

# Be You In Focus webinar transcript: Supporting mental health following a critical incident

**Antonia Douglas:** Good morning. I'd like to welcome you to today's webinar, supporting mental health following a critical incident. It's wonderful to have so many people join us this morning and, based on the high number of attendees from across Australia, this is clearly a relevant topic for schools. My name is Antonia Douglas and I'm the Be You Senior Education Consultant based in Western Australia. I've been working with schools supporting educators preparing for and responding to critical incidents for the past five years, so this is an area of importance to me. Today is about supporting educators in recognising critical incidents, their potential impacts and providing examples of how Be You can support schools that are impacted by critical incidents of this nature. This topic may be new for some of you joining us today or for others you may be further along your learning journey.

Today is about sharing resources, information, ideas and stories in an environment that is supportive and respectful. For those who don't know much about Be You, Be You is the National Education initiative led by Beyond Blue, in partnership with Early Childhood Australia and **headspace**, funded by the Australian Government. Be You provides educators with knowledge resources and strategies for helping children and young people to achieve their best possible mental health. Schools and learning communities have access to over 70 consultants from across Australia to support their implementation of Be You. The recording of today's webinar and any additional materials will be located on the Be You website, so if you do miss anything, you can always access these resources at a later date.

While we are waiting for a few others to join us, let's run through a few quick tips for getting the most out of your webinar experience with us today. We've taken a screenshot of an example of the attendee interface. The webinar or PowerPoint viewer is to the left and the control panel is to the right as shown on the screen. Your control panel can be minimised and will look similar to the image on the extreme right that we've circled in blue. If this is the case, click on the orange arrow at the top of the panel to expand and then you can drag that control panel anywhere you like on your screen. You can also use the control panel to manage your computers or phone audio. Today, you are in listen-only mode and your microphones have been muted by default. If you'd prefer to join on the phone just select telephone in the audio pane and the dial-in information will be

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displayed. You may choose this if your internet connection is not very strong or reliable. And if you do experience any difficulties during today's webinar, please note the customer care details on the screen and you can just contact that team directly.

Other features of today's control panel include a question-and-answer box and you'll have the opportunity to submit questions in today's presentation by typing in your questions into this pane of the control panel. You may send your questions in at any time during the presentation and some of these we will do our best to answer in real time. We might do that directly to you or we might answer that to the whole audience. You will not see everyone's questions unless they're answer publicly and then shared. This webinar platform that we are using today does not have a traditional attendee chat box, so when you submit a statement, story, idea or resource, others will not see this. We have more than a hundred people that are currently attending today's session, so we won't have time to answer all of your questions. However, please be reassured that we will collect these and address them either during the live question and answer session at the end of this morning or later in a post webinar handout. We encourage you to use the question box to either ask questions and share resources as you see fit.

Before we do jump into the official proceedings of this morning, we would like to acknowledge the traditional owners of the land and water throughout Australia which we are meeting and pay our respects to Elders past present and emerging. We recognise the importance of continued connection to culture country and community, to the health and well-being of Aboriginal and Torres Strait Islander children, young people and their families. Members of our panel are joining you today from various nations from across Australia, I'm joining you today from the land of the Wadjuk Noongar people and I would like to pay my respects to Elders past present and emerging from this country.

It is important that all participants that are joining us today feel a sense of belonging and they feel empowered to share their voice. Everybody has the right to learn and contribute as well as feel included within this shared online space. As we would be talking about critical incidents for the next hour it is really important to remember that your own well-being is a priority. During this presentation we will continue to reference the importance of self-care along with a number of resources that you can use to support this and if you do find that you have any questions following the presentation your Be You consultant that is working alongside your learning community will be available to support you and your school's action team with this. On the Be You website there are a range of wellbeing tools and resources that you can access including the wellbeing tools for you and the Be You wellbeing fact sheet.

So, what are we going to cover this morning? These are the learning outcomes. I am really happy to say that we have Michelle Roberts who will be joining us to unpack a lot of this content this morning. And as we do have a relatively short amount of time to cover a lot of this content, your Be You Consultant will be available to help support you in unpacking this even further.

So, we're about to share a video with you which looks at the potential impacts of critical incidents. This video has been taken from The Be You Professional Learning module 'Recognise' which will help set the scene before we introduce our guests for this morning.

## **Video: recognise the potential impact of critical incidents**

A critical incident is a sudden and unexpected event that is outside normal experiences. It is usually associated with a loss of control and a threat to life. Critical incidents can be so overwhelming for young people or any people that their normal coping strategies don't work for them.

So, it's where it's not an incident that's just going to affect a small group; it's anything that is going to impact, like, a class of people. So, if it's something that's going to impact all of our staff, I'd class that as a critical incident, or a whole year group.

