and act violently. We are often surprised and bewildered by their behaviour, and punishment of some sort is expected by others. We as teachers, and also parents, need to understand that it is possible an aggressive, disruptive child is actually an anxious child seeking security and comfort. They are often not purposefully defiant, disruptive or aggressive, but responding as a result of an active fight/flight response. An understanding of anxiety, mindfulness and the development of resilience may well help these children cope and control what is happening to them.

## **Purpose**

The purpose of this project was to upskill, and better understand children with mental health and social issues. More and more primary aged children are presenting with mental health problems such as anxiety, which affect their ability to progress in a school environment. The development of resilience is important for these children as their social interactions, lack of self-esteem and at times reactive aggressive responses have an impact not only on their success at school but their mental health later in life.

It is important for educators to understand what these children are living with and what can be done to help them.

I expected my findings would enable me to better support and assist teachers to enhance student learning in the classroom through understanding of the challenges these children face and by being able to suggest more strategies to help children cope with their feelings.

Overall, the expectation was to increase my capability as a leader in dealing with and helping children whose behaviours are affected by anxiety, and to apply any new-found, relevant knowledge at Kimbolton School.

## Rationale and Background Information

In schools we often wonder what is going on when a child seemingly suddenly loses control and lashes out, sulks, refuses to carry out tasks or exhibits other behaviours that make our job more challenging, compromises their learning and at times the learning of others. It is possible the child is suffering some form of, and degree of, anxiety.

Firstly, it is important to understand what is meant by anxiety. Anxiety is a form of stress that can be felt both emotionally and physically. Basically, it is a natural human response that is activated whenever we perceive danger or a threat. It can be worry about what might happen or what might go wrong and sometimes we do not really know what causes our anxiety. We may feel physical sensations such as dizziness, a rapid heartbeat, difficulty breathing and sweaty hands or feet. Anxiety happens when a part of the brain, the amygdala, senses a threat either real or imagined, and releases adrenaline along with other hormones including the stress hormone cortisol, which make the body strong, fast and powerful – the fight/flight response which prepares our bodies for either a quick getaway or to fight. It is our brain looking after us. If there is something dangerous that we need to run away from or a fall we need to steady ourselves from, the amygdala prepares us. Sometimes though, the amygdala thinks there is a threat and prepares us even though there is actually no danger at all at that time.

There are a number of physical changes in our bodies when anxiety kicks in. Our breathing changes from normal breaths to fast, smaller breaths, which enables more oxygen to reach our muscles so we can run or fight. The change in our breathing may cause us to feel breathless or we may feel our face get hot. If we don't fight or take flight, oxygen builds up and carbon dioxide levels drop, making us feel dizzy or confused. Our faster heart beat may make us feel nauseous and even vomit, our arms and legs may tense up and feel tight, our body may try to cool itself by sweating, our digestive system may shut down and we may feel like we have butterflies in our stomach, and our mouth may go dry. Not pleasant feelings!

Anxiety disorders are some of the most common types of mental illness. Although different disorders may present with different symptoms they can all be prolonged, and at an intensity that is out of proportion to the situation. They can affect the daily life and happiness of those affected, as well as those closest to them. Symptoms can come on suddenly or develop over time, and sometimes children don't know what is causing them to feel how they do.

Mental health problems among children and youth are an increasing problem, not just in New Zealand but worldwide, and we are dealing with children who suffer mental health problems on a daily basis. The world our children are living in is different from the world we grew up in and they face many different stressors, for example:

- Lack of attachment time and expectations placed on them.
- The pace of social change.
- The degree of device use.
- The speed at which they are expected to grow up.
- Their exposure to adult ways of thinking (television, social media).
- Changes in values and attitudes.
- The increasing power of peer groups.
- Changes in the makeup of many families.
- Changes in or lack of social support.

## **Activities Undertaken**

Readings: Many – books, education magazines, children's books

Workshop on Children/Youth and Anxiety taken by Leigh-Ann Griffiths Parentline Manawatu (Understandings and strategies for early childhood teachers and others looking for practical ways of managing children's anxiety and preventing the escalation of anxiety)

Meeting with Rachel Anderson; Family and Education Consultant (ACROSS and Children who THRIVE)

TED talks/YouTube clips as recommended by Rachel Anderson - Gordon Nuefeld, Aletha Solter and Dan Siegel

## **Findings**

Children can develop the same mental health problems as adults, but their symptoms may be different. Anxiety disorders including generalised anxiety disorder, obsessive compulsive disorder, post-traumatic stress disorder and social anxiety are all mental health conditions that are becoming more commonly seen in children. If a child's stress or worry interferes with their ability to function normally they are likely to be suffering from an anxiety disorder.

