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Communications Branch
Department of Health and Ageing
GPO Box 9848, Canberra ACT 2601

or via e-mail to:
copyright@health.gov.au

While the resources are available freely for these purposes, to realise the full potential of KidsMatter Primary, it is recommended that the resources be used with the appropriate training and support under the KidsMatter Initiative.

Imagery

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Last updated in January 2013
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KidsMatter Primary professional learning uses a range of approaches to help schools work through the content of each of the four components. It’s important that the professional learning is delivered by a facilitator who has been trained by KidsMatter Primary. He or she will lead you through activities and discussions specifically designed to get you thinking deeply about the way your school supports student mental health and wellbeing.

This professional learning is supported by a range of informative and engaging videos, which were made in collaboration with dedicated professionals and inspiring KidsMatter Primary schools.

Videos include commentary by mental health and education experts about what approaches work best in a school setting.

They also showcase the stories and experiences of real schools engaging with KidsMatter, and the strategies they have found most effective.
KidsMatter Primary

would like to thank the following experts and schools for their contribution to this professional learning.

**Prof. Brian Caldwell**
Managing Director, Educational Transformations

**Kaye Dennis**
Educational Consultant

**Prof. Stephen Zubrick**
Telethon Institute for Child Health Research

**Prof. Ann Sanson**
University of Melbourne

**Andrew Fuller**
Clinical Psychologist

**Trial schools**
- St Mary’s Coptic Orthodox College (Coolaroo, VIC)
- Koroit and District Primary School (VIC)
- Leda Primary School (WA)

**Focus group members**
- **Inez French**, Lumen Christi Primary School (Delacombe, VIC)
- **Jo Adock**, Ballan Primary School (Ballan, VIC)
Self care

You should participate in this professional learning at the level with which you feel comfortable. Your school’s Employee Assistance Program (EAP) is there to help in the event that something arises for you on a personal level.

Here are some other useful contacts:

**Lifeline**
Tel: 13 11 14
www.lifeline.org.au
24-hour telephone counselling

**beyondblue**
Tel: 1300 224 636
www.beyondblue.org.au
Information and referral line

**SANE Australia**
Tel: 1800 187 263
www.sane.org
Information line – 9.00am-5.00pm weekdays
Online helpline, factsheets, resources

**Australian Psychological Society (APS)**
www.psychology.org.au/FindaPsychologist
Find a Psychologist service
Session 1:
Home-school collaborative relationships
KidsMatter Primary is a national initiative that aims to contribute to:

- Improving student mental health and wellbeing,
- Reducing mental health difficulties amongst students, and
- Increasing support for students experiencing mental health difficulties.

**Guiding Principles**

- The best interests of children are paramount
- Respectful relationships are foundational
- Diversity is respected and valued
- Parents and carers are recognised as the most important people in children’s lives
- Parents and teachers support children best by working together
- Students need to be active participants
- Schools, health and community agencies work together with families

**Core Components**

- **Positive school community**
- **Social and emotional learning for students**
- **Working with parents and carers**
- **Helping children with mental health difficulties**

**Whole-School Approach**

Planning for whole-school change

- Professional learning, shared understanding and focus for staff
- Partnerships with parents and carers, health and community agencies
- Action within and beyond the classroom

**What is KidsMatter Primary**

KidsMatter Primary is a flexible, whole-school approach to children’s mental health and wellbeing for primary schools. It works both on its own and as an umbrella under which a school’s existing programs can comfortably fit. KidsMatter Primary provides the proven methods, tools and support to help schools, parents and carers, health services and the wider community nurture happy, balanced kids.

KidsMatter Primary was developed in collaboration with beyondblue, the Australian Psychological Society, and the Principals Australia Institute, with funding from the Australian Government Department of Health and Ageing and beyondblue.

KidsMatter Primary fosters partnerships between the education and health sectors.

KidsMatter Primary takes schools through a two-to-three year cyclical process in which they plan and take action using a comprehensive whole-school approach to mental health promotion, prevention and early intervention. It allows for flexibility and can be tailored to schools’ local needs. In this way, KidsMatter Primary builds on the work schools are already doing to address the mental health and wellbeing of their students through national, state, territory and sector-based mental health initiatives and policies.