So critical incidents affect students in a range of different ways; in first instance, just emotionally, and, you know, having to deal with any sort of news of any kind that could have an impact is just, some might be upset, or angry – there's all different sort of things. You know, you have to look at the academic impact, so obviously we're at school and so there's an impact on their ability to work and function. It's socially how they interact with the others. So, I guess there's a wide range of different impacts, it depends on the critical incident itself, I guess, as to how it will impact directly the students.

So, it's really important for learning communities to have policies and procedures before a critical incident occurs. And it would be ideal if those policies were reviewed each year because of staff changes within a school. It's important that, as new staff come on board, they're aware of what the policy is when in a chaotic environment, when everyone might be quite distressed. It's really good to have a clear plan and process in place that can just be actioned.

When something happens that is a critical incident, it's very hard for everybody to think clearly, and there's a lot of things that are going on all at once. And not one person can do it all. It's much more helpful when everybody knows that if someone's allocated to a particular task. Otherwise what you find is that everybody starts doing the same thing. Because there are really logical things that most people would know to do in a critical incident. But what they don't know is that – you might have five people who then go "okay, we need to do this". If something happens here, it actually directly impacts in a big way a number of the other schools, because they may know somebody, or even just be in the local area.

In all learning communities, there's students, staff, parents and then sort of the wider community around that. So, in thinking about a policy, you need to consider the impact on all of those range of people and what are the actions that you might need to take, to support them after a critical incident.

**Antonia Douglas:** As I mentioned earlier, my name is Antonia and I will be facilitating this morning's session. I'd like to also take this opportunity to introduce our panellists and our guest presenter for this morning. Michelle Roberts is a psychologist, teacher and child disaster consultant. Before she started her teaching career at a school impacted directly by the Ash Wednesday bushfires. Michelle has continued to work in the field of children, schools, emergencies critical incidents in trauma, including in child centre disaster resilience education. In 2010, Michelle was awarded a Churchill Fellowship to explore school-based trauma mitigation intervention strategies. So, welcome, Michelle.

We'd also like to welcome our panellists for this morning, Renae Duncan and Paola Mercado. Renae and Paola will be joining us after Michelle's introduction to critical incident theory to answer some of your questions. They're both valued members of the Be You team. Renee's is a senior clinical consultant here in Western Australia and Paola is an early childhood consultant based in Western Australia. So, thank you for joining us.

So, there are many different versions of definitions of critical incidents. And on the screen now are some commonly agreed characteristics from the Be You initiative. As critical incidents can be unexpected, involve a threat to life and may involve loss. They can overwhelm or threaten to overwhelm a person's coping capacity. More broadly, incidents become critical when they overwhelm the usual coping capacity of a learning community. As educators, you may find that critical incidents could occur either within your own learning community or they could occur externally to it. Critical incidents may involve children and young people as well as educator's families or other adults close to them. The network of people affected by a critical incident can be wide especially if the incident directly involves people within that learning community.

We know that exposure to disasters and distressing events via media and social media can also cause children and young people to feel threatened due to that perceived threat. In those situations, the learning community will need to determine an appropriate level of response, but the key principles are very much still the same.

So, we've just got a little poll for you to undertake this morning, now that you have a little bit of background information about the content that we will be covering. So, I'm just going to ask you to take a moment to answer the poll displayed on the screen.

# Poll

## I understand the impact that critical incidents may have on the mental health of my learning.

Please select one:

- I have a comprehensive understanding
- I have a limited understanding
- I need to increase my understanding.

**Antonia Douglas:** Wonderful. Fantastic. So, we've got a range of different people that are joining us today. We've got 34% that have a comprehensive understanding and 48% that are here to increase their understanding and 18% have a limited understanding. So hopefully we'll be able to address some of the questions that you may have. The question-and-answer box is a really good opportunity to pose some of those questions and hopefully we can get to them a little bit later this morning. If we don't get to them all today, it is something that will hopefully get to at a later date.

So, as mentioned earlier, critical incidents may vary in nature and here is some examples of critical incidents that may impact on learning communities. So, the death, suicide or terminal illness of a child or young person, current or former staff member, family or associated community member. I've got natural disasters such as drought, bushfire, floods and cyclones. And incidents such as bomb threats, explosions or chemical or gas hazards. And so there are a range of resources on the Be You website that can support learning communities in responding to critical incidents including Professional Learning, Suicide Prevention and Response, Fact Sheets, and, of course, consultant support. Now that we have the foundations and understanding regarding what a critical incident is, I'll now invite Michelle to continue our learning and provide more of an in-depth dive into theory, child reactions and impacts on mental health. Thank you, Michelle.

