



Supported Education

3.10 Support for educational staff: Advice, consultation and coordination

Abstract

What?

Information about support, cooperation and training of educational staff.

Why?

Educational staff have a significant role in creating school environments and can be very useful for students; they can also (even unconsciously) form barriers.

Who?

Every employee at school/university who comes into direct contact with students as part of his/her job duties.

When?

On request, according to arrangement.

Where?

According to arrangement. At school or in a consultation room of the SEd workplace.

How?

Education and training, counseling, consultation and support, coordination of different activities.

Support for educational staff

Support for educational staff is considered to be an essential and self-evident part of the Supported Education service. The reason is that the staff constitute the basic determining element of the study environment and school atmosphere, influencing the approach to students with disabilities. A person who is acquainted with the sphere of mental health awareness, knowing where to seek advice or help, can cope with persistent prejudice or his/her own fears more easily and shall also be ready to act on behalf of a student with mental health problems.

1. *Who are educational staff?*

Educational staff are every employee of a school/university who comes into direct contact with students as part of his/her job duties. Therefore the term pertains to the immediate surroundings of the student—ranging from teachers, tutors, supervisors, leaders of study circles, academic advisors, "study-buddies" (other students helping students with special needs with studying and orientation at the school), to official persons (e.g., vice deans or deputies), to administrative staff (assistants, secretaries of departments, personnel of study department, and so on). They all have their role in creating the school environment and can either be very useful for students or can (even unconsciously) form barriers. All these persons should have, besides other things, basic awareness on topics surrounding mental illnesses. That way, the wrong approach to students so burdened should be reduced, and the provision of appropriate means of support encouraged.

For this reason, we also consider educational staff to be another target group of Supported Education services. If a student is to be helped, it is necessary to work with those in their immediate environment (such as family and friends), including teachers. They spend a lot of time together and education is the point, so the educational staff should be involved and feel supported. Educated, oriented, and supported staff improve the school environment and conditions for students with mental disorders a great deal.

In the context of Supported Education, the educational staff comprise the key partner. The will, willingness, support, responsiveness and effort of the staff in understanding the student's situation and their knowledge of the possibilities that didactics and psychology and school offer in education are the most important resource for students with altered learning abilities or special needs. If the school is not willing to accommodate these students, the default position of other supporting segments of the Supported Education service is significantly weakened and the potential for a student to complete their study decreases.

In order to help bear this responsibility for educational staff faced with a specific problem, the Supported Education workers are here for educational staff as well as for students. They provide them with information and support, and they can manage the situation or, if necessary, mediate with other services or forms of

support and manage the mutual cooperation of all those involved by so-called case management.

2. What should educational staff know and be able to do?

The educational staff should have basic mental health awareness and know how this topic is related to working with students. The staff also should know their personal limits and capabilities and the facilities of the institution/school.

Educational staff should neither encourage by their own behavior nor tolerate biased opinions about mental illness which often persist in society, and should respect and promote the rights of students, as provided for in the Convention on the Rights of Persons with Disabilities, Article 24 (United Nations, 2015) in particular. Educational staff should know that, in addition to students with physical disabilities or learning disabilities, there are students with limitations caused by mental illness. These students have the same rights as others, the same equal opportunities, and often the same ability to study, but their needs may be different. In order to meet the necessary conditions for study, schools should provide maximum support for students with altered study capabilities and needs (e.g., attendance, grading rules, length of study, ways to be excused from lessons, etc.) and be prepared to deal with alternatives.

The form of support should be based on the specific needs of the student. This does not mean being excused from study requirements, just a reasonable adjustment—for example, in the case of a student with problems of fatigue, which can be caused by medication, not to insist on attendance; negotiating terms for testing and presentations at a time when the student is able to focus; adjusting the time for test processing, etc. The school should make it possible to even up the conditions under which the student has the opportunity to fulfill their study obligations. This should be done in a way that will be useful and meaningful to the specific student: an individual approach is required. Equalizing of conditions only moderates the handicap which the afflicted student has in comparison to ordinary students. The criterion of required knowledge does not change for the student with a mental illness. It is important to distinguish between the content and the form of the curriculum, to discern what it is important for the student to know and not to be attached to a particular way of finding it out. The educational staff should respect the fundamental rights and basic needs of students and not give preference to routine, prejudice and generalized solutions.

Educational and administrative staff should acquire the basic ability to communicate with students about their problems relating to the situation to be resolved, including the topic of mental health. Staff should not be afraid, not dodge, not reject a student's claim for support; they should be specific and not ask for things unrelated to the topic (no snooping); they should hold a positive attitude and

offer support; they should be aware of their options and the possibilities of the school, and know to whom to turn for consultation or cooperation.

Basic perceptiveness of the mental health of students (and one's own) is essential. It is important that teachers—and especially key educators (class teachers, supervisors, tutors, etc.)—are attentive to their students, paying attention to unsubstantiated/unexpected/strange transformations or changes in their behavior—for example, a usually cheerful and active student keeps themselves in seclusion and has a high percentage of absenteeism; increased paranoia; distractions from the subject or entering into it with ideas that lack continuity; an otherwise calm student is suddenly lively and brimming with ideas, etc. They should be ready to take the possibility of mental illness into consideration and not be bashful about sensitively asking the student about the changes and offering support or help. They may be one of the first people to point out the changes and give impetus to solving the student's problem.

