

Taking Mental Health to School

Practice, Policy, and Possibilities



Ontario Public School Boards' Association
Board of Directors
September 2010

Workshop Overview

- Background and Context
- Taking Mental Health to School
- School-Based Mental Health and Substance Abuse (SBMHSA) Consortium
- Consultation
- Closing Comments

Open Up
Video Presentation



Mental Health in the Classroom

I feel scared..



what's
wrong
with
me...



I hate..



I feel sad..



I can't..



I don't belong..

I'm bored..

I'm worried..

help me.

School-Based Mental Health is Not New...

- Schools and communities have been dealing with these issues for decades
- Inconsistent, fragmented approaches, with pockets of excellence...
- What's new is the galvanizing of efforts to reach an integrated solution to a complex problem



Opportunity to reach many children and youth who wouldn't normally seek help



All children can benefit from building skills for coping with stress and managing relationships

Why the heightened focus on SBMHSA?

Programs can be delivered universally, minimizing stigma and maximizing the advantage of peer modeling

Educators can help to identify students that require more intensive intervention

There is a significant relationship between mental health and achievement



If we are serious about narrowing the gap, we need to understand that students with mental health issues perform less well in school, and frequently disengage over time

Taking Mental Health to School: A Policy-Oriented Paper on School- Based Mental Health in Ontario

Santor, Short, & Ferguson, 2009

http://www.onthepoint.ca/products/product_policypapers.htm



The Provincial Centre of Excellence for Child and Youth Mental Health at CHEO
Le Centre d'excellence provincial au CHEO en santé mentale des enfants et ados

Partners...

- Hospital for Sick Children
- Provincial Centre of Excellence for Child and Youth Mental Health at CHEO
- Hamilton-Wentworth District School Board (E-BEST)

SickKids



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Policy Paper Strategy...

- Policy consultation I
- Collaboration with other research teams
- Review of reviews
- Scan of the practice landscape
- Policy consultation II
- Knowledge Exchange Activities



Research in SBMHSA...

What is mental health?

“Mental health is a state of successful performance of mental function, resulting in productive activities, fulfilling relationships with other people, and the ability to adapt to change and to cope with adversity. Mental health is indispensable to personal well-being, family and interpersonal relationships, and contribution to community or society. It is easy to overlook the value of mental health until problems surface.”

WHO, 2007

Research in SBMHSA...

Why is child and youth mental health important?

- High incidence/prevalence of mental health problems in children and youth

1 in 5

- Short- & long-term seriousness of problems
- Best life outcomes result from effective early intervention



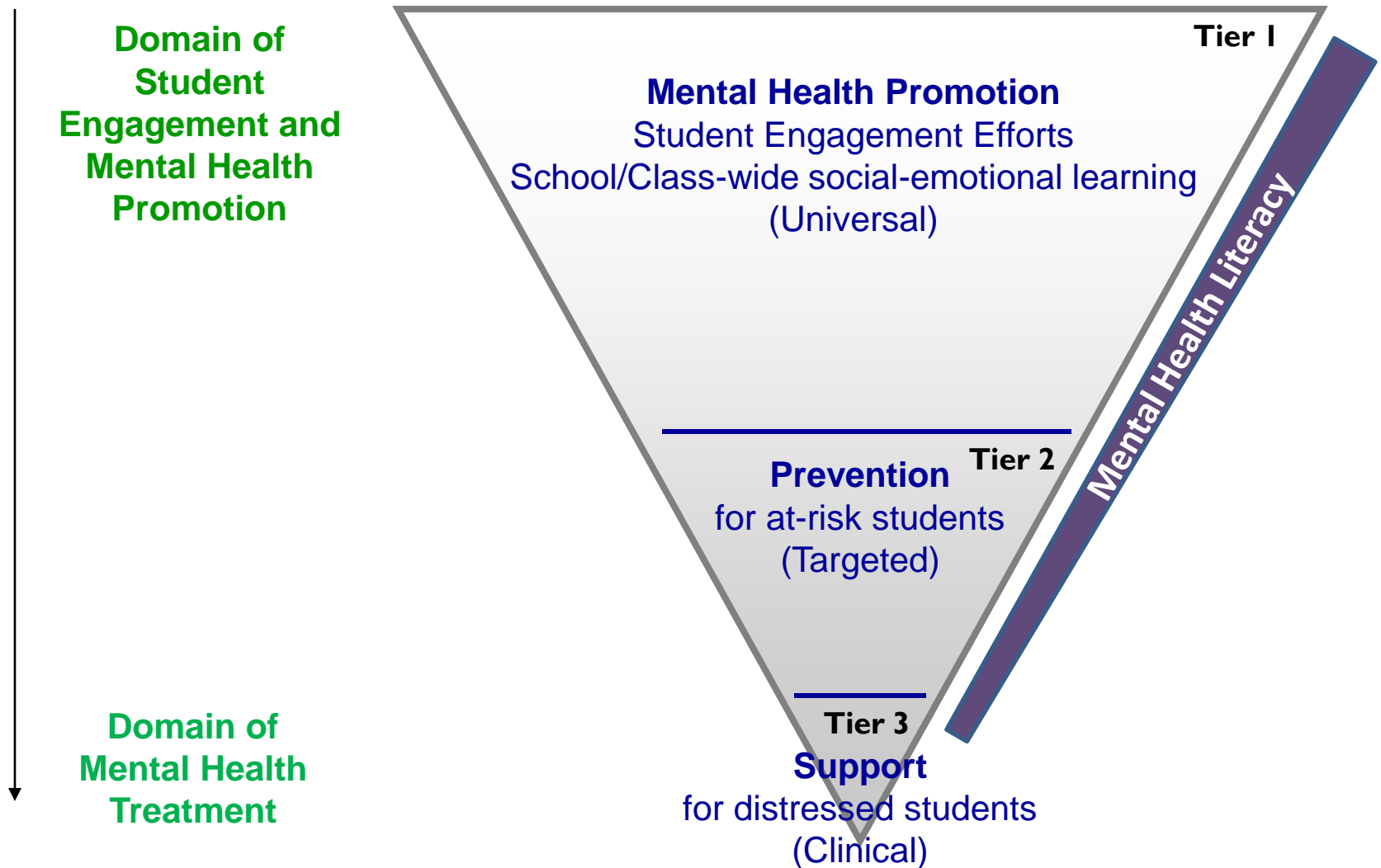
Research in SBMHSA...