KidsMatter Primary provides a range of resources and support throughout the implementation journey.
Schools take action across four areas, known as ‘components’. Research has identified that these are the areas where schools can make a real difference in supporting their students’ mental health and wellbeing. They make up the core content of KidsMatter Primary.

Dividing KidsMatter Primary into the four components is a way of making the task of improving students’ mental health and wellbeing in schools more manageable. It also allows schools to focus their efforts more effectively, and include all the significant people and contexts in children’s lives that may impact on their mental health.

The four components of KidsMatter Primary are interrelated. Each is important for supporting student mental health and wellbeing.
Four key models inform the KidsMatter Primary framework:

1. Model for mental health promotion, prevention and early intervention in schools (World Health Organization, 1994).
2. Risk and protective factors model (Commonwealth Department of Health and Aged Care, 2000; Spence, 1996).

Model for mental health promotion, prevention and early intervention in schools

KidsMatter Primary provides primary schools with a framework for mental health promotion, prevention and early intervention (PPEI). Mental health promotion covers a variety of strategies that increase the chances of more people experiencing better mental health. Promotion includes actions that create living conditions and environments that allow people to adopt and maintain healthy lifestyles. Mental health prevention is about the actions taken early to try to stop mental health difficulties from developing. Mental health early intervention refers to picking up early signs of mental health difficulties and doing something about it to prevent problems worsening.

Who? What does KidsMatter Primary do? How?

Whole-school community, staff, students, parents and carers, health and community agencies

All students (and their parents and carers)

Students experiencing mental health difficulties (20-30% of students) and the 3-12% of students with mental health disorders, and their parents and carers

Creates an environment to promote positive mental health and wellbeing

Facilitates social and emotional learning (SEL) for students

Supports student engagement and connectedness at school and facilitates help-seeking for mental health difficulties

Works with the whole community and provides support and information to staff, parents and carers

Through the curriculum, creates opportunities to practise skills and engages parents and carers

Supports children in school and develops clear processes and referral pathways (by working with parents and carers and health and community agencies)

(Adapted from World Health Organization, 1994)
Whole-school approach

A whole-school approach considers all the different aspects of the school such as the curriculum; teaching style; classroom climate; school culture and values; participation of all members of the school community; physical environment; partnerships with families and the community; welfare services; and the wellbeing of staff and students.

A whole-school approach involves the entire school community working together to create a vision for the kind of school it aspires to be, and developing the policies and practices to make this vision become the reality. World Health Organization (WHO) research has demonstrated that change is more effective and sustainable when schools work on addressing these various aspects of their core functions.

Getting everyone involved is the best way to help people believe in the change and to follow the steps everyone agrees need to be taken. A whole-school approach helps embed the processes and practices into the fabric of the school.

Risk and protective factors

Research has identified a number of risk and protective factors that impact on the mental health and wellbeing of children. Risk factors are things present in a child’s life that increase the likelihood of them experiencing a mental health difficulty. Protective factors strengthen a child’s mental health and buffer against risk, making them less likely to develop a mental health difficulty.

Every day, schools have opportunities to reduce risk factors and build protective factors with the overall aim of improving students’ mental health and wellbeing. Different factors can impact on a child, and the presence of any particular risk factor does not mean that child will experience mental health difficulties. However, there are some key childhood risk factors that have a particularly strong effect on mental health (e.g., domestic violence).

The KidsMatter Primary framework can help you to understand the risk and protective factors in your school community, so you can best support your students and their families. This framework has informed the areas of focus for KidsMatter Primary schools (the four components).

Some examples of risk and protective factors associated with children’s mental health can be found on page 15 of this workbook.

“I think it’s important that we get a say because if they did something that you didn’t like, and we had no choice, you wouldn’t feel like you’re welcome here. But if you got your say, then you’d feel like they’re letting you in, and you’d feel like you’re meant to be here.”