Anxiety is a normal response to something dangerous or stressful and everyone experiences some level of anxiety in their life, ranging from a mild sense of uneasiness to full-blown panic attacks. Some degree of anxiety is normal and even desirable. It helps us stay alert, focused and ready to do our best. However, too much anxiety feels unpleasant, can become overwhelming for a child and interfere with their everyday life, including social interactions. It becomes a problem when it shows up at unexpected times and is severe. It feels awful and children may suddenly lose control of themselves as they deal with their emotions. Anxiety in children can be especially confusing and frightening, not only for the one who is feeling anxious, but also for other children around them and the adults who care for them.

Causes of severe anxiety may include attachment disorders, lack of attachment, genetics, an over active fight/flight response, stressful life circumstances and/or learned behaviour. Children with a family member who has an anxiety disorder have a greater chance of developing one themselves, especially if they view the world as a dangerous place. Likewise children who are actually living in a dangerous environment, for example living with any form of abuse, are more vulnerable to developing anxiety disorders as they tend to be fearful and expect the worst. The responses of boys and girls to anxiety tend to be different. Boys tend to be behaviour driven, while girls are more likely to internalise their anxieties.

### **Anxiety disorders that children may suffer from include:**

#### **Generalised Anxiety**

Generalised anxiety is a common disorder where children worry excessively about things such as what is happening at home, their safety, the safety of others, school and sporting events. They begin to view the world according to the worst they believe could happen. They may experience physical symptoms such as headaches, stomachaches, diarrhea, constipation, restlessness, muscle tension, trouble falling asleep, tiredness and nightmares, shaking and sweating. They may refuse to eat, refuse to go to the toilet at school, cry over what seems to others to be nothing, be over sensitive, be afraid of making mistakes and not attempt anything they think they will get 'wrong', or constantly seek approval from others.

#### **Separation anxiety**

Separation anxiety occurs when children are worried about being separated from their parents. They find it particularly difficult at school or drop-off time and can continue to be worried throughout the day.

#### **Social anxiety**

Social anxiety is an intense fear of being judged by others, and triggers may include speaking in front of others, reading aloud, fear of being evaluated by others, fear of offending or upsetting others, fear of embarrassment or fear of speaking to or with unknown people. Social anxiety can have a huge impact on the academic performance of children, their social relationships and self-confidence. Children with social anxiety are likely to avoid any occasion where there are people. This disorder may appear in children with a history of

shyness but also as a result of some trauma including abuse and bullying. In some children it can manifest as tantrums, clinging to a trusted adult, crying, melt downs, blaming others or selective mutism. The fear the child feels may seem to be out of proportion to others, but for them it is very real.

### **Panic attacks**

Panic attacks may occur for no obvious reason. They will cause sudden intense symptoms that may include a pounding heart, shortness of breath, dizziness, numbness, or tingling feelings.

### **Phobias**

Some children develop phobias to things or situations. The result is that children will do their best to avoid whatever it is that they fear, for example heights, particular animals, specific lessons and items that may have germs on them.

### **Obsessive compulsive disorder (OCD)**

For some children anxiety exhibits as obsessive compulsive behaviours, obsessions being preoccupying thoughts and compulsions being repetitive actions to try to alleviate the anxiety. These can impact hugely on children's social and academic performances.

### **Post-traumatic stress disorder (PTSD)**

This anxiety disorder results from a traumatic past experience, for example the Christchurch earthquakes. Symptoms include flashbacks and nightmares

Behaviours that indicate a child may have anxiety problems include:

- Mood changes – sadness, withdrawal, mood swings that affect relationships both at home and at school.
- Feelings of overwhelming fear – worries or fears intense enough to interfere with normal every day activities.
- Behaviour changes – which may include fighting, reactive aggression, a desire to badly hurt others and self-harm.
- Difficulty concentrating – unable to complete tasks.