Are there models for SBMHSA?

Mental Health Spectrum Model (Weisz et al, 2005)

- **Health Promotion/Positive Development Strategies** refer to strategies that target an entire population with the goal of enhancing strengths so as to reduce the risk of later problem outcomes and/or to increase prospects for positive development.
- **Universal Prevention Strategies** refer to strategies that are designed to address risk factors in entire populations of youth – for example, all students in a classroom, all in a school or all in multiple schools – without attempting to discern which students are at elevated risk.
- **Selective Prevention Strategies** refer to strategies that target groups of youth identified because they share a significant risk factor and mount interventions designed to counter that risk.
- **Indicated Prevention Strategies** refer to strategies that are aimed at youth who have significant symptoms of a disorder, but who do not currently meet diagnostic criteria for the disorder.
- **Treatment Interventions** refer to strategies that generally target those who have high symptom levels or diagnosable disorders at the current time.

Response to Mental Health at School



Use Evidence-Based Approaches

- Social Emotional Learning is not neutral
- Important to use evidence-based approaches for student mental health issues
- Many examples of programs that are unproven
- Some examples of programs that harm



- We should be evaluating local programs and strategies, especially if they are untested

What Works in Mental Health Promotion?

Mental Health Promotion programs are most likely to be effective if they:

- involve the whole school
- change school culture
- Include personal skill development
- Involve parents and the wider community
- Last for a year or more



Stewart-Brown, 2006

What Works in SBMH Prevention?

National Research Council and Institute of Medicine Report (2009), Preventing Mental, Emotional and Behavioral Disorders among Young People: Progress and Possibilities

- Social Emotional Learning programs increase academic performance (Durlak et al., 2007)
- School-based violence prevention programs can reduce aggression by 25-33% (Wilson & Lipsey, 2007)
- Life Skills Training decreases poly-drug use 3 years after the intervention (Botvin, 2000)

And many more...

Research in SBMH...

What are the major review findings?

- There are **proven effective programs** for mental health promotion and early intervention
- Studies suggest that **mental health literacy** needs to be improved for educators, students and parents
- Effective promotion/prevention will not remove the **need for accurate identification** of mental illnesses and **efficient pathways** to effective treatment
- Selecting appropriate programs and **implementing with fidelity** are critical for success
- **Web-based technologies** offer some interesting possibilities for future programs



Scanning the Practice Landscape in School-Based Mental Health

Short, Ferguson, & Santor, 2009

http://www.onthepoint.ca/products/product_policypapers.htm



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International Principals' Survey, 2008

- International Survey of Principals Concerning Emotional and Mental Health and Well-Being
- Intercamhs and International Confederation of Principals
- Focus:
 - Mental health and student achievement
 - Major issues facing students and staff
 - PD, resource and policy needs



Main Findings

- Internationally, 90% principals think that mental health is “very important” for academic achievement
- Greatest areas of concern: bullying, impulse control, anger management
- Many see a need to increase and strengthen policy related to SBMH
- Principals are seeking resources and staff training in:



