

# Mental Health in Schools

Curriculum, Inclusion and Pastoral Support  
*Advice from young people with lived experience of mental health conditions*

## Teaching and Learning Tips:

# PSHE, Life-Learning and incorporating Mental Health into your curriculum

East Sussex  
Community Voice



**Recommendations Brought to you by:**  
The Youth Inspect & Advise Group (IAG)  
*Youth-Led Mental Health Investigations  
and Guidance for East Sussex schools*



**This report was coordinated and written by:**

*enpassant*

**Edward Peasgood**

Youth Participation Worker  
IAG Project Leader

*EBPhillips*

**Elsa Phillips**

Community Outreach Volunteer  
IAG Deputy Project Leader

**From East Sussex Community Voice (ESCV)**

**This report gathers ideas and insight from our 14 Young Volunteers (aged 11-18) who form the Youth Inspect & Advise Group in East Sussex, hosted by East Sussex Community Voice.**

Our volunteers (who participate as School Wellbeing Inspectors) were recruited through both schools and youth groups (including the East Sussex Youth Cabinet, CAMHS Download Group, Seaford Youth Forum, SCDA Newhaven Young People's Forum, Hastings Youth Council, The Youth PPI Cafe, and the Children in Care Council).

**With lots of lived experience of mental health, we strive to share our recommendations with professionals to help them guide other young people through the challenges that they might face in schools.**

**We hope you find this guide useful and that it helps you to support the development of a whole school approach to supporting youth wellbeing!**

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*Summary of Young People's Recommendations*

# Teaching and Learning Tips: Mental Health in the Curriculum and Culture of your school

More focus on the link between relationships, friendships & wellbeing

A more careful, cautious and considered approach to trigger warnings

More advice and support for exam/academic stress

Awareness of impacts of racism, regardless of local demography

More education about self-harm, suicide and coping, but delivered in a sensitive and respectful way

More training on neurodiversity and cognition

More Learning about General Consent

Awareness of sustainable, healthier coping mechanisms

Less emphasis on Eating and Exercise

## Young People's Teaching and Learning Tips on: Consent and Relationships

More Learning about  
General Consent

Teachings on consent often focus on **sexual contexts**, but **general bodily consent**, including **personal physical boundaries**, should also be included and considered as equally important. Encroaching on physical boundaries and personal space can **be distressing or heighten anxiety**, so **open discussions between teachers and students on bodily consent is key to respecting these boundaries and building better relationships**. This will help students feel comfortable in their lessons and in the school environment, which aids their overall wellbeing.

**A greater focus is needed on relationships and their impact on mental health**, and how the people you surround yourselves with can both support and worsen your mental health.

More focus on the link between  
relationships, friendships & wellbeing





## Young People's Teaching and Learning Tips on: Exam Stress and Pressure

More advice and support for  
exam/academic stress

When teaching Mental Health, staff should address exam stress and anxiety. Schools need to acknowledge that they may be making their students feel pressure. **These sessions should be seen as ways forward - a solution to the problem**, by giving students support in creating reasonable study plans, **and giving them tips on how to work smarter not harder**. We also think these lessons should **emphasise the importance of taking breaks and aiming to maintain levels of normality during exams** (e.g still seeing friends or still doing an extra-curricular club) **to help give them some constants throughout the stressful exam seasons**. Evidently, schools want their students to achieve, but neglecting mental health may have the greatest impact on grades in the long term.



Pressure from school work should be included in the mental health conversation as we feel it can become completely overwhelming. **Schools can alleviate this pressure and its effect on mental health by improving communication between different subjects and departments, in terms of the amount of homework they are setting.**

LAG ran some targeted activities in partnership with Seaford Head School to help support Seaford Head students with looking after their wellbeing during exam seasons. To find out about our work with Seaford Head, go to

<https://www.escv.org.uk/LAG/school-wellbeing-partnerships>

## Young People's Teaching and Learning Tips on: Eating and Exercise

We have learnt that there can sometimes be too much emphasis on the topic of eating and exercise in mental health learning. Whilst this is one way to look after mental health, schools should be open minded towards and highlight other coping mechanisms.