**Michelle Roberts:** Good morning. Thanks, Toni, for that. I'm wanting to actually unpack the notion of critical incident a little bit further before we progress in today's presentation. Initially, we thought about critical incidents in terms of the event itself and as our knowledge and, our research has progressed, we actually understand that it's much more about the individual appraisal. Certainly, when we're responding to critical incidents in learning communities it's useful to stop and take stock of what the objective features are of the incident itself and use that to predict where we might need to be doing our response and support. But we know that individuals and communities have their own take on these events as well, and that you can have a number of people exposed to the same event, but take away different impacts and understandings from that event.

So, our starting point in learning communities is also always sorry from the aspect of the community itself and the individuals that are in it at any given time. I guess our aim in learning communities when we're talking about managing critical incidents is to bring a level of calm and organisation to what can be a chaotic situation. And then to do the appraisals of what impact that's had on individuals and how we might go about intervening to bring back a sense of physical and psychological safety for those people. So key things are to think about the objective reality and the subjective perceptions in we're thinking about critical incidents. When I've worked with leadership teams in schools and I've asked them the question of what a critical incident is or what they've experienced in their learning community, they range from a stray dog being hit outside the school at playtime through to having four students killed in a car accident, right through to the mass casualty events such as Christchurch, or the Bourke St incident here in Victoria, Black

Saturday, or Queensland floods. So, it is very much what the meaning is of that incident for that community and individuals within it.

So, a little bit about the research and theories – and I think I need to start by acknowledging that we're really slow in our research and understanding in relation to children and their response to critical incidents disasters and potentially traumatic events, and note that I use the term 'potentially traumatic', not 'traumatic event', as referred to just before.

We need more child-centric research. A lot of the research has tended to be done with adults and then generalised to children and there's not a lot in Australia in particular, but generally of school learning community-focused research. So, this is what we know at this point in time around the characteristics that can influence impact. The proximity of the individual to the unfolding event. What they hear, see, experience and what meaning and appraisal they put to that. Whether there's a sense of that event being overwhelming and out of control – and that's why as soon as we can, we put our emergency management plans into action so that we can bring a measure of control and calm and authority over that situation to help influence the appraisals as it being something that was stressful and frightening (but perhaps not life-threatening), overwhelming and that everyone was very terrorised and frightened. We know that if people think they were going to die or that someone that they know or care for was at risk of dying, the risk is much greater for adverse outcomes.

I mentioned briefly about that exposure when I spoke about proximity, and we know the sensory overload that people get from the sights smells and sounds is something we need to take into account. One of the real indicators for me about how hard we're going to have to work with individuals and the school community to restore equilibrium is whether or not it's shattered people sense of the world – and that shattered world view, or shattering of the assumptive world, is a real key to whether or not people think that life as it was is now being derailed, and it's become something totally else.

So, the theories and frameworks for understanding are broad, and I suggest that you also add in here the frameworks that you already have in place in your learning communities around social emotional literacy, resilience, capacity-building, connection and friendships. We talk about the biopsychosocial impact, and there's a new concept around at the moment called 'moral injury', and I'll speak a little bit about that as we go on.

The biological, the psychological and the social systems are often adversely impacted by critical incidents, disasters, and potentially traumatic events. We know that young children whose neurological and biochemical systems are in the progression of development may have alterations to their biology. They may be consumed with adrenaline that makes it difficult for them to pay attention, to concentrate, to be calm, to manage their own arousal levels, and more frequently we see a dysregulation of arousal systems. Psychologically, the world as they knew that was predictable safe that there were carers that would look out for them has been challenged. Psychologically we can see some generalised anxiety responses. Again, I mentioned dysregulation, because that's something that we see in schools and have to manage, and we see changes in social relationships, friendships change, regressions in development occur, and potentially we see that children even sometimes become isolated, or they become hyper friendly and need greater connection, in these circumstances.

The ecological model is where we actually look at where the child fits within all their systems and we know that we all are part of multiple systems the school communities one of them, learning communities, sporting clubs spiritual or religious groupings. All these factors have protective options to them, but we also have to be mindful that in working with the child we're working with all these other parts of them and we need to be able to understand what they've brought to the event itself, what their understanding is, what supports they've got. The other thing that, really, I think we underestimate is the secondary adversities. There's the first event that is very challenging, and if

things go well, we put into place strategies to reduce those adversities. But the longer-term impact of the changes to the family, the changes to the community – and I'm thinking when I'm talking about this my experience of working with learning communities after the Black Saturday bushfires here in Victoria – the fires themselves obviously, 173 deaths, sustained terror and fear, loss of homes, separation from family and carers, lots and lots of factors in that one event that were so challenging, so overwhelming for so many people. 10 years on, we're still seeing the impacts of that primary event but also then the changes that occurred to people's lives after.