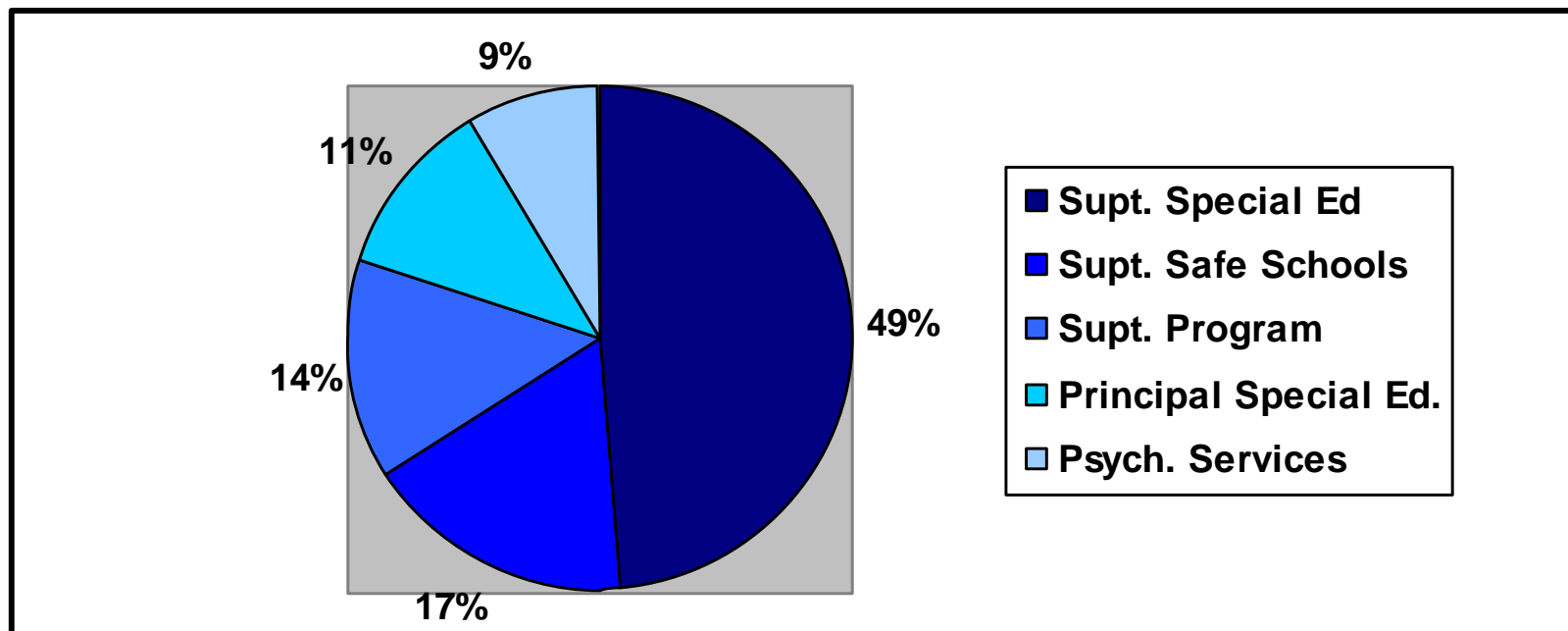
- mental health promotion
- prevention strategies
- support for students in distress

Scan Methodology...



- All Ontario boards invited to participate
- 27 volunteer boards
- All EDU regions represented; English and French, Public and Catholic
- Key informant interviews
- International Principals' Survey
- Programs and strategies, enablers and barriers, needs and recommendations

Responsibility for SBMH...