Educational staff should have clarified how they and their educational institution can accommodate students with difficulties in the area of mental health, and should be aware that they do not have to take care of it all by themselves. They should have a basic knowledge of the services or institutions that could be helpful to students with mental health problems and to which they may refer students. This could be a service inside the school—such as a school counsellor for students with special needs, a school psychologist, a legal or educational counsellor, etc.—or outside—a psychologist or psychiatrist, social services, NGOs, etc. Where a Supported Education service is available, this should be the teacher's first choice, because it does not provide a service only to the students: the teachers and other educational staff may contact it themselves to ask for information or help. In addition to direct support to students with mental health problems, it is equally important for educational staff not to be afraid to consult on the situation discreetly and seek advice, especially at moments of uncertainty or when not feeling safe in the situation. When a person is not certain about what to do, they cannot be helpful or supportive in the right way, if at all.

3. *What Supported Education services offer to educational staff*

Students have the possibility of requiring from the teacher or study counsellor:

- Support with any difficulties they are experiencing and that affect their performance in school—this may be in the form of mediation of other services, providing contacts for a psychologist, drug counsellor, etc.
- Support in inclusion in the class (e.g. when returning after hospitalization, or when transferring into a new class/school). This includes assistance in coping with the situation and tactfully informing classmates about the illness (but only with the permission of the student).

- Individual support in studying and defining new rules—i.e. discussing the obstacles and limitations caused by the student's mental illness (deteriorated concentration, sleepiness caused by medication, great mental strain during testing, etc.) and setting rules that help to overcome such difficulties (allowing short breaks during the lesson, a different method of testing, etc.). The teacher should discuss these new rules with the school study counsellor and also inform other teachers or classmates, if necessary.
- Help with securing and forming an individual education plan which should enable the fulfillment of school duties, including in the situation when the student's ability to prepare and the performance of school duties are disrupted to a large extent.

Supported Education services offer educational staff education and training in the sphere of mental health, counseling, consultation and support in specific situations, arranging the coordination of experts and their work with the student.

A. Education and training

A Ledovec course (*The Minimum about Mental Health*) is available for schools and teachers dealing with basic questions and problems related to mental health and oriented to the educational environment and the role of the teacher. At the same time, the course introduces the Supported Education service and cooperating supportive network of experts from the fields of health, social services and the educational system, outlining their roles and capabilities, and how, when and whom to contact. A similar course given on the topic of mental health intended for students may assist the teacher to broach this topic in a group or just help to educate the students in this area (primary prevention).

A seminar or training takes place according to demand, in the school space, in a timeframe offered or agreed upon. The recommended minimum duration is two hours. Increasing the length of training also requires increasing the rate of active involvement of the participants. It is necessary to keep enough time for questions at the end and to encourage participants to ask questions throughout the seminar. If the organization has a (student) peer-worker, it is possible to offer their first-hand experience during the seminar.

The basic themes that the seminar should cover are as follows.

- Mental health and modern society.
- Statistics of incidence of mental illness in the current (European) population among students, putting emphasis on the age range when mental illness most often occurs.
- Basic overview of the most common and serious mental illnesses.
- Signs and symptoms of psychological problems or mental illness and how it is possible to recognize them in students in the school environment.

- Problems that persons with mental illness struggle with (health, social, or personal problems).
- Problems that a mentally ill student faces and what impact on the study they may have.
- What the school and the educational staff can do for such a student and how.
- Who can be contacted and under what circumstances.
- Where to seek information and support as a teacher of a student with mental health problems.

Case 1.

A school teacher contacted the Supported Education service asking for support when a student with a known diagnosis of schizophrenia returned to his class. His last contact with the class was a few months ago during the presence of his psychotic symptoms (an acute manifestation of the illness). The class teacher expressed concern about the atmosphere in class and lessons after the student's return. The students were exposed to the unfamiliar anxiety of what attitude to take toward the classmate: Help him? Ignore him? Avoid burdening him with shared topics? Workers from the Supported Education service visited the class and organized a seminar with discussion; they handed over basic information on the general perspective and the needs of people with schizophrenia in relation to the outside world. The student agreed with the actions taken.

B. Counseling

Counseling is a low threshold way to obtain necessary information in the field of Supported Education when a teacher feels the lack thereof. The service can be contacted by telephone, online (email, etc.), or personally.

Short-term counseling is a service whereby the user is provided with basic support and information that enables them to handle their situation. Counseling takes the form of a non-binding single or repeated dialogue between the user and a Supported Education worker. Counseling can be anonymous: the user need not disclose any information about him/herself. The service is provided in person at a meeting, by telephone, or in writing (email, letter, SMS), and can be used repeatedly.