Student, Hastings Primary School

“Most people would not remember a lesson taught at school, but they will remember a teacher who sowed something into their lives…”

Phil (teacher), Leighland Christian School
The socio-ecological model

The socio-ecological model of human development recognises the many influences on children's mental health and wellbeing. The child is at the centre of the model, which explains that development occurs within the context of relationships with family, school and community. Children are further influenced by the wider social, economic, cultural, workplace and political forces in which their families, communities and schools exist.

The family is the main context for children’s development as it provides the most powerful and enduring influences on short and long-term health and social adjustment.

After family, school is recognised as the most significant developmental context for primary school-aged children.

A school is a particular kind of learning community which is influenced by, and interacts with, the surrounding community. Students, families and school staff from many different backgrounds come together within this space.

The benefits for children can be maximised when the most significant people and contexts in their lives come together.

(Adapted from Bronfenbrenner, 1977)

“I think that’s part of that ‘community’ thing which is being lost a little these days. People want to be talking to somebody who cares, and I think that’s part of what we all feel about coming here. It’s just a really good feeling.”

Jenny (volunteer), Hastings Primary School
A child’s family is central to their healthy development and long-term wellbeing. Evidence strongly suggests that children who are born into a nurturing environment and provided with emotional, social and physical support are more likely to experience wellbeing and reach their full potential. The home environment, and the functioning of the family within, is therefore considered to be the biggest influence on children’s development.

A school is another highly influential setting. Research shows that when staff and families partner together – to share their best interests and responsibilities for the child – a caring school community develops around students. This makes a significant positive difference to the wellbeing and learning capacity of students regardless of outside factors such as socioeconomic status.

Teachers are professionals with high community visibility, respect and trust. They are likely to be consulted by parents and carers who have questions about child-rearing. Increasing the support available to parents and carers is considered essential for improving the mental health and wellbeing of children. Studies show that the majority of parents and carers report a need for extra support or information on raising children, and one in four feels a lack of support outside the home.

Schools are well-placed to provide families with information, resources and learning programs related to parenting, child development and children’s mental health. Schools can also become a community hub for networking and support between families. Improving parenting practices enhances children’s social skills, reduces conduct problems and negative emotional states. Increasing parental involvement in children's education is a protective factor for children’s mental health.

Working with parents and carers also brings benefits to schools. Research clearly indicates that parental involvement is critical to the success of school-based programs. Schools that implement social and emotional learning or behaviour management programs without involving parents and carers are less likely to achieve their goals for students. A collaborative approach, where parents, carers and schools work together, is much more likely to yield substantial and sustained improvements for children’s learning and mental health and wellbeing. Home and school are the two most important contexts for child development.

KidsMatter Primary encourages schools to connect with parents and carers by systematically building relationships, providing support for parenting, and opportunities for families to develop support networks. Cultivating relationships with parents and carers is an investment of time and effort and involves regular, genuine and positive communication about the whole child. School-wide procedures for making contact with families are also important for optimal success.

Three specific target areas have been identified for Component 3, with goals for each target area that assist schools in developing policies and practices for working with and supporting parents and carers.
Target areas

1. Collaborative working relationships with parents and carers

2. Support for parenting

3. Parent and carer support networks

Goals

1. School planning, policies and practices support collaborative working relationships with parents and carers.
2. School staff implement strategies to proactively develop collaborative working relationships with parents and carers to promote children’s mental health, wellbeing and learning.
3. School staff have knowledge and skills to communicate effectively with parents and carers about their children in areas related to child development, learning and mental health and wellbeing.
4. School staff communicate effectively with parents and carers about child development and learning, mental health and wellbeing.
5. The school has policies and practices to support staff to identify issues and, where appropriate, facilitate access for parents to resources and services that support parenting.
6. The school provides opportunities for parents and carers to connect with each other and develop support networks, and actively seeks to minimise barriers to participation.
7. The school identifies and promotes community groups which may act as a source of support for parents and carers.

Important note:

KidsMatter Primary acknowledges that there is a range of people with parenting responsibilities who may not strictly fit within traditional understandings of ‘families’, ‘parents’ and ‘carers’. The use of such terms in this professional learning is intended to be fully inclusive of all social and cultural interpretations.
The four components of KidsMatter Primary are interrelated. Each is important for supporting student mental health and wellbeing.