The secondary adversity is the teachers who had also had losses who were less available at school who are struggling with their own responses and the children who were looking to them for support and guidance, but everyone was struggling with the same adversity. The loss of the school buildings and the need to rebuild, the loss of home, the loss of the landscape, the loss of the birds and the sound of the birds, those secondary adversities that are additional challenges. Of course, we know that family violence increases after disasters. So, what was perhaps a coping loving caring family becomes a family that's struggling, where parents have less tolerance and there's more angry words.

We look for the protective factors in these circumstances, and a lot of those protective factors are relational. For peer groups, for family, for parents, for other adults who can be reference points for calm, control, physical and psychological safety. Talking about this in terms of what we see as risks and adversities and damaging factors. We need to acknowledge that there are post-traumatic growth opportunities in all of this. I've seen many young people who have had really difficult exposures who have certainly post-traumatic stress responses, but at the same time have learnt lessons decided that they have strategies and skills that they never knew they had and that can also show signs of post-traumatic growth where they alongside the challenges can see what they've learned, how they've grown, how they can apply it, and how they can help others as well in those circumstances.

So, as a broad overarching frame for you to look at, these are some of the possible reactions that we see to critical incidents and larger-scale disasters in the fear threat area. So, we're thinking some of the changes that happen to our biology in the behavioural responses to that. In children and young people, we can see - and not to forget our infants and babies, of course – anxiety, asking of lots of questions or, in fact, we may see avoidance around talking about what's happened. We might see clinginess and nightmares. In the mood, feelings, behavioural areas, I want to pick out as an example that wanting to help others in the behavioural. We had an incident a long time ago now here in Australia where a kindergarten was taken siege, and the children were held hostage for a night and a day, effectively – a long period of time. Once the safety was reassured and the children were reconnected with their parents... And before we did that, we actually made sure that those parents were themselves in the right place to have their children come back and were able to be supportive and calm with their children. We saw changes in those little people's behaviour. And what we saw was this huge increase in altruistic behaviour. After the Black Saturday bushfires, one of the coping mechanisms I saw in students was them then wanting to reach out to other young people who were exposed to adversities as well. As educators, the alterations to concentration, attention and sleep all have repercussions for learning capacity and capabilities.

We talked in the bushfires about 'bushfire brain'. We know that some parents spoke about the difficulty of making sandwiches because they lost the ability to sequence the short-term memory alterations. If you apply that to learning and what we expect from children in learning, those impairments can actually alter their learning trajectory, and there's some current research done by Lisa Gibbs and a group of us where we've actually been able to show, through NAPLAN results, alteration to learning after the Black Saturday bushfires.

So, very quickly, we're going to just do a broad brush around stages and ages, and I wanted to focus more on stages and developmental stages rather than ages, because we all know the child

who may be four years of age chronologically but is much more advanced or less advanced in different developmental areas. So reactions will vary according to a number of the factors specific to that child and the supports in their environment – who's available to support them, how socially developed or undeveloped they are, how we can support them in making sense of what the experience has been, what the meaning of that is, and what are the protective factors that surround them. So, we need to take into account their age, their temperament and I've put 'innies' and 'outies' there because I'm referring to those children who either internalise responses and reactions or those who externalise them. And as educators and parents, the research shows we're better at picking up in distress in children who externalised rather than picking up on the distressing those who internalise.

So, it's just something to think about with your trauma lens with your students and young people when there's been a critical incident. Of course, every child comes to a critical incident with previous experiences. The experience they have during the unfolding of that critical incident and then, what they have around them is after the adversity and again, we refer back to that social capital, connections, relationships, understanding, and meaning making and what they can do and have done individually or collectively to help in the repair and the restoration after this challenge to their world.

For our babies and toddlers, we often forget that very, very young children, babies, and even prenatally, there are adverse impacts potentially from exposure to really challenging events – if we think about the inter-uterine environment and the changes in chemicals in the mother and how they can impact the child. We also know that very young babies take their measure of safety from the faces of their carers and if that carer's face is one of terror and fear, the child's going to know very quickly something really bad is happening and feel, at a real bodily level, frightened themselves. And I refer you to a lovely YouTube clip where Ed Tronick did some research and there's a little clip of a child responding to a mother's face. It's called the still face experiment, and you can see how very carefully attuned babies are to people's faces to take a measure of their safety.

In babies and toddlers, we can see really devastating impact on their attachment when there's fear and threat and unavailability of an attachment figure to reassure and to calm and soothe and co-regulate. Little people can communicate the impact of this experience both verbally and non-verbally, and, really interestingly, there's some research that shows when incidents occur pre-verbal stage that, as time goes on and development occurs, children can actually put words to the experience as they grow. We need to know that there's a thing called 'sensory memory' and that how our body feels and responds is recorded and stays with us – so a smell might be enough to trigger that fear response as the child goes on.

