Promoting International Student Wellbeing

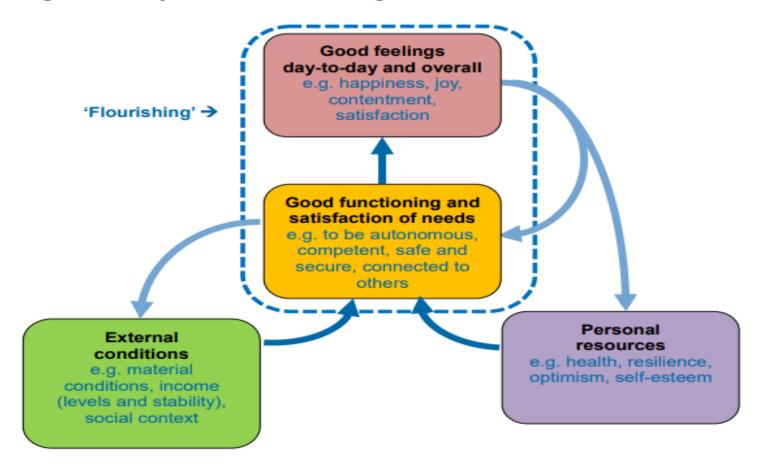








Figure 1: nef's dynamic model of well-being





- Being able to deal with and manage situations.
- Healthy expression of all emotions/ feelings.
- Living in a way that is good for you and good for others around you.
- Feelings of contentment, enjoyment and engagement with the world, these include self-worth and self-awareness.
- Flourishing or thriving.
- The balance point between an individual's resource pool and the challenges faced.

Worth-it Education



What's the story?

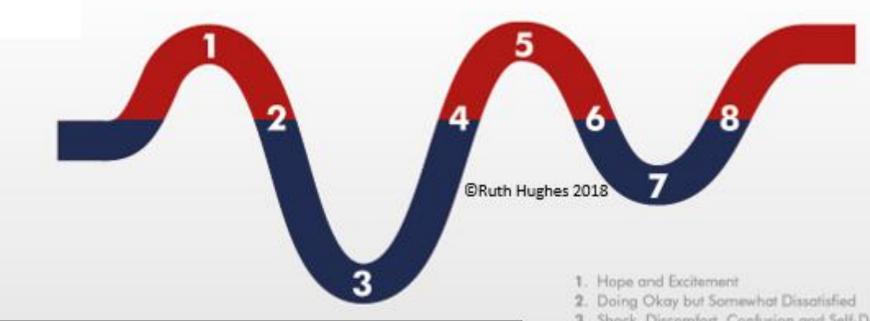
• The balance point between an individual's resource pool and the challenges faced.

External Factors & Personal resources
School, study, friendships, sleep, home life, parents, illness, trauma...



Culture Shock

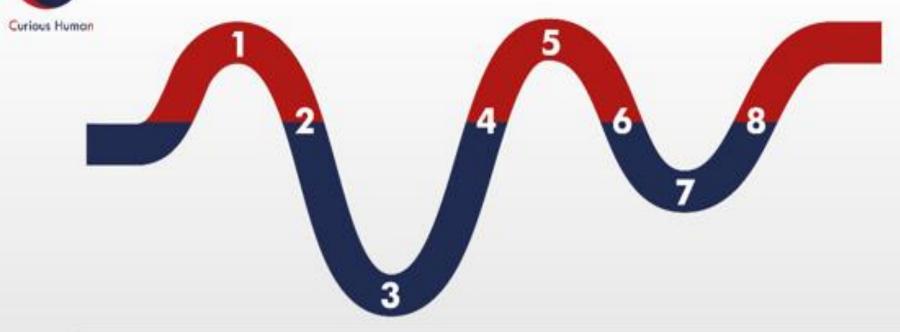




Inter-cultural Growth

- Shock, Discomfort, Confusion and Self-Doubt
- Initial Adjustment
- Adjustment Adaption
- 6. Shock, Recall
- 7. Isolation, Identity Confusion
- 8. Adaption, Search for Meaning, Adjustment