### **Anxiety, Aggression and Violence**

In many children anxiety may present as shyness and difficulty in social situations, but for some the response is aggression and violence and this of course is problematic in a school setting. The stress the child feels may make them easily irritable, throw tantrums and lash out. However children who are more prone to fighting may be so due to either their genetics or upbringing. Anxiety is fear and fear can cause children to respond in violent ways. Anxious children may want to do the right thing but being driven by their brain in a high state of alertness makes it difficult for them to do so. Any situation that puts expectations on them and demands that could exceed their capabilities will have the potential to trigger anxiety in some children. Some will cope with their anxieties while at school and then lose control once they get home.

For some children disruptive behaviour, which may appear as oppositional and/or aggressive behaviour, is in fact their response to anxiety. This is not recognised or understood by many parents and teachers. For some children the demands, expectations

and social interactions of school are just too much for them and their fight/flight response kicks in. Such behaviours are usually misread as anger or oppositional and teachers' response is punishment of some sort (as is expected by other children, parents and other teachers), but punishments of any sort just add to their anxieties and make the behaviour worse. These children are likely to be the ones who suddenly attack another child or a teacher, throw things, or push over a desk or chairs when they are feeling out of control. Some anxious children lose control when routines change, or a classmate isn't following the rules, but they may also be the child who asks a lot of questions to seek reassurance. Children who suffer from anxiety may see anything that is new, unfamiliar, difficult or stressful as a potential threat. This can automatically trigger the fight/flight response without warning. This is confusing to the child, and to others who witness the sudden change in behaviour.

The good news is that we can help most children learn to control the fight/flight response, but it does take time. We can help them to learn that aggression can be controlled and violence is not okay no matter how anxious they feel, and that it is not okay to take their feelings out on another person – child or adult. We need to teach children strategies and support them to deal with their behaviours.

Anger management strategies may help some children. Strategies teachers can teach anxious children include:

- Taking some form of exercise, when they start to feel uncomfortable, to control their anxiety, for example leave the classroom and go for a run around the play ground
- Learning relaxation strategies. Children can learn the deep breathing technique which will help control their breathing and help them to relax. This can be done as a whole class exercise.
- Learning to recognise the signs that their anxiety or aggression are building so they can remove themselves from the triggers – go to their designated safe place.
- Distract themselves – move away and do something else.

Clingy/avoidant behaviour is also likely to result from anxiety. Even if there is no threat the brain perceives there is, and responds accordingly. An anxious brain may respond to unfamiliar situations or people, playground issues, criticism, disappointment, the threat of embarrassment or failure – anything that could potentially trigger the feeling that something bad may be about to happen. For some children it may result in doing a runner from the classroom or away from a situation in the playground. This can be problematic, especially in smaller schools, as often there is no one to look for them to ensure they are safe. It is therefore important to teach children to go to a 'safe place' within the school when their flight/fight response kicks in.

We need to assure the anxious child that we understand what it is like for people to worry or feel scared that they might make a mistake, because it happens to all of us at times. We may not understand exactly why someone is feeling the way they do, but we understand exactly what it is like to feel 'not right'.

## **Attachment**

Relationships are crucial to our survival and children will do anything to form relationships with others, including behaving badly. If you have your own children, you will be aware of their attempts to get back into attachment with you when they are sent to bed at night – another drink, a snack, another visit to the toilet, another story, things they forgot to tell you, getting out of bed numerous times!!

Internationally respected developmental and attachment-based psychologist Gordon Neufeld talks about attachment and how it relates to anxiety in children. He says that children who lack strong attachment with loving adults from birth tend to be more prone to anxiety. It is important for teachers to understand the attachment stages children go through, to understand the anxiety some children face.

**Gordon Neufeld says there are six Stages of Attachment:**

**“1. Proximity** – The most basic stage of attachment is Proximity. A baby begins the journey of attachment to the parent through contact, touch and closeness. We send them the message that they’re adored and we love them close to us.

**2. Sameness** – Around age two, a child adds Sameness – the desire to be like their parents. They mimic words, mannerisms and behaviours. This helps the growing child—and later when they are teens—continue to feel connected to us when we emphasise interests or inclinations that we share with them.