We know that very young children don't have a sense of time, and I know that we all probably remember some of the discussions around 9/11 – which we just had an anniversary of – and the children who are watching it on TV thought it was happening time and time again, because they didn't know that it was in the past. Regulation is such a key factor through all ages and stages.

In our lower primary years, if we think about the developmental tasks that children are engaging in at that point, where they're go from being solely reliant on caregivers to now having friends and peers, it sort of mediates and alters the way we think about impact of critical incidents in schools. We see a lot of physiological responses at this age, where they feel it in their body hence somatisation. We get lots of stomach aches and headaches, we get reluctance to separate from carers and carers reluctant to separate from their children when there's been a critical incident or own adversity.

We can see like the children at the kindergarten, I referred to before, that they become incredibly altruistic where distress in other people brings up distress in them. We can see changes in what was their developmental trajectory, and we can see some regressions. We can see loss of toilet

training. For example, 10 years after the Black Saturday bushfires in one school, this is the first year that they've had all their prep students toilet trained and not wetting throughout the day. So, even children who weren't born at the time of the Black Saturday bushfires have shown changes in their development because of the secondary adversities within the family. We see impact on their thinking and their ability to pay attention, in language development, and, of course, this is an age of meaning making where they have some magic thinking happening and they may feel guilty – think that maybe something that they've done or said has brought about this adversity. So, checking in with kids and challenging that faulty thinking is really important.

In the middle years, if you think about again what's happening here, we've got huge social development in this age range. We do have an element of the superhero – “If only I'd done this...”, “If I'd done this...”, “I should have done this to be protective of the people I care about”. We see distortions around it, some myths developing, and so being able to give age-appropriate accurate information is really important in our school system or a learning system at this stage. This is where our children are starting to really form who they are and where they fit in the world, and exposure to a critical incident at this stage can really play havoc with that. Again, and I keep on... I'm sorry for other states and territories, using Black Saturday as an example, because it has been such an opportunity for learning... The young people in that incident became very resentful of being known as the ‘bushfire kids’ as they move to schools because their school had burnt down. They didn't want that as their key identity at that point in time.

Post-traumatic growth is something that we can facilitate in the way we talk, the way we model and the way we support our young people, and, again, giving them opportunity to be part of the recovery process is really important here. Again, we see those innies and outies responses and we see a lot of dysregulation, a lot of internalisation of the distress, and we start to see elements of recklessness here, and we see that more in the next stage... where there's this sort of seize-the-day mentality.

We've seen that life and death can be split-second things and we're going to make the best of it. Adolescent and young people, we see the peer group as being really important and, as a consequence of that, we also sometimes see a hierarchy of who was closest, who's had the greatest loss, who has the right to be most distressed, and this can be really fractious to relationships, which is really challenging as educators in learning groups, because having a strong peer relationship group is very helpful, and yet, this is also something that's really fragile at this point.

We also see, again, thinking about learning communities, real threats to executive functioning skills. We see a lot of disorganisation, a lot of short-term memory problems, concentration and attention. Working memory is adversely impacted in the acute phase and sometimes for long periods of time. We still see that anxious attachment to carers, and sometimes that's a real challenge for parents whose 16-year-old wants to be in bed with them because they're frightened to sleep. So that's some of the regressions that we see. Again, I come back to that notion or how helpful it is to be able to take action in our own recovery and moving through these challenging events.

So, a little bit around the research as a way of summing up some of the things that I've said. Down the left column, beginning with threat perception, are the things that I use to help triage when critical incident occurs, or a disaster. These are the things I want to know, you know – what was their perception of the event? We know through research that females tend to have worse outcomes. We're not sure why, there's a whole lot of theories and research in relation to that, but maybe part of that is about the ability to have some sense of self-efficacy and make decisions about our own safety in those contexts – I don't know.

We know younger children are at risk again sense of agency and what they can do, but also their life perspective is different. They haven't had a long life yet and so this big thing is very big in their short life. At my age, it's something I can see as a moment in time that I've got the potential to



move through. Wilson, in 1985, did some lovely research in this area – and, yes, it's an old study, but it's a really good study, and there's been further studies but they haven't really come up with much more than this. So, looking at degree of life threat, how quickly it happened, how prepared we were for it, what skills and abilities and tools we had to manage at that time, and what happened after it. We know that if you're away from home for children separated from family the risk is greater. Often we send children away when it's a disaster coming. Sometimes what they imagined when they're separated from family is worse than the reality of being there – of course, proximity to exposure of death and destruction and what their role has been in that disaster or incident.