Impact of culture shock on identity





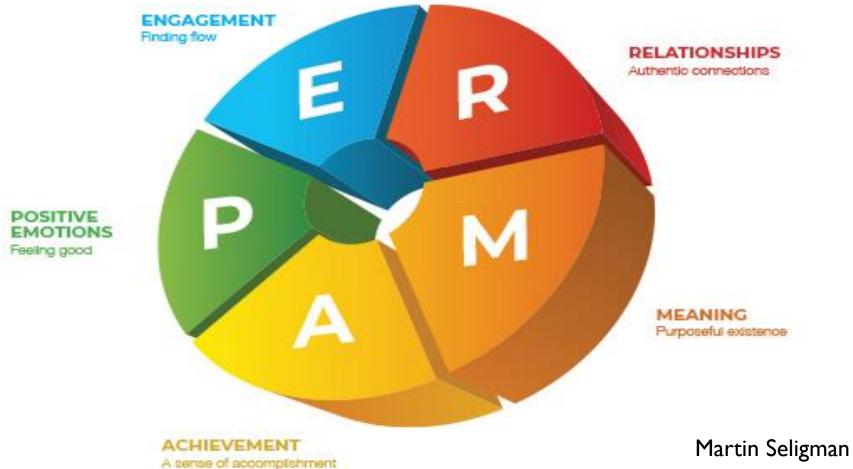


So what can we do?

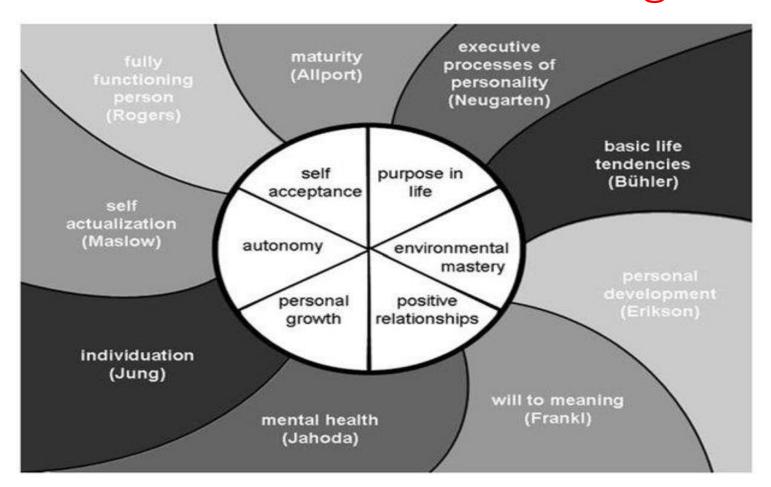
- I. Boost Wellbeing in all our students
- 2. Be alert to the signs of a young person in distress
- 3. Know when, where and how to refer or ask for help
- 4. Have appropriate policies in place
- 5. Implement appropriate training for all staff

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Boosting Wellbeing







Ryff's Wheel of Psychological Well-Being

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Perspective Taking

A C.A.L.M. Attitude for the M. O.



You meta-cognitive observer is your mind's eye or "inner audience of self"

Foster an attitude in your Meta-cognitive Observer that is:

- Curious
- Accepting
- <u>L</u>oving/Compassionate
- Motivated to Learn
 More and Grow from a

 Position of Security

Gregg Henriques Ph.D. - Psychology Today



2. Be alert to the signs of a young person in distress

Behaviour

Amber indicators

Low or sad mood/Crying

Mood swings/agitation/hyperactivity

Difficulty in concentrating or making decisions

Irritability

Excessive tiredness/Issues with poor sleep
Weight loss/weight gain

Loss of enjoyment in activities

Unexplained aches and pains

Concerned friends/social isolation...



Behaviour

Red indicators

Self-harm

Inappropriate sexual behaviour

Observable issues around food

(e.g. not eating in front of others,

visiting the bathroom after every

meal)

Alcohol, drugs or other substance

abuse

Risk-taking

Telling staff of suicidal intentions

Seeing things, Hearing voices or

perceiving reality in a distorted

fashion

Unexplained injuries

Attempted suicide

Etc...



Possible Causes

Transient or Minor

Low level or short-term causal incident: (friendship issues, homesickness, worries about work, home, family etc.)

Experimentation associated with adolescence

Cultural differences

Hormone changes
associated with adolescence
Natural high/low
metabolism and/or high/low
appetite
Culture shock
Minor illness



Possible Causes

Serious

Diagnosable Mental Health Major physical illness Illness (anxiety, depression, (cancer, genetic, hormonal psychosis, anorexia, bulimia, binge eating, bipolar disorder etc.)

etc.)