This emphasis might be insensitive to young people with digestive conditions, limited mobility, eating behaviour disorders or who are disabled.

Emphasising eating and exercise can often make it sound like they are the solutions to all mental health complications, and while these are both important for good general wellbeing, they may not be helpful for young people with deeper mental health concerns.

Less emphasis on Eating  
and Exercise

## Young People's Teaching and Learning Tips on: Self-Care for Your Wellbeing

It is **not sufficient** for schools to only teach the 'five blocks of wellbeing'. Whilst this can be used as a starting point, **further mental health support should be built on top of this foundation**. Exercise, sleep, etc, are not universal solutions as **self-care is not 'one size fits all'**.

We believe a balanced approach is needed to support youth wellbeing, where a variety of strategies are implemented which tackle causes and effects across both short and long-term timescales.

## Young People's Teaching and Learning Tips on: Self-Harm and Suicide

We have been told that self-harm is not always covered to the extent at which young people argued it needs to be explored. Students most in need of support may not directly reach out so by incorporating the teaching of self harm (especially healthy coping methods) into the curriculum, schools will be helping those vulnerable students in a comfortable and casual environment. However, there clearly needs to be a balance in terms of how much information and detail is taught (see next segment on trigger-warnings).

It is vital to make sure students (and pastoral staff) know this teaching is taking place, so people who will be affected can make alternative arrangements.



More education about self-harm, suicide and coping, but delivered in a sensitive and respectful way

Extra Information: East Sussex Community Voice have been commissioned by Public Health East Sussex to investigate the attitudes, awareness and effectiveness of services for young people who are self-harming.

Check Back on our website soon to see our findings, and to find out more about the project, please contact Ed Peasgood and Greta Anderson:

[ed.peasgood@escv.org.uk](mailto:ed.peasgood@escv.org.uk) [greta.anderson@escv.org.uk](mailto:greta.anderson@escv.org.uk)



# Young People's Teaching and Learning

## Tips on: Coping Methods

**Coping methods for mental health should be a focus.** Raising awareness about mental health challenges is one step, **proactively suggesting ways in which to manage** those challenges is another.

**Tolerance** towards individual coping methods that work for the young person should be taught and encouraged.

**In our experience, schools often block music software or do not allow the use of phones, despite music being an effective and healthy coping method for some young people.** Whilst schools may deem phones as distracting, this is not the case for all young people. **Access to therapeutic things such as music are especially important for those whose mental health problems interfere with their concentration abilities so we advise schools to be flexible with policies in order to make space for individual coping methods.**



Awareness of sustainable,  
healthier coping mechanisms



## Young People's Teaching and Learning Tips on: Supporting Neurodiversity

The view of neurodivergent young people as disruptive and the lack of specific support needs to be addressed. A factor contributing to this inaccurate view is a **lack of knowledge about neurodiversity**. We believe this gap in teaching needs to be filled through PSHE (personal, social, health and economic education) lessons, fundraisers (*see our charity fundraising advice*) and more.

We strongly advocate for the deployment of a whole-school approach when looking at any of these aspects of teaching & learning mental health - we believe that twilight's, insets and training courses should provide education and information about neurodiverse young people for teachers, governors and other key players in education.

More training on  
neurodiversity and cognition

Your SENCO/SENDSCO may have some reading or courses for you, as may ISEND East Sussex, or your inclusion manager & inclusion governor.

Here are some of our young volunteers learning more about neurodiversity and supporting young people with special educational needs, through a training course in 'The Empowerment Approach', delivered by Changing Chances.

To book onto the next free round of VRAC training, please contact Donna Lonsdale-O'Brien, ESCV Wellbeing Coordinator, on [donna.lonsdale-o'brien@escv.org.uk](mailto:donna.lonsdale-o'brien@escv.org.uk)



## Young People's Teaching and Learning Tips on: Everyday Racism

Young people should not be expected to tolerate everyday racism within schools.