These are potential impacts on mental health. All the time we're thinking that the subjective and the individual is really important and different people will have different responses at different times. I've covered all of these, except perhaps for trust, because I saw quite significant questioning in young people and parents about trust – trust in government, trust in systems, trust in the school and the learning community, trust in self and others to keep safe and to help support each other. Parents who felt guilty that they hadn't been able to keep their children as safe as they had thought and kids who had the realisation that parents can't always keep them safe.

Just down the bottom of the slide, we've got a really quick mention around developmental and complex trauma. They have some relevance to critical incidents in schools because we know that some children have had other experiences before the critical incident. They may have families that are abusive, they may have had experiences that are really complex and debilitating. They come to the event with that baggage and that disadvantage, and we know that adversity – four or more adverse experiences – can actually be very challenging. Thank you.

**Antonia Douglas:** Thank you very much, Michelle, for that comprehensive overview of critical incident theory and how these incidents of these nature can impact on young people of different ages and stages, and we are so appreciative for your expertise this morning. Michelle will be back a little bit later for our panel discussion so we can draw on her knowledge even more.

So, it is very important for learning communities to have a planned and coordinated approach if they find that they are impacted by a critical incident, and this would belong to the preparedness phase of the critical incident model shown on the screen. If a learning community is impacted by a critical incident, the school could enact this plan, with the critical incident management aiming to provide a supportive and caring response that considers the mental health and wellbeing of the whole learning community, enable continuation of normal routine for an optimal learning environment, as well as minimise any adverse effects of the critical incident on the learning community, as Michelle has already discussed. When we're talking about effective critical incident management, it is about identifying the key people the key roles and tasks required to plan for, respond to, and recover from that critical incident, and it really is about ensuring that everyone in the learning community understands their role and their responsibilities at that point in time.

Although there is a team of key people that are coordinating and initiating that critical incident response, supporting a community following a critical incident really is a team effort, with educators and school staff providing an integral role in connecting with and monitoring those children and young people. Your role and approach will vary in this state in this space dependent on the intensity of the incident, level of impact and level of distress, but the same key principles apply, which is about ensuring the mental health and well-being of the learning community.

Michelle spoke a lot about the common reactions to critical incidents and their involvement in cognitive emotional physical and behavioural responses. And while some of these are normal in the stress response or grief, others may indicate that again person has been impacted more severely and may need some additional support to avert the development or more enduring mental health concerns or issues.

So, as an educator, it is really important that we watch out for those changes in our student's behaviour. Look for those reactions that are inappropriate for the child or situation and look for patterns of distress. The BETLS tool is introduced in the 'Notice' Professional Learning module on Be You, and this is a tool that can be used by educators to record and observe observations of students that may be displaying concerning behaviours.

So, we're very lucky this morning to have Renae and Paola join us to share their knowledge on this particular topic. So, Renae and Paola, it would be wonderful to hear your reflections on what Michelle has shared this morning. Paola, would you like to start?

**Paola Mercardo:** Good morning, everyone. Thanks for joining us. And yeah, there are a couple of points that are back to reflect on what Michelle was talking about, especially from an early learning perspective. With our services, there are a few things that go back to the planning and preparedness stage, Antonia, that you mentioned, and that's making links to your localised community. So, Michelle made a really great point of saying that there's other professionals out there within our local community that we can link in too, and also for the schools to think about the families who have younger siblings and reaching out to the younger early learning services. And, of course, my favourite point would have to be the importance of that relational impact as a protective factor and making sure that our educators are really available to the younger non-verbal children within their settings.

And perhaps that's probably a really good point to consider – that those non-verbal children also are having an impact when there is a critical incident that they have experienced, and the adults themselves that are around them. These children are actually queuing from those adults. So making sure that the adults look after their own self-care during that. So there's lots of points that I could go on with but I'll let Renae share hers as well. Thanks.

**Renae Duncan:** Yeah, thanks, Paola – I agree. There's quite a lot to work there. I think it was really fantastic. I think something that stood out to me quite significantly with just the breadth of, I guess, the variety of ways in which young people might respond when they are impacted by a critical incident, and how significantly these often differed depending on the mental stage of that young person. And I think that would be a really good follow-on for educators that are listening today around thinking about the age and stage that their particular cohort of young people fall into, and looking a little bit more at the breadth of what those presentations might look like. Because some of those I think could easily go under the radar in terms of, you know, maybe thinking young people will respond a certain way but there's often quite different ways.

I thought it was interesting that Michelle was talking about the fact that some young people might really become quite introverted and close down, whereas others might, as she said, you know, become altruistic and quite outward in terms of seeking affection and friendship. So, I think it would be really important to really identify the young people that you're particularly working with, and even look further into what those expressions might be in order to look out for. And that might be a really good, and looking at the model that you had up earlier, Antonia, might be a great action to do in that preparedness phase and thinking about what you can do to prepare your school and your cohort for that.