Indicator of abuse – emotional, physical or sexual



Responses from staff/stakeholders

Responsible Adults SHOULD:

Keep the welfare of each young person in paramount consideration

Have had access to appropriate training

Approach, assess, assist

Listen non-judgementally

Preserve life – (ask directly if there is a

concern about possible suicidal

intention)

Give comfort

Encourage young person to access

further support

Provide appropriate information (to child and to family, where possible)
Seek advice and refer upwards where appropriate

As far as possible, be aware of, and take into account, cultural issues

Follow legal and safeguarding policy guidelines at all times (see separate document)

Prevent further harm to young person or to others



Responsible adults **SHOULD NOT**

Investigate and interrogate
Diagnose beyond a level for
which they are qualified
Be judgemental or
stigmatise
Try to "rescue" student

Overstep professional boundaries
Jump to conclusions
Put themselves at risk
Inform parents if this could put the child at increased risk (eg.
From abuse or in cases of FGM or forced marriage)



3. Know when, where and how to refer or ask for help

MHFA UK provide specialist training to help when someone is having a mental health crisis. They advise:

- A Approach, assess and assist
- L Listen and communicate non-judgementally
- G Give support and information
- E Encourage the person to seek appropriate professional help
- E Encourage other supports



Aims of Mental Health First Aid:

- Preserve life where a person may be at risk of harm to themselves or others
- Provide help to prevent the mental health issue from becoming more serious
- Promote the recovery of good health
- Provide comfort to a person with a mental health issue

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Useful referrals:

	UK		International
•	Your local GP surgery Samaritans on 116123 (24 Hrs) Saneline (out of hours mental health and emotional support and information) – 0300304700 Mindline (information) –	•	911 Local Medical Centre Befrienders Worldwide https://www.befrienders.org — support & suicide prevention in 400 international centres in 39 countries Mental Health First Aid
•	O3001233393 Drinkline (helpline) – O3001231110 Talk to Frank (drug education service) O3001236600 No Panic Youthline (anxiety) – 01753840393 Your school safeguarding lead or local authority safeguarding team		http://www.mhfainternational.org/internat ional-mhfa-programs.html training programmes and advice - licenced in 26 countries



4. Have appropriate policies in place:

- Do your students and staff know where to ask for help in a crisis?
- Have your staff received appropriate training in safeguarding, providing supportive pastoral care, recognising culture shock, promoting wellbeing and good mental health?

Policies might include:



- Policy Statement
- Scope
- Policy Aims
- Staff & student roles & responsibilities
- Individual Care Plans
- Teaching about Wellbeing
- Signposting
- Approaches to early intervention
- Crisis response procedures (including suicide)
- Mechanisms for support for students falling short of crisis response but who may still need support

- Post crisis support & information procedure (staff & students)
- Warning Signs
- Managing disclosures
- Conflict mediation
- Confidentiality
- Working with Parents
- Supporting Peers
- Training
- Review, recording & updates



5. Implement appropriate training for staff and stakeholders:

Company	Offers	Contact
Curious Human	Evidence-based wellbeing and cultural transition training to promote good mental health, based on positive psychology and coaching psychology.	Ruth Hughes Website: www.curious-human.co.uk Email: office@curious-human.co.uk Tel: 07511638116
Worth-it	Evidence-based positive psychology and coaching approaches to prevent mental health problems and promote and improve the wellbeing of young people in education, family and community.	Liz Robson-Kelly Website: www.worthit.org.uk Email: info@worthit.org.uk Tel: 07749125877
The Resilience Doughnut	Training in a practical, research-validated, therapeutic model for building emotional resilience and wellbeing in children, young people and adults.	John Shepperd Website: www.resiliencedoughnutuk.com Email: john@resiliencedoughnutuk.com Tel: 07792127541



Company Name	Offers	Contact
Student Minds	Online resources Student Helpline Publications & resources available to institutions Bespoke training	Website: www.studentminds.org.uk Email: info@studentminds.org.uk +4401865264168
MHFA UK	Training in Mental Health First Aid for children, young people and adults.	Charlotte Wiseman Website: www.mhfaengland.org Email: info@mhfaengland.org charlotte@step-inside.org +4407764898444
Other?		



Discussion

- Short term stays
- Cultural Differences
- Focus on Curriculum Delivery
- •Reputational Management
- Training of staff, particularly young staff
- Conflicting priorities



Thank you for listening Any Questions?