Schools need to acknowledge and teach the impact of racism on mental health; a topic rarely covered. The needs of young people from ethnic minority groups needs to be addressed, regardless of the demographic of your school or class, because this is still important for all young people to have an understanding of the barriers their ethnic minority peers face. Structural and systemic racism within school culture should be addressed, and at the forefront of policy and decision-making for managers,

middle-leaders and school governors. A whole-school approach is required where all students, staff and departments are involved in instigating education addressing racial inequalities, and explaining the relationship between inequality and mental health.

## Young People's Teaching and Learning Tips on: Trigger Warnings

We acknowledge that it can be difficult and invasive to identify who may be triggered or impacted by teaching about mental health.

*If it is clear who may be affected* (e.g a pupil who has told you about their mental health issues), then it would be best to make them aware that this teaching will be happening so that an alternative approach can be coordinated for them, with Head of years and Pastoral managers.

*If it is unclear who may be affected*, we would advise sending out the worksheets or presentations in advance, so that students can review them beforehand and decide for themselves the extent that they will be impacted by the discussion.



*If you do have students in your lesson who are distressed but have decided they would like to try and stay*, firstly be flexible. Allow your students to leave if they need to and if they change their minds, acknowledge and make it clear that is okay. Also allow them to be comfortable, so if there is someone who they are close with, we would advise to let them sit next to each other so they are with someone they feel safe and can talk to (and also someone that can go out with them if they need to leave the classroom).

If they have fiddle-toys or other stimming/anxiety outlets, we would advise that these are permitted, in most contexts, but particularly with these lessons due to the nature of the learning environment and the topics discussed.

Schools should clearly **communicate trigger-warnings to both students and parents**, clarifying consensual information including **parents/guardians' right to withdraw their young people from (PSHE) lessons**

Schools could identify, via a screening process, students who will clearly be affected by certain mental health teaching, informing in advance of the **potentially triggering content**. We believe it highly important to take a **planned approach** when informing these students of trigger warnings, in order to **avoid unnecessary distress or putting off any young person from participating if they wish to**.



By providing advance warning, schools will create more **comfortable environments in which their students feel empowered to decide whether or not to engage with potentially triggering mental health teaching.**

However, identifying students who may be adversely affected by PSHE content does not set in stone which young people will actually be affected in practice, so we believe schools must remain **respectful and flexible** towards young people's reactions to this content.

Young people have indicated that, **despite reaching out to student services about trigger-warnings in upcoming mental health teaching, young people have been blatantly dismissed** and told they would be okay. Experiencing disregard in this way can be very distressing and frustrating for young people, as it sends the message that their school is not taking their concerns seriously, consequently damaging relationships and breaking trust between students and teachers. By creating a **clear system for seeking support with trigger-warnings**, schools will be showing that their student's concerns are valid and heard.

This example also stresses the importance of establishing a screening process for delivering trigger-warnings that works in practice and not just on paper.

In our experience, there is a **key issue in the delivering of mental health related assemblies without prior trigger-warning** or systems in place to support students with sensitive content. For example, **having to leave an assembly in front of the entire cohort is uncomfortable for and draws unnecessary attention to students who may find the assembly content triggering.**





Having to leave in this way can **heighten students' distress**, especially as peers will notice and may ask invasive questions afterwards.

It also **creates an atmosphere in which students may feel there is no 'escape'**. **We advise** simple strategies to avoid this, including **prior warning of the assembly content, followed by giving students the opportunity to sit at the back of the assembly hall for discrete exiting if need be. Mental health is a personal and individual experience; young people can find comfort in anonymity and their right to privacy.** In facilitating more discrete options for leaving triggering environments, schools will be maintaining this anonymity and privacy (*see our further advice on assemblies*).

Since **consent forms and warnings** are given in advance for sex education, the same policies should be in place for all mental health teaching. **Sexual and mental health are intertwined and interact** - we believe the potentially triggering nature of both should be considered equally and accounted for by schools (*see our previous advice on consent*).



Trigger warning support seems to convey the *school's opinion* about the extent to which certain content may be distressing and not *our opinion*. We advise schools to **directly consult their students** (e.g through surveys), including those that will clearly be affected by mental health teaching, rather than making generalised assumptions.

We advise that students should be allowed to have **comfort items** with them during mental health teaching. Whilst from a teacher's perspective these items may be seen as a distraction, they can actually act as emotional crutches and be healthier coping mechanisms than alternatives.