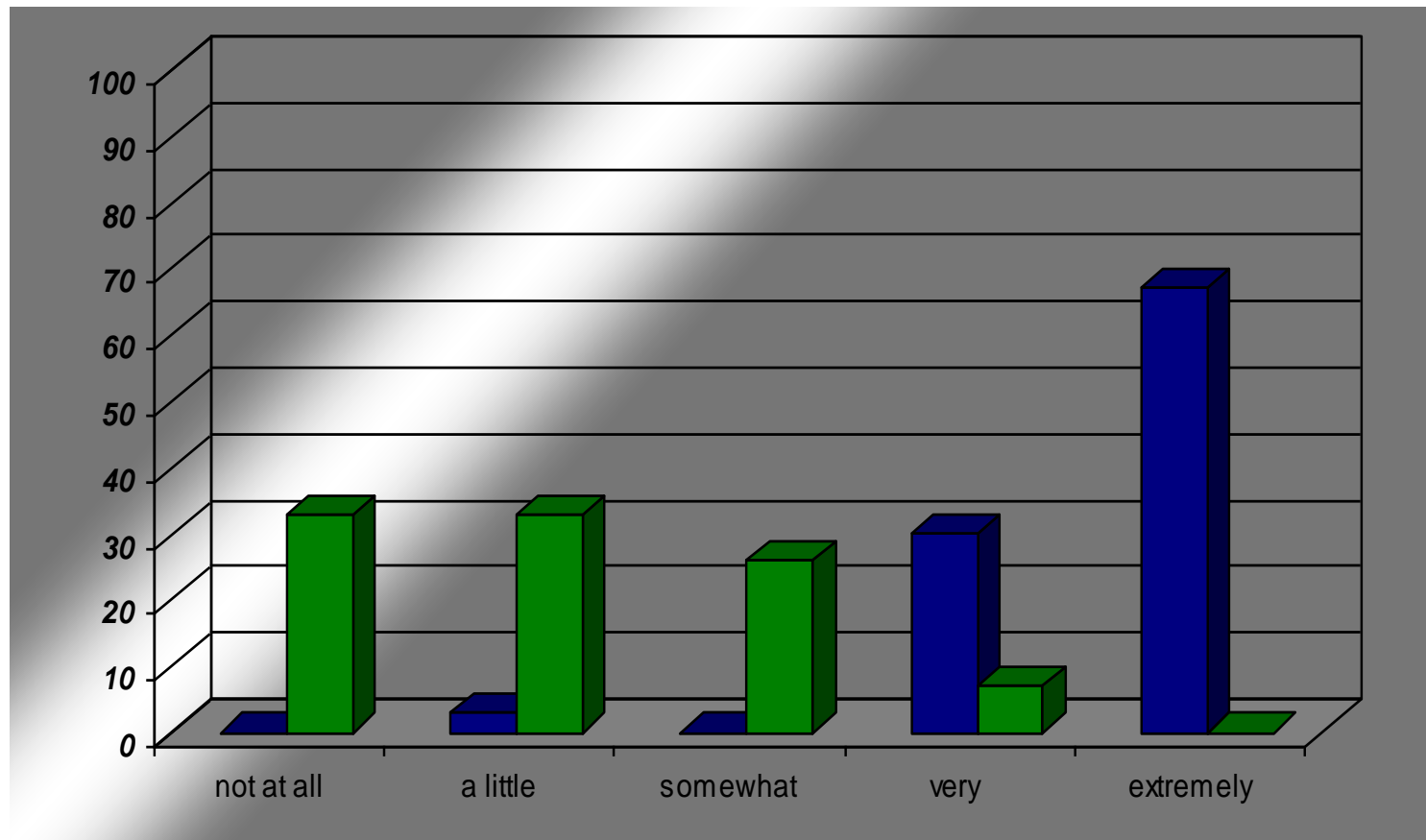


There is no one consistent leadership structure for school-based mental health in Ontario

The Role of School Board Trustees

- 62% of respondents indicated that Trustees were actively involved in supporting SBMH
 - Special Education Advisory Committee
 - Funding allocation for school mental health services and resources
 - Advocacy for enhanced protocols for communication with community partners, and more funding for child and youth mental health organizations
- All respondents suggested that Trustees were interested in this issue and wanted to help

Concern about Mental Health...

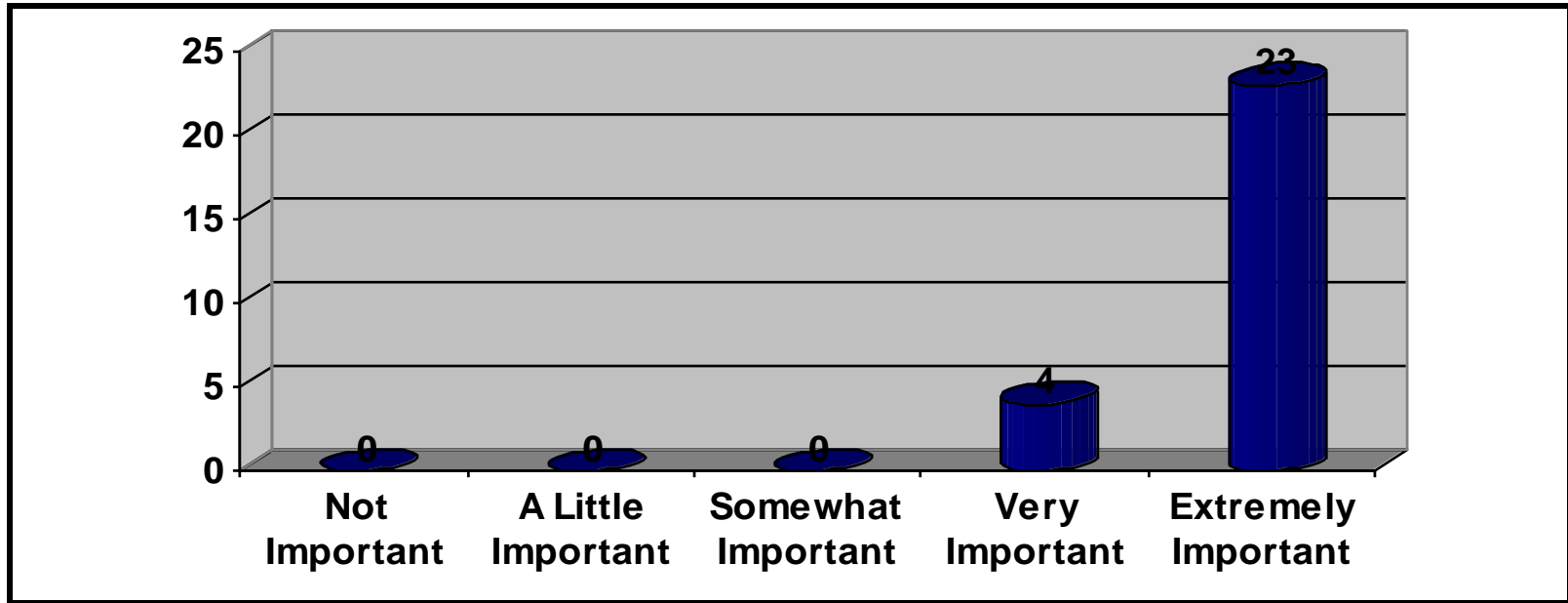


Educator Preparedness...