**3. Belonging or Loyalty** – Around three years, a child’s connection further develops through Belonging or Loyalty. Children of this age are possessive of their parents, pushing siblings away and saying things like, “My mummy” or “I want to marry you, Daddy.” To be loyal means to take the same side as the other person. With bonding through loyalty, the child begins wanting to do what is asked of them.

**4. Significance** – Connection deepens even more at this stage of Significance, around four years: By letting our child know how they are special, we strengthen the sense of closeness. The understanding is that parents will hold close what is special or precious to them. The child feels significant, unique with who they are as an individual.

**5. Love** – Around five years old, the child moves into Love. This is where warm and affectionate feelings begin to help deepen attachment. A child who experiences this kind of emotional intimacy with the parent is able to tolerate much more physical separation and yet still manage to hold the parent close.

**6. Being Known** – And finally, Being Known, from six years onwards, children reveal their secrets. Children attached don’t like to keep secrets because of the resulting loss of closeness. They allow themselves to be known because of the significant safety they feel. Being known is being heard and seen and accepted for who they are. Each stage solidifies the attachment between parent and child. On the other hand, if any of these are weak, the relationship weakens.”

In her article [http://macnamara.ca/portfolio\\_category/anxiety/](http://macnamara.ca/portfolio_category/anxiety/) Deborah McNamara from the Neufeld Institute says that, at:

**“5 to 6 years** – A child may voice fears of being hurt physically as well as of ‘bad people’. Their play may reflect these themes as they start to imagine bad things happening that are not based in reality. They may voice concerns over ghosts and witches or other supernatural beings. Thunder and lightning may also stir them up too. Sleeping or staying on their own can still be provocative as they are just coming to the end of their development as a separate self.

**7 to 8 years** – Common fears include being left alone and can lead to wanting company, even if they are playing by themselves. They may talk about death and worry about things that could harm them, for example, car accidents to plane crashes. They may still struggle with fears of the dark, as an extension of their growth as a separate being.



**9 to 12 years** – The ‘tween’ may express worries related to school performance including a fear of tests and exams. They may have concerns with their physical appearance as well as being injured, and death. As they become more of a separate and social being, they can consider and compare who they are against others which can create some alarm. They may state their discomfort that they are growing up and don’t want to, while other kids seem eager to leave childhood behind. It is important to note that the more peer oriented a child is, the more anxiety they may experience at this age as they turn to their peers for understanding who they are.”

## **Avoidance**

Leigh-Anne Griffiths spoke about avoidance at her workshop around anxiety. She says that anxiety loves avoidance, and when the stressor is avoided anxiety usually lowers quickly. However it actually increases anxiety over time because the brain then knows that you have been kept safe by avoiding the threat – real or perceived – and you will have the same response thereafter.

## **Mindfulness**

Anxiety can develop when we think about what might happen in times to come. This can be important as it gives us time to develop plans should there be a real danger, but not always. Mindfulness helps us as it strengthens the brain to allow it to stay in the present. Mindfulness is about stepping back and seeing your thoughts and feelings in a more relaxed manner. Mindfulness helps to strengthen the connections between the amygdala and the pre-frontal cortex and can help protect us against stress, anxiety, depression, illness and pain, and also improve our capacity for positive emotions.

Consciously taking control of our breathing helps and we can help anxious children by helping them to control their breathing. Here is how:

- Get them to make themselves comfortable, put their hand on their stomach and feel their breathing. Their stomach should go out when breathing in and in when breathing out.
- Get them to take five slow breaths in and out and then help them to recognise their thoughts and feelings. Get them to continue breathing in this way and ask them to imagine their negative thoughts are bubbles that are floating away. Repeat several times.
- As above but get the child to imagine the negative thoughts are little clouds above their head as they breathe in and clouds floating away as they breathe out.

**Ideas from Mindfulness for Children: Fun, Effective Ways to Strengthen Mind, Body, Spirit** – <https://www.heysigmund.com/mindfulness-for-children-fun-effective-ways-to-strengthen-mind-body-spirit/> may help some children, for example:

1. Start with a jar and fill it almost to the top with water. Into the water, add a few big dollops of glitter glue (or school glue and dry glitter). Pop on the lid and give the jar a shake.