## Young People's Teaching and Learning Tips on: Wellbeing Assemblies



In our experience, assemblies are often **one-sided**, lecture-like and lacking in engagement, detaching students from the message and the mental health teaching. Being one-sided can feel **patronising** to young people, **discounting their own opinions on their own health**. We believe assemblies should be **reflective of effective, two-sided discussions** that aim to put young people's voices at the centre of the mental health support schools provide for them.

It is **unrealistic for schools to expect one assembly to 'fix' mental health problems**; mental health is highly personal and needs long term support, hence why therapy, counselling and more are long processes. **We advise schools to adopt a long term approach to mental health teaching, putting in time to ensure students feel supported and heard**. This could involve regular assemblies during a school term, covering subtopics of a central theme/topic.

There is a lack of specialist support and provision for young people who are mentally and/or physically disabled, including students with **hearing and sight impairments** for whom assemblies can be an even greater challenge. We advise that schools adapt assembly content to meet the



needs of all their students, regardless of ability. This could include **adding subtitles to videos, making fonts larger and using buff coloured backgrounds.**

## Young People's Teaching and Learning Tips on: Timing and Mentoring

Timing is key. Allocating 5-10 minutes to mentoring slots provides insufficient time for mentoring to be effective.

We advise that it's not beneficial for young people to stay behind after school for additional mental health support. Extra time in school on top of timetables leaves less time outside of school, especially for young carers, to do homework and revision, meal times, breaks and more. This unnecessarily increases pressure and stress, making it more difficult for young people to maintain their own space and healthy routines alongside school.



## Young People's Teaching and Learning Tips on: The Need for Continuity

**Continuity** is needed in schools' policies and approaches to teaching mental health. For example, if schools advise students to make time and space for their mental health, then schools must ensure that the timetable and workload set allows for that.

*As a case study, one of our schools shortened lesson times slightly, during lockdown, in order to give their students longer breaks between lessons and for lunch, allowing for mental downtime and space.*

Whilst school nurses are helpful, having a different nurse for each session is not as efficient or effective. It means young people have to re-introduce themselves and their issues every time, eating up most of the session and leaving minimal time for feedback and proactive discussion. Providing continuity in mental health provision in schools, including having **regular timetables for which nurse is in when**, enables students to build professional and trusting relationships that leads to better mental health support.

## Young People's my Teaching and Learning Tips on: Privacy and Confidentiality

1:1s in-front of the whole class about wellbeing can be distressing for students. This setting can create a highly uncomfortable environment for the young person, meaning they are less likely to engage and seek support. Mental health is personal and sensitive so schools must respect young people's privacy on the matter.

Check out our other reports in this series  
via our Youth Wellbeing Hub:

- Supporting new Year 7s (transition)
- Bullying Prevention
- Mental Health Awareness & Cultural Change
- Social Media and Wellbeing