Component 1: Positive school community

Component 2: Social and emotional learning for students

Component 3: Helping children with mental health difficulties

Component 3: Working with parents and carers

“Parental involvement has significant positive effects on children’s academic achievement and adjustment.”
Desforges & Abouchaar, 2003

“When a child begins at school here, we don’t just talk about enrolling the child, we talk about enrolling the family, because all the members of the family, the school and the broader community are going to contribute to the best possible outcome for the child.”
Martin (Family School Partnership Convenor), St. Mark’s Catholic Parish Primary School

Component 3 will help you answer the following questions:

- How well do you know the families in your school?
- Is every relationship with every family as good as it could be?
- How do you build stronger relationships?
- What are some ways schools can support parents and carers?

Component 3 fits together with the other three components of KidsMatter Primary.
Risk and protective factors for children’s mental health

Risk factors

- Difficult temperament
- Low self-esteem
- Negative thinking style
- Any form of child abuse, including neglect
- Family disharmony, instability or break up
- Harsh or inconsistent discipline style
- Parent with mental illness or substance abuse
- Peer rejection
- School failure
- Poor connection at school
- Difficult school transition
- Death of a family member
- Emotional trauma
- Discrimination
- Isolation
- Socioeconomic disadvantage
- Lack of access to support services

Protective factors

- Easy temperament
- Good social and emotional skills
- Optimistic coping style
- Family harmony and stability
- Supportive parenting
- Strong family values
- Positive school climate that enhances belonging and connectedness
- Involvement with caring adult
- Support available at critical times
- Involvement with caring adult
- Support available at critical times
- Participating in community networks
- Access to support services
- Economic security
- Strong cultural identity and pride

(Adapted from Commonwealth Department of Health and Aged Care, 2000; Spence, 1996)

“Parental involvement in their child’s schooling is a protective factor for academic success and mental health and wellbeing.”

Georgiou, 1997
Some modern-day parenting challenges

Diversity of family structures in Australia

- Families in Australia are becoming increasingly diverse.
- In 2009-10, there were 6.3 million families in Australia.
- Of these 6.3 million families, 2.7 million had at least one child aged 0-17 years.
- Of these 2.7 million families, 81 per cent were couple families and 19 per cent were one-parent families.
- Couple families were made up of:
  - 73 per cent = intact couple families\(^1\)
  - 4 per cent = step families\(^2\)
  - 3 per cent = blended families\(^3\).
- One parent families were made up of:
  - 85 per cent = lone mother
  - 15 per cent = lone father.
- There were 16,000 grandparent families, in which grandparents were the main carers of resident children aged 0-17 years. This has decreased from 23,000 in 2003.
- There were 9,000 foster families, in which there was at least one resident foster child.
- There were 23,000 same-sex couple families.

\(^1\) Intact couple families are those in which the children are the natural or adopted children of both parents and there are no step-children.

\(^2\) Step-families are those formed when parents re-partner following separation or the death of their partner and there is at least one resident step-child of either member of the couple, but no natural or adopted child of the couple who is resident with the family.

\(^3\) A blended family contains a resident step-child but also a natural or adopted child of both parents.
**Discussion**

**What are we already doing?**

<table>
<thead>
<tr>
<th>To establish cooperative and collaborative working relationships with families:</th>
<th></th>
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</thead>
<tbody>
<tr>
<td>What am I doing?</td>
<td>What else could I do?</td>
</tr>
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</table>

<table>
<thead>
<tr>
<th>To promote parenting information and support:</th>
<th></th>
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<tbody>
<tr>
<td>What am I doing?</td>
<td>What else could I do?</td>
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<table>
<thead>
<tr>
<th>To provide opportunities for families to develop support networks with each other:</th>
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</tr>
</thead>
<tbody>
<tr>
<td>What am I doing?</td>
<td>What else could I do?</td>
</tr>
</tbody>
</table>

**Considerations for school policy and practice:**

- In what ways are families involved in your school?
- In what ways are families invited to participate and connect with each other?
- How does your school welcome families?
- What systems are in place to communicate with families effectively?
- What role does your school play in assisting parenting?