Counseling can offer, for example:

- Support in finding solutions to specific situations—consultation on the case of a student with mental health problems or mental illness; dealing with stressful situations; communication with students with mental health problems; mental hygiene rules.
- Provision of information and contacts to support programs and services in the locality or region.

- Information about mental disorders and mental illness.
- Organization of a prevention program or seminar for students focused on the issue of mental health or a specific situation (similar to a seminar for teachers).

It is appropriate to set aside specific times and human resources for counseling (e.g., Counseling provided on Monday and Thursday from 9am to 4pm, or other times according to prior arrangement). At these times a specific employee who is in charge of counseling is allocated to consult newcomers, answer phone calls, handle correspondence and arrange appointments.

Case 2.

At the request of an educator, the Supported Education service provided basic counseling when looking for possible solutions to difficulties the educator was experiencing with a student with a psychiatric disability. The student did not behave well at school, shouting at fellow students and teachers. The school was on the verge of sending him away from school. The teacher was informed about different ways of dealing with the situation, especially how to teach the student the critical skills required in dealing with the requirements of the school.

C. *Consultation and support*

Supportive consultation provides an opportunity to discuss the specific situation of a teacher, a class or a student with a specialist, focusing directly on the teacher's personal role. It is possible to establish long-term cooperation on the case, using group consultation (e.g., Balint group, supervision, training, etc.) or consultation within the school. Consultations within the school are particularly suitable for the clarification of possibilities when a student asks for adaptation of conditions of study, or he/she is simply "causing trouble" and there is a need to diagnose the situation.

Educational staff in all the above-mentioned challenging situations can consult gradually, plan, and find solutions in cooperation with a SEd worker. Furthermore, they can expect support when they cannot cope with the demands placed on them (time, energy, one's own strength, risk of exceeding the professional role) or are uncertain about their behavior, opportunities, rights and responsibilities. A SEd worker can serve as a counselor or mediator in communication with the school management, parents, psychiatrist, or Child Protection Office to develop a joint plan to work with the student. A SEd worker can also provide or arrange psychological support for the teacher (supervision, training, Balint group, expert advice) or support in managing stressful/crisis

situations. It is also possible to arrange crisis intervention for the teacher and the group which was impacted by the crisis situation.

SEd worker and teacher meetings are based on individual needs and possibilities within the service in order to find a solution to the teacher's specific customized needs. Cooperation can be long-term and may include follow-up.

Case 3.

A teacher contacted the Supported Education service with a request for help concerning a student with mental health problems who couldn't decide whether or not to disclose her mental health problems to her classmates. He didn't know what advice to give. The teacher was informed about the existing disclosure brochure and that the ultimate decision of telling or not telling was up the student herself. The teacher discussed the topic of disclosure with the student with the help of the brochure.

D. Coordination

Coordination of work with a student with mental health problems is based on the possibility of interconnection of experts concerned with the case. Supported Education can offer case management and can also facilitate a student's access to the supportive network of SEd. The existence of the SEd supportive network of educational counselors, psychologists, psychiatrists, social counselors, therapists and psychotherapists in connection with the student, his/her teachers and family or intimates creates several opportunities to grasp the situation and direct it to the benefit of the student in such a way that all the participants feel confident and safe, and are also pulling in the same direction as the student. Interconnection, education and communication among these experts prevents situations where, for example, a psychiatrist, therapist, or teacher—as well as sometimes the student him/herself—have different ideas, take contradictory steps, or make recommendations that cause uncertainty, confusion or conditions that do not allow the student to manage the demands of his study.

Resolving the client's situation often requires the cooperation of several institutions (organizations) whose services need to be coordinated. As a tool for more effective teamwork in solving clients' problems, case management is used. A SEd worker leads the client's case and, together with the client, chooses when and which social service, institution or organization should be involved in addressing the client's situation.

In resolving the client's situation, several services within one organization can participate, but also other entities that constitute a team may have varying degrees of involvement. The team can function passively—the members know

about each other; they jointly seek solutions to the client's situation; they share information about the steps taken; their services do not overlap; they meet minimally or not at all, communicating with each other via phone or e-mail. Or the team can be active—regular staff gatherings; managed seeking of ways to solve the client's problem. The client must be invited to these meetings, proposals for solutions must be in consultation with them, and they must choose whether the proposed process will be used or not.

In all cases, it is necessary to determine who is the so-called key worker in the process (usually a SEd worker, but possibly an employee of the Child Protection Office). The key worker has an overview of all activities and actions in the client's case and coordinates the process of providing services to the client.

A case conference is used as a tool for an active case management team. A meeting of at least three sides is called for the above purpose, which is managed by an independent moderator (facilitator). The facilitator must be an impartial and disinterested person who works directly with the client. It is important that all parties already be previously acquainted with the client's case.

Case 4.

The Supported Education service was contacted by the school with a request for support in a case where the teaching staff became concerned about the mental health of a student with a psychiatric disability. After several consultations, the supportive network of the Supported Education service was used and several specialized sides were engaged. The Supported Education service coordinated the entire process between the student, family, school, and experts from the supportive network (psychiatrist, psychologist, peer support group of the Supported Education service, etc.).