Say to the child - 'Imagine that the glitter is like your thoughts when you're stressed, mad or upset. See how they whirl around and make it really hard to see clearly? That's why it's so easy to make silly decisions when you're upset – because you're not thinking clearly. Don't worry, this is normal and it happens in all of us (yep, grownups too). [*Now put the jar down in front of them.*] Now watch what happens when you're still for a couple of moments. Keep watching. See how the glitter starts to settle and the water clears? Your mind works the same way. When you're calm for a little while, your thoughts start to settle and you start to see things much clearer.'

2. Guide them towards switching on their senses, turning down their thoughts, and being fully engaged in the present moment. Take them outside and explain to them that they are on safari, looking for any animal that crawls, flies or walks. Let them know that they have to be quiet and alert, with their hearing, feeling and seeing super-senses switched on so they can discover tiny wild beasts that the world may or may not have seen before.
3. Take a short walk together to help them to learn to be mindful while they're moving. First, ask them to focus on their breathing. Then turn their attention to anything else their senses tune in to in the moment – the breeze against their skin, the sound of the trees, the smell of fresh air, and the way their body feels as they move. The idea is for them to experience the sensations, rather than to become too 'heady' by thinking too hard about them.
4. Get children to name the feeling they are experiencing, with the idea that if they can name it they can tame it. When a child is in the midst of a meltdown language such as "I can see you are really angry right now." "It has really upset you that..." may help.

### **Other Ways Teachers Can Help**

Children need to have strategies to help them cope when they are feeling anxious and overwhelmed. Some suggestions are to:

**Teach** children to name their fear and teach them about how their anxiety impacts on their thinking and behaviour.

**Teach** children deep breathing to calm their heart rate.

**Teach** progressive muscle relaxation – get the child to tense and relax muscles. They could start by making fists and clenching them tightly, then slowly relax them. Repeat with the arms, neck, shoulders and then feet and legs. At the same time deep breathing.

**Teach** children to recognise their negative feelings. They can become overwhelmed by negative feelings, assuming the worst, believing others see them negatively, and then over-react and personalise everything.

**Teach** children to reframe their thinking, for example, everyone knows I am dumb because I am no good at writing, becomes there are things I need to work on in my writing. They need to recognise the negative thoughts and understand that teachers are here to help them learn and get better at what they do.

**Teach** problem solving skills to work through fears, for example practise speech in front of a mirror at home

**Teach** friendship skills. Model and role play activities such as greeting others, conversation starters, listening and responding to speakers and asking questions.

**Teach** that anxiety is normal and everyone experiences anxiety at some time in their life, no matter who they are.

**Teach** that anxiety sometimes happens for no apparent reason and that is normal. It happens to everyone at times and there are things you can do to help yourself.

## **Resilience**

Lack of resilience and anxiety go together. Anxiety can cause the pre-frontal cortex to temporarily close down. Resilience is related to our ability to reactivate the prefrontal cortex and calm the amygdala. When this happens we recover from, adapt to and find a solution for the stress, challenge or adversity that triggered the anxiety.

We all have different levels of resilience, and low resilience levels affect our outlook on life. It is the same for children.

Teachers and parents can help children to build their resilience. An important factor in developing resilience in children is at least one supportive, loving adult relationship. It does not necessarily have to be a parent, but can be another family member, a teacher or other trusted adult. Social support is related to higher levels of positive emotions, and it is important for children to know there is someone there for them. Children need to know that they are not on their own and that asking for help is okay.

Helping children to manage their behaviour and develop resilience is important and the following are ways teachers can help:

- Establishing routines.
- Modelling positive healthy social relationships.
- Helping children to develop their social connections.
- Allowing time for creative play. (Creative play helps strengthen problem solving skills and develop resilience.)
- Providing board games for children to play.
- Providing opportunities for regular exercise.
- Providing children with opportunities to act independently and make some of their own decisions.

- Helping children to understand that they can do things that are challenging and acknowledging what they do, whether it is bravery in a situation or learning to make their own choices.
- Helping children face their fears – feel the fear and do it anyway... making sure the risks are well considered.
- Allowing children to be exposed to stressors and challenges that they can manage without rushing in to help. Teachers and parents need to resist the temptation to solve problems for children. It is better to listen to them and ask what they think will solve the problem. This can be a challenge as it is often seen by the child and parents that the school is 'doing nothing'
- Optimism is a characteristic of resilient people including children, so helping children to develop positive ways of thinking is important. It can be done through the language we use, and not dwelling on what has been lost or a bad experience, but what they can gain from the experience.