“Parental involvement in school is associated with increased levels of child co-operation and conformity, peer sociability and confidence, and lower antisocial, worried or upset behaviour.”

Melhuish, Sylva, Sammons, Siraj-Blatchford & Taggort, 2001
Session 1 summary

Attitudes and beliefs about families and home-school relationships can impact on interactions with families and students.

Families are diverse.

Parental involvement has a significant positive effect on children’s achievement and adjustment.

There are a range of experiences and emotions involved in parenting.

Things to remember, new ideas to note, actions to take

Things to remember, new ideas to note, actions to take

Things to remember, new ideas to note, actions to take

Things to remember, new ideas to note, actions to take

Things to remember, new ideas to note, actions to take
Session 2:
Support for parenting
Discussion
Common parent and carer concerns

“Parenting support is any activity for parents aimed at reducing risks and promoting protective factors for their child’s social, physical and emotional wellbeing. This support can come from a variety of sources and can be broadly classified as informal (family, friends and neighbours) and formal (from organised sources including parent learning programs).”

Moran, Ghate & Van de Merwe, 2004

“The majority of parents report a need for support or information whilst raising their child. One quarter of parents are reluctant to seek help for fear of being negatively evaluated or criticised.”

Tucci et al., 2004 & 2005

In the last two years, what kinds of things have parents or carers asked you?

________________________________________

________________________________________

________________________________________

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S-I-B* model:
A process for responding to parent and carer concerns

If a parent or carer approaches a school staff member and says: “I’m really worried about...” or “I just wanted to tell you...” what would you say?

Set the scene
Make a cooperative opening statement
Thank you for coming to tell me about this...
I’m really glad that you’ve let me know about this...
I’m sure we can work on this together and sort it out...

Identify interests
Briefly identify the main issues
What do you want/need?
What are you worried/concerned about?
Sounds like you’re pretty worried about...
Have I got this right?

Brainstorm creative options
Make sure they address the interests identified

If concerns persist, or the issue is more serious, speak to the appropriate person in your school to ensure the student and family receive appropriate intervention and ongoing support.

*S-I-B model (Set the scene, Identify interests, Brainstorm creative options)
Parent and carer concern about separation and divorce.

A father (Peter) comes to talk to class teacher (Mary) about a concern for his daughter (Emma) following separation from his wife.

**Step 1: Set the scene for cooperation**

**Teacher:** Thanks for coming to talk to me about this Peter. It’s really helpful to know what things are happening that might impact on Emma at school. I’m sure if we talk some more we can work this out together.

**Parent:** Thanks, Mary.

---

**Parent:** Hi Mary, have you got a second to talk about Emma?

**Teacher:** Sure Peter, what’s going on?

**Parent:** I’m not sure if you know, but her mother and I have recently separated. At first Emma seemed to be okay about it, but in recent weeks she seems more affected. I don’t really know how to handle it, and thought you might have some ideas.
Step 2: Briefly identify interests

**Teacher:** So, tell me a bit more about what you're worried or concerned about with Emma.

**Parent:** Well, during the separation she was the perfect daughter, better than usual even. But now that it all seems more final she is spending a lot more time alone in her room. And when her cousins come over it always ends in a fight, when it never used to. She seems especially grumpy when she comes back from her mother’s place on the weekends. I just worry that she's angry at us and is bottling it up. She won’t talk about it.

**Teacher:** So, it sounds like you're worried about the change in Emma's moods and behaviour, and also that at the moment she seems to be bottling her feelings up rather than talking about them.

**Parent:** Yeah, that’s right.

**Teacher:** Is there anything else you are worried or concerned about, or anything you want in relation to Emma?

**Parent:** I guess I just want her to be happy. I also need to know how to handle all this, I want to know that I am doing the right thing to help her through this, but I don’t know what I should be doing.

**Teacher:** Sounds like you’re wanting some support or guidance to help you understand more about how parents can help their child through a separation.

**Parent:** Yeah, that’s right. I just don’t know how to handle this and whether I am doing the right thing or not.

Step 3: Generate creative options

**Teacher:** So, we need to think about helping Emma manage her feelings and offer you some support with parenting Emma during this time.