Priority Concerns ...

	Number of times listed first	Number of times in top three
Anxiety and mood problems (features like sense of helplessness, low self-esteem, suicide)	10	32
Conduct problems / oppositional behavior / violent outbursts	8	19
Substance Use	7	13
Sense that needs are escalating and services are insufficient	1	4
Students with complex psychiatric needs	0	3

Perceived Link to Achievement...



Voices...

We are concerned about Student Mental Health...

Mental health issues consume our daily work, from policy to staffing to coordination to liaison – it is our number one concern.

“Extremely concerned” doesn’t begin to describe it...there is no scale that is even high enough.



We are not prepared to respond to Student Mental Health problems...

Educators can point out mental health problems, but they are crying out for some kind of support in dealing with it in their classrooms.

It scares them – they don’t know what to do. We don’t teach mental health 101 – we don’t give educators the tools they need.

This is part of our job as educators...

Student mental health and academic achievement go hand in hand

When kids aren’t “in the room” because they are troubled, they are not ready for the curriculum – we are talking about 1 in 5 kids – so many are impacted

The Current Practice Landscape...



- **Mental Health Literacy**
 - Mostly at the stage of awareness-building in schools and districts
- **Universal Mental Health Promotion**
 - 70% of districts described some sort of universal MH promotion
- **Intervening with Students at Risk**
 - 63% provided an example of how they support students at risk
- **Serving students with identified MH problems**
 - Insufficient resources in this area - need to work closely with community partners to serve these students
- **Innovations in MH Service Delivery**
 - Some leaders to watch - attention to infrastructure, interconnected systems, alignment/ leveraging, bridging research and practice

Effective Implementation...



Enablers

1. Collaboration with community partners
2. Leadership & planning
3. Funding
4. Alignment
5. PD
6. Program evaluation
7. District infrastructure and services

Barriers

1. Lack of mental health services (or inequities)
2. Collaboration is difficult!
3. Human resources issues
4. Lack of coordination
5. Lack of MH literacy
6. Lack of funding
7. Stigma

Scan Conclusions...

There are indeed gaps between research, policy, and practice in SBMH...

- Ontario school districts are extremely concerned about student mental health, and feel ill-prepared to deal with the magnitude of the problem.
- To varying degrees, boards are working to implement programs, along the service continuum, often in collaboration with community.
- There is little capacity in boards to select, implement, and evaluate evidence-based school-based mental health programs.
- **But it is not systematic, and it is not enough.**



Policy Implications...



There is a need for:

1. Enhanced coordination and leadership across Ministries
2. Dedicated funding for training, infrastructure development, community collaboration, program implementation, and evaluation
3. Consideration of, and support towards, critical implementation issues
4. Enhanced Professional Development for educators regarding mental health
5. Development, testing, promotion, and support of evidence-based practices for mental health promotion in schools

Policy Consultation II...

- Follow up meetings with individual Ministries
- The authors will speak everywhere we can in policy meetings and in individual consultations about the paper/scan and implications for policy-makers



Recommendations...

Policy

Establish an inter-Ministerial leadership body that can:

- Make the mental health of children and youth a priority and develop a consensus for wide adoption of a strategy of prevention and early intervention in the school context
- Lead and coordinate a provincial strategy based on the evidence and current practice innovations
- Facilitate and sustain partnerships and deepen existing integration initiatives
- Provide resources to the field for collaborative program development and evaluation
- Develop mental health curricula and training for students, parents and educators

Practice

Coordinated prevention and intervention with mental health and substance abuse problems/disorders is a priority.

- Boards and schools must develop strategies including leadership and management plans for addressing mental health / substance use problems.
- Strategies must include plans for increasing mental health literacy of teachers, staff and students, for specific training of staff and for increasing system capacity to deal with mental health and substance abuse problems.
- Strategies must recognize that programs promoting positive self development enhance mental health, prevent disorders, improve academic performance and are effective starting in the elementary grades.

Recommendations...

Policy

- Professional development and guidance for selection of evidence-based programs in the context of local needs and resources and the training/resources necessary for local agencies to monitor outcomes
- Enable broad implementation of programs guided by current evidence in knowledge translation and implementation science. There are rich opportunities for researchers to collaborate with school boards and community agencies to add to our knowledge regarding how to implement and sustain effective school-based programs.

Practice

- Communities and boards must work together to create the resources and processes to:
 - Select appropriate programs given the local problems, infrastructure and resources.
 - Develop the skills and collaborative capacity to monitor program fidelity and continuously evaluate program outcomes.
 - Establish collaborative research relationships to enable continuing program development, evaluation and refinement.