**Antonia Douglas:** Thank you so much for sharing your thoughts and considerations, Renae and Paola – wonderful. It would be wonderful to hear a story of a school that's shown growth and learning following being impacted by a critical incident. Are there any that come to mind that you'd like to share with us this morning? Renae, can I maybe start with you?

**Renae Duncan:** Yeah, absolutely. Thanks, Antonia. I think, for me, something that, you know, I work particularly with schools once they've been impacted by a suicide death, and something that I walk away again is just the amazing way that teams pull together through those times. You know, I've sat with leadership wellbeing and school staff who sit around and think about 'What do we need to do to respond in a way that's supportive and that informs our community in a way that is going to also offer them support?' And something that really stands out to me in response is just how

cohesive teams can work together. And this is something Michelle also mentioned at the beginning around having that calm and that organisation, and that really comes when you see that cohesiveness in the team. And some of the communities that I've had the privilege of working with, that's the thing that I walk away with is just how beautifully the team will come together, work together, you know? It's not necessarily about having that hierarchy – it's really about, you know, banding together as a team, linking arms and really providing that cohesive and overall support to their school community, which is just a privilege to behold and be a part of.

**Antonia Douglas:** Paola, would you like to add it onto that?

**Paola Mercado:** Sure. I think Renae has put a really important point forward that cohesiveness within the team. One particular example that stands out for me within an early learning service is one that was recently affected by floods, and their premises could not be used and they had some building works that needed to be done. However, the care for the children that still needed to be addressed. So, the team had to get together and actually be dispersed into other local services in their local area. So, there was a lot of planning as to who went where and they were able to very inclusively discuss with their educators, which children they would be going to particular services with, and, too, so the families could obviously maintain a level of care for their younger children.

But those educators, one thing that they mentioned on their feedback when they came back together was that their leadership team were always checking in with them every week to see how they were going, because – a little bit like the point that Michelle brought up – these educators who were attending who were actually caring for these children in different settings became the educators in the children that, you know, they couldn't go to their building because they were flooded out, so they were sort of known by this critical incident that happened in their service, but they actually just wanted to be part of that care setting. So, it was really important for the team to come together and have those weekly sessions where they could talk to each other about any obstacles or any challenges that they were currently facing, but also checking in with their own mental health in caring for the for the children and the families that came with them into each particular setting. So that was that was one thing that jumped out at me.

**Michelle Roberts:** And can I jump in?

**Antonia Douglas:** Yes, of course, Michelle.

**Michelle Roberts:** I just want to pick up on that caring for the carers a little bit more. Over the time that I've been working in this area, one of the things that comes through time and time again is the importance of getting schools back up and running really quickly, getting into routine and how helpful that is for the children in the school. There's always a little caution in my mind around that because often the educators are similarly affected. And it's really important that we take some time to give those people a little bit of space and support and opportunity to process, before we expect them to be the vehicle of mental health support within the school. It's a really tough gig, I think, from a government perspective. Getting things up and running again is so vital for lots of reasons, but if we've got educators who are still battling with their own feelings, emotions, responses, they may in fact further trigger children. And so, set aside some time in your plan to sit with the educators and calm them and help them regulate and make sure that they're in the right spot before you ask more of them in terms of supporting their community.

**Antonia Douglas:** Thank you very much, Michelle. I think that the importance of educator self-care is paramount, especially in these positions, and ensuring that educators know who they can go to for that external support or external debriefing to yes support them so that then they can, in turn, support their communities. We have a little bit more time now, which I'd like to ask our panellists if they have had any questions posed that they'd like to address. It looks like we might only have one question per panellist. So, I might start with you, Paola, or if you have received any questions that you would like to address.

**Paola Mercado:** Sure. My question is around the linking to the local community and professionals. I think with early learning services, most of ours don't have access to school counsellors or school psychologist. So, in that instance, the early learning service would have to create that network within their localised community and seeing who they would be able to access in those times of need, and who would be their best point of call for in relation to that, and also strengthening their partnership with their local schools as well, because often the schools are very willing and to support the early learning services alongside, because, especially if it's a community critical incident that's occurred that's affecting the whole local community, then it's something that they can definitely be a part of and taking that whole communal approach in recovery and restoration.

**Antonia Douglas:** Thank you, Paola. Renae, did you have any questions that you would like to address quickly?

**Renae Duncan:** Thanks, Antonia. Yes, I've had a question come through around what ways can you recommend to support staff and teachers in responding to a critical incident, which is, you know, kind of following on from what we discussed a little earlier. But something that I'd really like to promote is there are ways in which you can do that within your school as well. And something that I always think is a really protective thing to do is have a staff debrief at both the beginning and end of the day. And this is really important, and the reason why is because, you know, after a day of, I guess, you know working in a school environment or an early learning service where you're really trying to, I guess, maintain that routine and stay in role, just having the opportunity to come together with your colleagues and debrief. It doesn't have to be a big formal meeting it can be as simple as saying we're going to take 10 minutes out in our staff room or in our group room just to have a cuppa and just to check in with one another.