Let’s think of all the ways we could do these things. I know that kids often find the separation of their parents difficult, particularly in the short-term. It is something that a lot of kids go through. I know other parents have found the information in our parent resource room quite helpful. There are some KidsMatter Primary information sheets on family relationships, including one on parent separation. That might be helpful.

**Parent:** Yeah, I would be interested in learning more about what’s going on for Emma and what I can do differently. Come to think of it, some of Emma’s friends’ parents separated just last year. I might give them a ring and see how they handled it too.

**Teacher:** That’s a great idea. There are also a few other information sheets on helping children manage emotions, and also one on understanding children’s emotions. I think there are also some parenting services in town that could be useful.

**Parent:** Sounds like the information sheets are a good place to start, and I would also like to find out a bit more about the parenting service you mentioned. They will be helpful for me, but I'm still a bit worried about Emma. What if things don’t get better for her? She won’t talk to me. Is there anyone at school she can talk to about this?

**Teacher:** Definitely. We have our school counsellor, Tina. She is great in these kinds of situations, and has helped a few other kids in my class going through similar things. I can also keep an eye on Emma at school, and let you know how she is going. We can keep in touch to see whether things are getting better or worse over time.

**Parent:** Great.

**Teacher:** So, that gives us a few options now. There are the information sheets, the parenting service, me keeping an eye on Emma at school, and the school counsellor if we need her later.

**Parent:** Sounds good – how do I find this information?

**Teacher:** I’ll take you over to the parenting resource room and show you the information sheets, and the stand we have with brochures from our different community service groups. I can also give you a call at the end of next week to talk about how Emma has been going.

**Parent:** All right. Thanks for this, Mary. You’ve been a great help.

**Teacher:** Not a problem, Peter. Look forward to talking to you next week.
<table>
<thead>
<tr>
<th>Concern</th>
<th>S-I-B Model Explanation</th>
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<tbody>
<tr>
<td>My child complains he’s/she’s feeling sick every morning and doesn’t want to come to school.</td>
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<td>My partner and I have just separated and I’m worried about the effect this will have on my child.</td>
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<td>My mother has cancer and has been told she only has two months to live. What should I tell my child?</td>
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<td>My child won’t go to bed at night. What can I do?</td>
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<tr>
<td>I’m worried my child doesn’t have any friends – he/she never gets asked to birthday parties.</td>
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<tr>
<td>My child has been wetting the bed lately. What can I do to help?</td>
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<tr>
<td>My child’s younger brother has a severe disability and I’m worried about the impact this is having on him/her. What can I do?</td>
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</tbody>
</table>
Choose a parent and carer scenario to undertake S-I-B planning for your response to the scenario.

<table>
<thead>
<tr>
<th>1. Set the scene (cooperative opening statements)</th>
<th>2. Identify interests (wants/needs/worries/concerns)</th>
<th>3. Brainstorm (creative options)</th>
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## Activity
### S-I-B model in action
**Role play: S-I-B observation sheet**

<table>
<thead>
<tr>
<th>The S-I-B model steps</th>
<th>Tick or cross</th>
<th>Comment</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Preliminary step</strong></td>
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<td>Parent or carer requested</td>
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<td>information on the issue</td>
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<td>Accurately assessed it</td>
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<td>is appropriate to use the</td>
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<td>S-I-B process</td>
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<td><strong>Set the scene for</strong></td>
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<td><strong>cooperation</strong></td>
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<tr>
<td>Made a cooperative opening</td>
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<td>statement that included:</td>
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<td>(a) the problem can be looked</td>
<td></td>
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<tr>
<td>into</td>
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<tr>
<td>(b) let’s work together</td>
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<td></td>
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<tr>
<td>(c) everyone can have their</td>
<td></td>
<td></td>
</tr>
<tr>
<td>important needs met</td>
<td></td>
<td></td>
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<tr>
<td><strong>Identified interests</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Asked about wants or needs</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Asked about worries or concerns</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Helped to identify deeper</td>
<td></td>
<td></td>
</tr>
<tr>
<td>interests</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Brainstormed options</strong></td>
<td></td>
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<tr>
<td>Helped generate a broad</td>
<td></td>
<td></td>
</tr>
<tr>
<td>range of options</td>
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</tbody>
</table>
Tips for brainstorming

- Quantity – think of as many options as you can (make a long list).
- Let the ideas flow.
- Don’t criticise or judge any ideas yet.
- Generate options that meet interests (yours and theirs).
- Diversity – come up with wild and zany ideas (consider ‘impossible’ options).
- Improve ideas.