Resilience is about being able to get back up again when you are down. We all experience pain, anxiety, setbacks, grief and sadness at times, and we need to help children respect these feelings but not let them take over their lives. Developing a growth mindset, a belief that we can change, helps children develop their resilience. Children with a belief in their ability to change things are likely to suffer less stress and anxiety, and they are likely to feel better about themselves in situations such as social exclusion, for example in the playground when someone doesn't want to play with them.

Showing children that you believe they can cope also makes a difference, and teaching them it is okay to use affirmations to build themselves up (I am strong and brave and I can...) is very helpful.

Resilience can be broken into three components:

- Cognitive and behavioural factors, which include social, emotional and problem solving skills, optimism and self-esteem.
- Social and contextual factors, which include relationships with parents, other family members, peers, teachers and others, along with access to community support services, and environmental factors.
- Genetic factors, which include gender, temperament, intelligence and physical health.

*(Bernard, M. E. The Psychology of Children's Mental Health Education Horizons. Vol 10 No. 4 2009)*

Children with an easy going temperament and above average intelligence tend to be more resilient. Characteristics of resilient children include:

- **Social competence** – children are socially adept, have a sense of humour, are capable of initiating and sustaining close relationships and have an ability to show empathy. They have good communication and conflict resolution skills.
- **Problem solving skills**- Children can think creatively and flexibly about problems, make plans and action them. They are not afraid to ask for help when it is needed.
- **Autonomy**- Children with a healthy degree of independence, who can think and act for themselves. They have a strong sense of who they are and their ability to change and influence their environment
- **Optimism** – They are optimistic and see challenging situations and their ability to deal with challenges positively

## Three Sources of Resilience

From Grotberg, E. (1995) and mentioned in *Bernard, M. E. The Psychology of Children's Mental Health Education Horizons. (Vol 10 No 4 2009)*

### I Have

- People around me who I trust and who love me no matter what.
- People who set limits for me so I know when to stop before there is danger or trouble.
- People who show me how to do things right by the way they do things.
- People who want me to learn to do things my own way.
- People who help me when I am sick, in danger or need to learn.

### I Am

- A person others can like and love.
- Glad to do nice things for others and show my concern.
- Respectful of myself and others.
- Willing to be responsible for what I do.
- Sure things will be all right.

### I Can

- Talk to others about things that frighten me or bother me.
- Find ways to solve the problems I face.
- Control myself when I feel like doing something not right or dangerous.
- Figure out when it is a good time to talk to someone or to take action.
- Find someone to help me when I need it.
- 

## The Resilience Doughnut

Rachel Anderson shared 'The Resilience Doughnut' with me. It is a strength-based model, developed by Lyn Worsley, to help children build their resilience. The centre of the doughnut represents the beliefs a person has, how they see the world and how they see themselves in the world. There are seven areas around the outside of the doughnut that identify areas of influence in their lives – parenting, skills, community, family, peers, school and finances. Combined, these factors affect how people cope in day to day situations. The tool can be used to identify children's strengths and how they can be combined to build resilience and coping strategies.

[www.theresiliencedoughnut.com.au](http://www.theresiliencedoughnut.com.au)



A whole-school approach to student wellbeing which will increase social and emotional resilience is believed to be best. Having a strong emotional relationship (attachment) with a caring adult helps protect a child from the hurtful words and behaviours of others, as they care more about what their closest adults think. What other children say or do, doesn't hurt as much, doesn't feel so bad or feel as personal.

As we know, there are more and more children who do not have strong attachments to adults at home and look for others to provide them with what they need. Often children will resort to their friends, which isn't helpful as other children do not have the experience or personal strength to fulfil this role.

## Implications

Challenges for schools include dealing with children's mental health problems that make learning and teaching more difficult, the level of accountability expected around children's behaviour, and parents and other children who do not have an understanding of children who have mental health problems. More and more we are working with children who show signs of anxiety to some level or other, and, as a result, children who lack the resilience to cope with everyday life.