Recommendations...

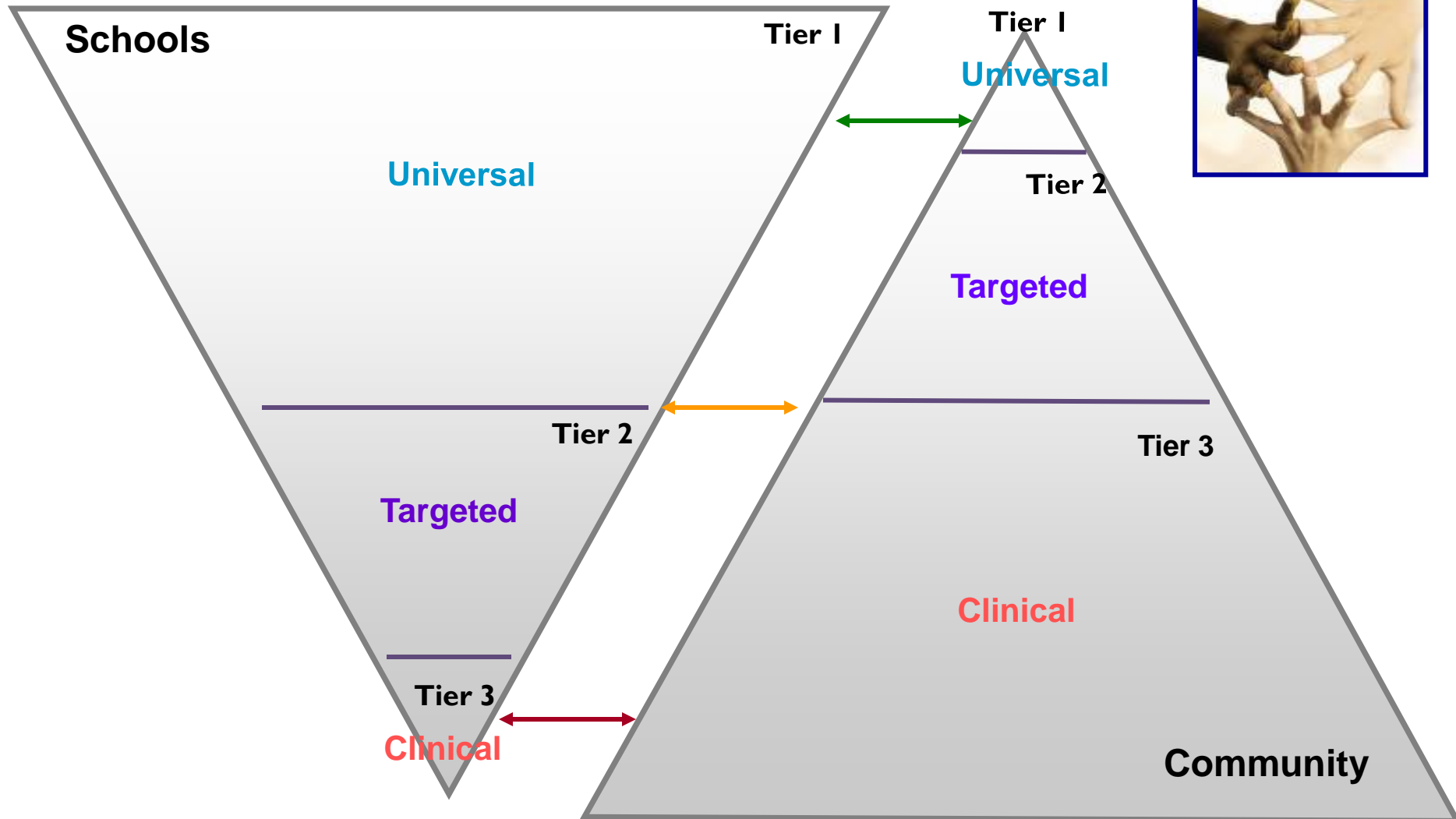
Policy

- Establish a provincial research presence that would have a positive impact on building the organizational cultures which enables programs to be rolled out, optimized and sustained.
- Ontario school boards and community agencies have established some outstanding examples of specific programs. These existing initiatives provide fertile ground for research partnerships to examine program effectiveness as well as implementation science.

Practice

- Build infrastructure to support research-based knowledge exchange. These Intermediaries / platforms:
 - Enhance access to evidence-based information, and provide input into program selection.
 - Build organizational readiness for SBMH (coordination, protocols, partnerships)
 - Assist with training, coaching, fidelity monitoring to ensure implementation standards.
 - Create forums for scientist-practitioner dialogue and collaboration
 - Conduct local evaluations to contribute to the evidence-base.

We need to work together!





INTRODUCING THE SCHOOL-BASED MENTAL HEALTH AND SUBSTANCE ABUSE CONSORTIUM...