The staff member may need to take the lead in making suggestions, particularly in advising the parent or carer about the resources and supports available in the school.

Examples:

Offer to monitor the student and develop a collaborative relationship with parent or carer:
- I could keep a closer eye on X and let you know how he/she is going...

Identify relevant school personnel:
- I know that X here at school knows more about this...
- I could have a chat with them and then we could meet again to see what we might do next...
- I could introduce you to...

Refer parent or carer to resources and information:
- I know we have some information about that in the parenting resource room...
- There is a community agency that works with the school that we could contact to find out more about this...

Do you have any other ideas?
From this list, what would you like to do next?
Online information for common parenting concerns

**Grief, loss and crisis**
  *Dealing with a crisis*
  (select ‘General parenting PEGs’ link)
- Women and Children’s Health Network: www.cyh.com
  *Grief and loss*
  (select ‘Parenting and child health’, then ‘Emotions and behaviour’ links)

**Difficulties going to bed**
- Women and Children’s Health Network: www.cyh.com
  *Sleep – 3 years to 5 years*
  (select ‘Parenting and child health’, then ‘Growth and development’ links)
  *Fears – young children*
  (select ‘Parenting and child health’, then ‘Emotions and behaviour’ links)

**School refusal**
- Women and Children’s Health Network: www.cyh.com
  *School refusal and truancy*
  (select ‘Parenting and child health’, then ‘Emotions and behaviour’ links)
- No school please
  (select ‘Kids health’, then ‘Your school’ links)

**Parent or carer separation**
  *After the break-up*
  (select ‘General parenting PEGs’ link)
- Women and Children’s Health Network: www.cyh.com
  *Family break-up*
  (select ‘Parenting and child health’, then ‘Family and relationships’ links)
  *Parenting arrangements after separation*
  (select ‘Parenting and child health’, then ‘Family and relationships’ links)

**Components**
Component 3: Working with parents and carers
Sibling conflict

- Australian Childhood Foundation:
  Brothers and sisters
  (select ‘Responding to children’ link)

Sibling conflict

Additional national websites

- Association for Children with a Disability:
  www.acd.org.au

- Children of Parents with a Mental Illness (COPMI):
  www.copmi.net.au

- Family Relationships Online:
  www.familyrelationships.gov.au

- Kids Helpline:
  www.kidshelp.com.au

- Relationships Australia:
  www.relationships.com.au

Friendship difficulties

- Raising Children Network:
  www.raisingchildren.net.au
  Child development: 6-9 years
  (select ‘School age’, then ‘Development’ links)

- Women and Children’s Health Network:
  www.cyh.com
  Feeling lonely
  (select ‘Kids health’, then ‘Your feelings’ links)

Bed-wetting

- Parenting SA:
  Bedwetting
  (select ‘General parenting PEGs’ link)

- Raising Children Network:
  www.raisingchildren.net.au
  Bedwetting
  (select ‘School age’, then ‘Sleep’ links)

- Women and Children’s Health Network:
  www.cyh.com
  Bedwetting
  (select ‘Parenting and child health’, then ‘Growth and development’ links)

Siblings and disability

- Association for Children with a Disability:
  www.acd.org.au/siblings
  Sib factsheet for parents
  (select ‘Sib fact sheets’ link)

- Parenting SA:
  Disability – brothers and sisters
  (select ‘General parenting PEGs’ link)

- Siblings Australia:
  www.siblingsaustralia.org.au
  Pages for parents and for young siblings
What is mental health?

The S-I-B model provides an approach for communicating with parents and carers seeking parenting support.

Schools can be a source of parenting information that will enhance children’s mental health and wellbeing.

After GPs, teachers are the professionals consulted most by parents and carers on children’s mental health issues.