Teachers are busy people who cope with the demands of teaching a wide range of children with a wide range of learning needs in each classroom. Some are fortunate to have a learning assistant /teacher aide available to provide additional support, but not everyone has this. It can be very hard to spend time with children in a one to one situation to help them with their anxieties, which may be presenting as aggressive, unacceptable behaviour. As mentioned previously, it is easier to punish a child in some way and it is often expected by other children, staff and parents. But as we know, punishment does not help an anxious child, it just makes things worse for them. Somehow, schools need to find time to help children understand their emotions, explain where anxiety comes from and help children develop strategies to help themselves. It is important to include parents when possible. We know we have no control over stressors in the home that cause children anxiety. Some children do need to be referred to a specialist as anxiety levels cannot be controlled by the child or they refuse help offered at school.

Things that teachers can do to help children understand (this could be done as a whole class / school wide programme) include teaching:

- That everyone has things that make them feel anxious – all adults and all children
- That everyone gets angry sometimes, and it is how we behave when we are angry that counts
- That when they start to feel angry they need to let their brain know they are the boss. They need to take responsibility and work out what to think, and then practise thinking it before they get angry. The more they practise the easier it will get. They could pretend they are speaking to their brain and tell it everything is okay and there is nothing to hurt them.
- How the brain works
- That the brain doesn't always know if there is actually something that may harm them, but its job is to keep them safe, so it gets them physically ready to either run or fight. It happens to everyone, but for some people it happens more often and sometimes even when there is no need for it. The same part of the brain deals with emotions. When it seems that they might be in danger it can switch and make them feel like bursting into tears or feel really angry.
- That their brain is looking after them, but they cannot blame it for their actions. They do have a choice to take control.

- That they can train their brain not to over-react when there isn't actually any danger, but it will still let them know when there is real danger.
- That training their brain includes controlling their breathing. Strong deep breaths will calm their brain.
- The 5,4,3,2,1, method to relax – five things they can see, four things they can hear, three things they can feel, two things they can smell and one thing they can taste.

## Conclusions

Environmental factors as well as biological factors affect children's mental health. Children's negative attitudes and ways of thinking also affect their mental health. Negative and irrational ways of thinking contribute to anxiety, as do anger and depression. Children suffering from anxiety and low resilience have a tendency to put themselves down, so when, what they perceive to be a difficult or threatening situation arises (for example, no one wants to play with them, not reading as well as others, having a break-up with a friend, having a run-in with a parent or teacher), it reinforces for them that they are no good and will always be a loser. (Bernard, M. E. *The Psychology of Children's Mental Health Education Horizons*. (Vol 10 No 4 2009)

Anxiety in children is common and becoming more common so there are likely to be several children in every class coping with some level of anxiety at any one time. Some may appear happy and coping well at school and then lose control at home, while others do not cope anywhere. There is a correlation between the lack of resilience and anxiety in children. It is important for teachers to understand and to have strategies that assist children to understand and cope with anxiety and develop resilience.

Teachers and parents who understand when a child's behaviour is driven by anxiety are more able to help them find healthier, stronger and more effective ways to respond to their feelings.

Anxiety disorders are treatable and children can learn to cope with their symptoms and learn strategies that can work across a wide variety of settings, for example at home, in the playground, in the classroom, and when a member of sports teams. If however, a child's anxiety is severe and seriously affecting their ability to function in a school setting and is affecting their relationships with others including peers both in and out of school, it is best for the school to suggest to the family that they seek outside help from a medical professional.

In a classroom, anxiety can develop in some children as they start to notice others are learning more quickly than they are and that they are falling behind.

### Things to look out for in the classroom:

- Avoidance of tasks and guided teaching times.
- Headaches, sore stomachs, yawning often, refusal to eat or use the toilet, crying often, frequently seeking approval, being afraid of making mistakes, obsessive thoughts or compulsive behaviours, refusal to speak to adults or peers.

Children need to know that anxiety is normal and everyone experiences anxiety at some time in their life, for example before an exam, when meeting new people, speaking in public, competing at sport, starting at a new school.

Leigh-Anne Griffiths says an anxious brain overestimates the risk and underestimates the ability to cope with the stressor. We can teach children to ask themselves the questions:

- What am I afraid of?
- What is the worst that could happen?
- What could this mean about me?