Because sometimes after a day, where you know where you're trying your hardest to sort of make it, jumping into car and going home can be very isolating. So actually reconnecting back in before you leave and also coming back in at the end of the day and having a chance to check in with staff is really important. I think it's also a really good way for leadership staff to, I guess, be able to check in with staff a little bit more individually. And if you're in a quite a large school community what you might do is meet in learning groups or you might find different ways to meet that might be more easier to organise, but I think it's really important to do that. And that might be something you need to do for a week or a couple of weeks depending on the level of impact that's had on your staff cohort, but creating that cohesiveness, that ability to debrief is just really, really important.

**Antonia Douglas:** There's some great tips. Thank you for that, Renae. And, Michelle, I might hand over to you if you've got any questions that you'd like to address or perhaps any closing comments.

**Michelle Roberts:** Thanks. So, there was a question... I made reference to middle years as one of the stages, and I was referring to that being, like, Years 5 to 8 or 9, and we're talking about 10 to possibly 14 years of age. That was where I was conceptualising that for the person who had that question. Really interestingly, that's also the ages that research is showing disaster resilience education is most effective at. That children between 10 and 12 to 14 are in a really good learning space to be able to learn what actions to take to keep themselves and others safe in challenging situations.

So, there's a lot to understand and unpack about that age group, I think, in terms of giving them the skills for themselves and others and also what changes we potentially see in their behaviours and approaches in a critical incident or disaster. Paola, I also wanted to add what you were saying in relation... We come back to those preschool age children. I've just come back from a conference in Sydney on trauma and was able to learn a bit about a group called, let me check, Birdies House, which is a group from the University of Queensland who are doing their research and developing their resources for those infants that are often overlooked. So, it's worth just googling it and having a look at their resources as well.

**Antonia Douglas:** Wonderful. Thank you all so much. I am very mindful of the time. So, we will be wrapping up the question and answer section for this morning, but I would like to thank everyone that has posed their questions. I understand there have been quite a few that have come through and I'm sorry that we couldn't answer them all this morning, but it is something that we can look at addressing following the webinar. So this leads me to our next poll for this morning. So just taking a moment to reflect on what your next steps might be to take following participation in today's webinar. So, I'll just give you a couple of minutes to have a little bit of a think about these. If you have a few next steps that aren't on the screen you can always pop them in the question and answer box.

## Poll

**After attending this webinar, I think the next step for me is to:**

Please select one:

- Review critical incident procedures in my school/service
- Clarify my own role in the event of a critical incident
- Explore wellbeing strategies following a critical incident
- Explore Be You resources regarding critical incidents
- Contact a Be You Consultant to discuss this topic further.

**Antonia Douglas:** OK. So, overwhelmingly 'explore the Be You resources regarding critical incidents'. We'll go into a little bit more detail about that. Review critical incident procedures. And I think a really good time to do that, as we move into term four and then the beginning of next year, it's a fantastic time to review what are our processes and procedures? Are there any gaps?

Wonderful. Thank you all for answering. So, these are some of the Be You resources that we have referred to this morning that can really build on what we've covered. So, I've made reference to the BETLS tool, and the mental health continuum's just been updated and re-released, so you can find that on the website along with a range of our professional learning materials, our fact sheets our suicide prevention and response tools as well. And we've also got on there, Emerging Minds, so the Community Trauma Toolkit.

And so Be You does have designated consultants to support your early learning services and schools. We really do encourage you to reach out and contact your local consultant, and they will be able to support you in, you know, looking at those critical incident procedures and really tailoring those to your school. So, you can find your consultant details on your dashboard when you log in to your Be You account.

So, as our webinar draws to an end this morning, I would like to take this opportunity to thank Michelle, Paola and Renae for their time. Their knowledge and their expertise has definitely enriched this learning opportunity for each of us. I would like to thank everybody that's joined us this morning for your commitment to enhancing wellbeing and mental health within your school communities. We do hope you jump onto the Be You website to explore some of our resources that we've shared this morning. And while you're online you can also have a look at the next In Focus webinars that we have planned. On 23 October, we have 'Always Be You conversations and connections for mental health' and on 14 November, we have 'Supporting students diverse online safety needs'. So, some very exciting topics coming up. When you do leave this morning's webinar, you will be asked to fill in a short feedback survey as you exit, and we really do appreciate if you

would provide us with your feedback so that we can continue to improve these sessions. So, thank you once again for your time this morning –we hope that you enjoy your week.