Things to remember, new ideas to note, actions to take
Session 3: Collaborative working relationships
### Positive connections

What sorts of things do parents and carers like hearing from school staff?
**How do you know? Have you asked them?**

**How can these be communicated?**

### Regular connections

How can school staff connect regularly with parents and carers?

**Have you asked families how they prefer to be contacted?**
**Is this something that is asked of all new families when they join your school?**

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**“Attributes of teachers that enhance relationships with parents are warmth, openness, sensitivity, flexibility and accessibility.”**

Comer & Haynes, 1991

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**“Helpful dispositions include a positive attitude towards families and the relationship, approaching families as partners, and commitment to communicating effectively with families.”**

Baum & Swick, 2008; Epstein, 1995; Coleman & Wallinga, 2000
A systematic approach

One KidsMatter Primary school used a systematic three-step process to connect with parents and carers in the following way:

1. **Step 1. Observe**
   Over a month, class teachers recorded each time they had contact with their students’ parents or carers.

2. **Step 2. Review**
   Data showed they had regular contact with some families, and little or none with others (especially in the older grades).

3. **Step 3. Act**
   Staff decided to make contact with each student’s parent or carer twice per term, and to keep a record of progress using the table below.

<table>
<thead>
<tr>
<th>Child’s name</th>
<th>Welcome note</th>
<th>Positive comment note</th>
<th>Phone call</th>
<th>Email/SMS</th>
<th>Face-to-face</th>
<th>Reminder</th>
</tr>
</thead>
<tbody>
<tr>
<td>Aidan</td>
<td></td>
<td></td>
<td></td>
<td>E</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Amal</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>L</td>
<td></td>
</tr>
<tr>
<td>George</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Sera</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>F2F</td>
<td></td>
</tr>
</tbody>
</table>

(I) Interpreter needed  (E) Responds best to email contact  
(L) Literacy difficulties of adults  (F2F) Responds best to face-to-face contact
Think about what you’ve learnt during the professional learning. What do you want to add to your own practice to build relationships with families?

**My goal for Component 3 is...**

<table>
<thead>
<tr>
<th>Obstacles</th>
<th>Ways I’ll work around them</th>
</tr>
</thead>
</table>

Is your goal **SMART?** (Tick next to each of the criteria it meets. Rewrite as necessary)

- Specific – Do I know exactly what it is I want to accomplish?
- Measurable – Will I know if I have accomplished the goal? Can I measure my progress?
- Attainable – Do I see myself able to reach the goal?
- Realistic – Am I willing and able to work towards the goal?
- Timed – Does the goal have a defined time frame?

**Why is it worth it? I’m willing to commit to this goal because...**

**What might stand in the way of you achieving your goal?**

**How will you work around the obstacles?**

The people I’ll tell about my commitment to help keep me motivated are...

I’ll review my progress towards my goal on this date:
Planning school-wide action

Think about any ideas you have for what your broader staff group and the entire community could do to enhance the way your school works with parents and carers.

Write your ideas below and tear them off. Your ideas will be provided to the Action Team to help plan school-wide action.

Idea box for staff to enhance the way we work with parents and carers:

Idea box for the entire school community to enhance the way we work with parents and carers:
Session 3 summary

Things to remember, new ideas to note, actions to take

Relationships are best built by small, regular investments and maintained in a systematic way throughout the school.

Schools can be a community hub where people come together – to reduce social isolation and optimise children’s mental health and wellbeing.

Through reflection, staff can become aware of the attitudes and beliefs that impact on their relationships with families.

Schools can build home-school relationships through connecting families together and promoting community information.

It’s important schools continue to find ways to work with families, as needs evolve and new families come and go.

It’s important schools continue to find ways to work with families, as needs evolve and new families come and go.
Tell us what you think!

Your feedback is very important and will ensure that the KidsMatter Primary professional learning sessions are effective. Your feedback can also be counted towards our formal recognition as a KidsMatter Primary school.

Every participant, including the facilitator, is invited to provide feedback. Responses are anonymous and are viewed only by the KidsMatter Primary national team for quality assurance purposes.

Please provide your feedback at:
www.kidsmatter.edu.au/primary/componentfeedback