Children with mental health problems often have negative, irrational thinking that needs to be weakened to allow them to improve outcomes for themselves. Things to work on to weaken irrational thinking could include their:



- Pessimistic thinking (I can't do it and never will be able to).
- Feelings of lack of control (I have no control over myself and what happens to me, how I feel and how I behave).
- Low frustration levels (everything should be fun and comfortable and I can't cope with frustration of any sort).
- Intolerance of others (people should behave how I want and do what I want; when they do not or when they are different they should be punished).
- Catastrophising (things that happen to me such as my mistakes)
- Beliefs that being laughed at or not having their own way are awful and terrible, the worst things in the world.

*(Bernard, M. E. The Psychology of Children's Mental Health Education Horizons. Vol 10 No. 4 2009)*

Building resilience is important to help children cope with stressors in their lives, and this includes learning strategies to deal with bullying behaviours of others. Building resilience is more effective when it is part of a whole-school focus. Improved resilience leads to increased positive social behaviours, better self-control, lower levels of verbal and physical aggression and oppositional behaviours, reduced emotional distress and mental health issues along with improved academic performance.

## **Children's Books**

There are a number of children's books available that talk about emotions, anxiety and resilience. Some that Rachel Anderson suggested are:

"Have you Filled my Bucket Today" – Carol McCloud

"He Shoots, He Scores" – Gayle Grass

'Have You Seen My Tail? – Kathryn Harper

"The Cat Got My Tongue"- Kathryn Harper

"Unstoppable Me" – Wayne Dyer

Books by Trace Moroney

Books by Mathew Johnstone

## References and other Sources Accessed

Bernard, M. E. *Promoting the mental health of children and youth. Education Horizons (Vol 9 No 5 2007)*

Bernard, M. E. *The Psychology of Children's Mental Health. Education Horizons. (Vol 10 No 4 2009)*

Brooks, R and Goldstein, S. *Raising Resilient Children*

Evans, I.M and Harvey S.T. *Warming the Emotional Climate of the Primary School Classroom*

*Kia Pakari - Schools' Resilience Programme – New Zealand Red Cross*

Kopela, J. and Clarke, A. *An Integrated Approach to Promoting Emotional Wellbeing. Education Horizons. (Vol 10 No 3 2008)*

*Mental Health Initiatives Summary – Ministry of Health*

<https://kidshealth.org/en/parents/anxiety-disorders.html> Anxiety disorders

<https://www.psychom.net/social-anxiety-how-to-help-kids> How to Help Kids with Social Anxiety

<https://www.calmclinic.com/anxiety/symptoms/aggression-violence> How Anxiety Can Lead to Aggression and Violence

<https://www.heysigmund.com/anxiety-or-aggression-children/> Anxiety or Aggression? When Anxiety in Children Looks like Anger, Tantrums, or Meltdowns

<https://www.heysigmund.com/anxiety-in-kids/> Anxiety in Kids: How to Turn it Around and Protect Them For Life

<https://www.heysigmund.com/mindfulness-for-children-fun-effective-ways-to-strengthen-mind-body-spirit/> Mindfulness for Children: Fun, Effective Ways to Strengthen Mind, Body, Spirit

<https://www.psychom.net/social-anxiety-how-to-help-kids> How to Help Kids with Social Anxiety - Article by: Katie Hurley

Miller, C. <https://childmind.org/article/how-anxiety-leads-to-disruptive-behavior/> How Anxiety Leads to Disruptive Behaviour

<https://www.mayoclinic.org/healthy-lifestyle/childrens-health/in-depth/mental-illness-in-children/art-20046577> Mental illness in children: Know the signs

<https://www.heysigmund.com/kids-with-anxiety-need-to-know/> "18 Important Things That Kids with Anxiety Need to Know" posted by Karen Young

<http://anxietyfreechild.com/anger-guide/> “The Parents Guide to Helping Anxious Children Cope with Anger and Frustration” Rich Presta

<https://childmind.org/article/classroom-anxiety-in-children/> “Anxiety in the Classroom” Rachel Ehmke

<https://www.heysigmund.com/building-resilience-children/> “Building Resilience in Children – 20 Practical, Powerful Strategies (Backed by Science)”

[http://macnamara.ca/portfolio\\_category/anxiety/](http://macnamara.ca/portfolio_category/anxiety/) The Emotional Roots of Anxiety – Deborah MacNamara

TED talks by Gordon Nuefeld, Aletha Solter and Dan Siegel