Consortium Membership

Provincial Centre of Excellence for Child and Youth Mental Health at CHEO

- B.C. Mental Health and Addictions Services
- Bluewater District School Board
- Canadian Association of School Administrators
- Canadian Association for School Health
- Canadian Teachers' Federation
- Centre for Addictions Research of B.C.
- Council of Ontario Directors of Education
- Dalhousie University
- ESRG Directions
- Hamilton-Wentworth DSB
- Hospital for Sick Children
- IWK Health Centre
- McMaster University/Offord Centre
- University of Calgary
- York University



Consortium Mandate

Overall Objective

Through a synthesis of the national and international literature, an environment scan of Canadian programs and services, and a national survey of school districts, the Consortium will develop a broad framework and practice recommendations related to School-Based Mental Health and Substance Abuse in Canada.

Consortium Teams



- **Review and Synthesis Team**
 - Co-Leads – Canadian Council on Learning, Hospital for Sick Children <Contact: Dr. Charles Ungerleider>
- **Environmental Scan Team**
 - Co-Leads – Provincial CoE, Hospital for Sick Children, Fraser Mustard/University of Calgary <Contact: Dr. Ian Manion>
- **National Survey Team**
 - Co-Leads - Canadian Council on Learning, Hospital for Sick Children <Contact: Dr. Charles Ungerleider>
- **Knowledge Translation and Exchange Team**
 - Co-Leads – E-BEST, Hospital for Sick Children, Canadian Association for School Health <Contact: Dr. Kathy Short>

Team Progress

- **International Literature Review**
 - Narrowed to 94 major papers, currently coding each for the quality and strength of evidence
 - Report anticipated Spring 2011
- **Survey of SBMHSA practices in Canadian Schools**
 - Survey currently being finalized; two versions
 - Look for this in January 2011
- **Canadian Scan of SBMHSA Programs**
 - Currently accepting nominations...

Scan Tool Identifier Link

- Developed to identify and nominate SBMHSA programs across Canada for our scanning purposes
 - Sent to 40 member consortium
 - Monitored by the Provincial Centre of Excellence
 - Database developed to manage the information gathered
 - Opportunity for others to nominate programs
- http://sbmhsa.smartsimple.biz/Forms/fm_forms.jsp?token=HwoOSxkGYFxaRxJaUse

You may know of programs and models that should be included in the Scan!!



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School-Based Mental Health and Substance Abuse (SBMHSA)



The School-Based Mental Health and Substance Abuse (SBMHSA) Consortium represents a cross-disciplinary, cross-sectoral and geographically diverse set of leaders in research, policy and practice across Canada. Collectively the Consortium understands the importance of a cohesive and integrated school-based and school linked approach to wellness promotion, prevention, early identification/intervention and treatment for mental health and addictions difficulties in children and youth.

Please read below and indicate if you are aware of any promising SBMHSA programs / models / initiatives that you would like us to consider in our SBMHSA national environmental scan.

Your Name

Your Organization

1. Please identify a Canadian SBMHSA program / model / initiative that you are familiar with and that should be included in our national scan. (e.g. Friends for Life, WRAP Teams)

2. Briefly describe the program / model / initiative (no more than 30-50 words)

3. Are you aware of where this program / model / initiative is being offered? (e.g. school board, community)

Yes No

If Yes, where is this program / model / initiative being offered?

Province

City

Organization

4. Please provide us with the contact person responsible for this program / model / initiative.

Contact Name

Contact Email

Contact Phone

Contact Position

Program Administrator

Coordinator

Other:

Are you a SBMHSA Consortium Member?

Yes No

Are you willing to have the Consortium contact you to share information from your program / model / initiative?

Yes No

If yes, please provide your email and phone number:

Email address

Phone number

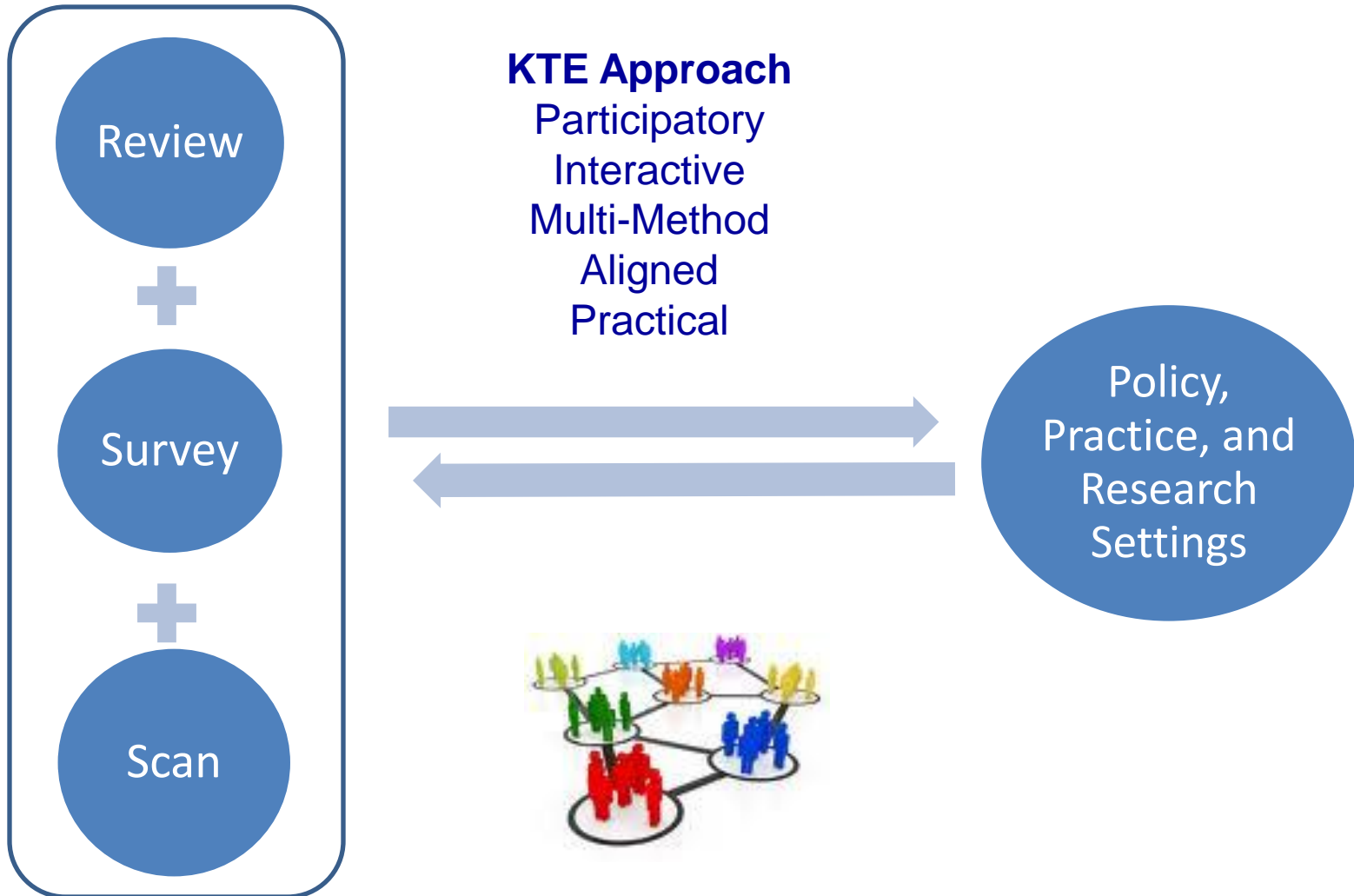
Submit

Knowledge Transfer & Exchange

- To create a meta-plan for the translation and exchange of all findings from the SBMHSA review, scan, and survey, in accessible practice / policy ready formats, for key audiences.
- This meta-plan will include sample products and processes that have been validated with select knowledge users in research, policy, and practice spheres.



Knowledge Translation & Exchange



Knowledge Translation & Exchange

KTE Team Priority Audiences

- Provincial (and National) Mobilizers
 - Policy Officials
 - Professional/Stakeholder Organizations
 - Organizations with Mental Health Promotion Mandates
- Regional / Local Mental Health Tables
 - Where they exist...
 - Seeking to understand how SBMHSA decisions are made locally, what knowledge is needed, key intermediaries, etc.



Knowledge Translation & Exchange

KTE Team Activities

- KTE Review
- Early Engagement (awareness, alignment, action)
- Product / Process Development and Validation
- Knowledge Sharing
- KTE Evaluation

Inviting Continuous Feedback...

MHCC Project Committee
Consortium Colleagues
Early Engagement Audiences
KTE Advisory Team
Validation Networks

Working together, we will contribute to the creation of caring and supportive environments that maximize learning and well-being and strengthen young people, families, schools, and communities...



Help us to understand and respond to
your knowledge needs...

What specific knowledge do you need re: SBMHSA?

What knowledge do you need in order to promote
SBMHSA within your role/setting?

How would you want to receive information about
SBMHSA?



Mobilizing Knowledge

What might be the role of OPSBA in mobilizing knowledge about SBMHSA in Ontario?



Useful Resources...

- School-Based Mental Health: An Empirical Guide for Decision-Makers (2006) by Kutash, Duchnowski and Lynn
<http://rtckids.fmhi.usf.edu/publications.cfm>
- The Positive Impact of Social and Emotional Learning for Kindergarten to Eighth-Grade Students: findings from three scientific reviews (2008) by Payton, Weissberg et al.
<http://www.casel.org/downloads/PackardTR.pdf>
- State Implementation of Scaling-up Evidence-based Practices (SISEP) - establishing adequate capacity to carry out effective implementation, organizational change, and systems transformation strategies
<http://www.fpg.unc.edu/~sisep/about-us.cfm>
- National Implementation Research Network – closing the gap between research and practice
<http://www.fpg.unc.edu/~nirn/>

More Ideas, Suggestions, Possibilities?

Contact Us:

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