Go to [www.escv.org.uk](http://www.escv.org.uk) for more

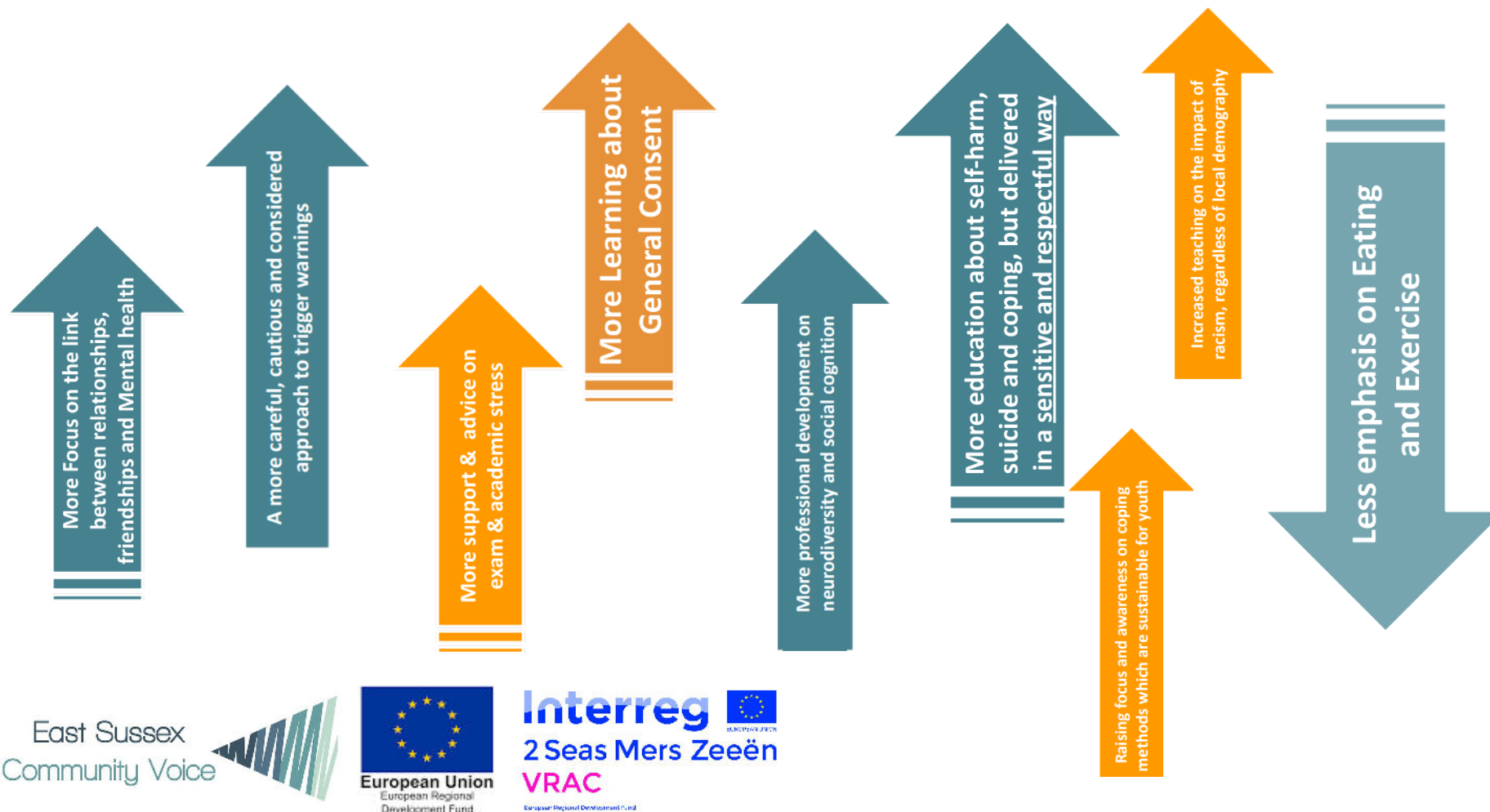
Read about East Sussex Community Voice's  
approach to youth voice and participation work, and  
learn more about our current portfolio here:

<https://www.escv.org.uk/services/youth-voice-and-participation-services>



Summary of Young People's Recommendations

# Teaching and Learning Tips: Mental Health in the Curriculum and Culture of your school



## Thank you and About Us

This consultation and report was brought to you by East Sussex Community Voice (ESCV).

ESCV is an independent Community Interest Company (Reg no. 8270069) set up to champion the voices of the public.

East Sussex  
Community Voice



We deliver the Healthwatch functions in East Sussex, It Takes a Village to Raise A Child (VRAC), The Youth Inspect & Advise Group, and we also commission NHS Complaints Advocacy in East Sussex.

Please get in touch with ESCV to hear more about our projects and the young people who work with us.

### Staff contact for this piece of work:

[ed.peasgood@escv.org.uk](mailto:ed.peasgood@escv.org.uk) [greta.anderson@escv.org.uk](mailto:greta.anderson@escv.org.uk)

### Our Office Email:

[info@escv.org.uk](mailto:info@escv.org.uk)

### Our Office Telephone:

01323 403590

### Where we are:

East Sussex Community Voice  
Barbican Suite  
Greencoat House  
32 St Leonards Road  
Eastbourne  
East Sussex  
BN21 3UT

