

Everyday Mental Health @ School



Integrating evidence-based common elements and classroom wisdom to encourage uptake of everyday mental health practices at school

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Overview

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 - Elementary Teachers Federation of Ontario
 - Centre for Addiction and Mental Health
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 - Evidence-based practice, to scale, to sustain
- Process
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Partners

ETFO, SMH ASSIST, CAMH



School Mental Health ASSIST



➔ A provincial implementation support team designed to help Ontario school districts to promote student mental health and well-being

➔ Provides **Leadership**, **Implementation**, **Coaching**, **Resources**, and a **Community of Practice**

Elementary Teachers' Federation of Ontario

- Elementary Teachers' Federation of Ontario (ETFO) is the union that represents 78,000 elementary teachers and education workers in the publicly funded school system.
- ETFO has a strong commitment to Equity and Social Justice
- Provide Professional Development opportunities for our members



Provincial System Support Program

- Centre for Addiction and Mental Health
- Provincial System Support Program
 - Connect people and evidence
 - Help communities put solutions in place
 - Engage diverse voices, perspectives, and populations
 - Build evaluation capacity





Rationale



The Promise of School Mental Health

- Most mental health problems are treatable, but a relatively small proportion of children and youth seek/receive treatment in community and hospital settings
- Early identification and intervention improves prognosis



Schools are an optimal setting in which to:

- Promote positive mental health
- Build student social-emotional learning skills
- Reduce stigma and encourage help-seeking
- Identify students in need
- Prevent mental health problems in high risk groups
- Build pathways to, from, and through services



What Works?

Meta-Synthesis of Reviews

MH Promotion		Prevention	Intervention/Ongoing Care
School-wide and class-wide Social Emotional Learning is associated with enhanced prosocial ability and academic achievement	Internalizing	Cognitive-Behavior Therapy / Behavior Therapy that is skill-based and builds protective factors can reduce symptoms	CBT/BT focused on core elements like social problem solving, cognitive restructuring, relaxation
	Externalizing	Cognitive-Behavior Therapy / Behavior Therapy that builds conflict resolution and anger management skills can reduce symptoms	CBT/BT focused on core elements like identifying cues for aggression, resisting automatic aggressive impulses, alternative behaviors
	Substance Use	Mixed results – best strategies are interactive and build refusal and life skills	Insufficient evidence

What Works \$

Return on investment
 economic modeling
 provides a very strong case
 for mental health
 promotion in schools,
 especially social-emotional
 learning

Social Emotional Learning Skills:



Promoting Mental Well-Being:	ROI (UK): For every £ invested:
In the Early Years... <ul style="list-style-type: none"> Health visitor interventions to reduce post partum depression Parenting education and support 	.80 £ Return 8.0 £ Return
In the School Years <ul style="list-style-type: none"> Social emotional learning to reduce conduct disorder School interventions to reduce bullying 	83.7 £ Return 14.4 £ Return
In the Middle Years <ul style="list-style-type: none"> Suicide training courses for GPs Early Intervention in Psychosis Workplace mental health promotion 	44.0 £ Return 18.0 £ Return 10.0 £ Return
In the Senior Years <ul style="list-style-type: none"> Befriending for older adults 	.44 £ Return

Is this what we are doing in schools in Canada?

Scan of Nominated Best Practices and National School Board Survey

Report of 150 nominated programs and strategies, from every province

Across the mental health continuum (promotion, prevention, intervention)

Many examples of good practices in Canada

But there was an uneven and fragmented front (development and adaptation driven by need, resulting in islands of innovation)

Inconsistent alignment with evidence, inconsistent use of local evaluation



There is a Knowing/Doing Gap in School Mental Health

World of Evidence

- **What we KNOW**
- Conditions, Capacity, and Evidence-Based Programming across the Tiers of Intervention, within a comprehensive and coordinated system of care

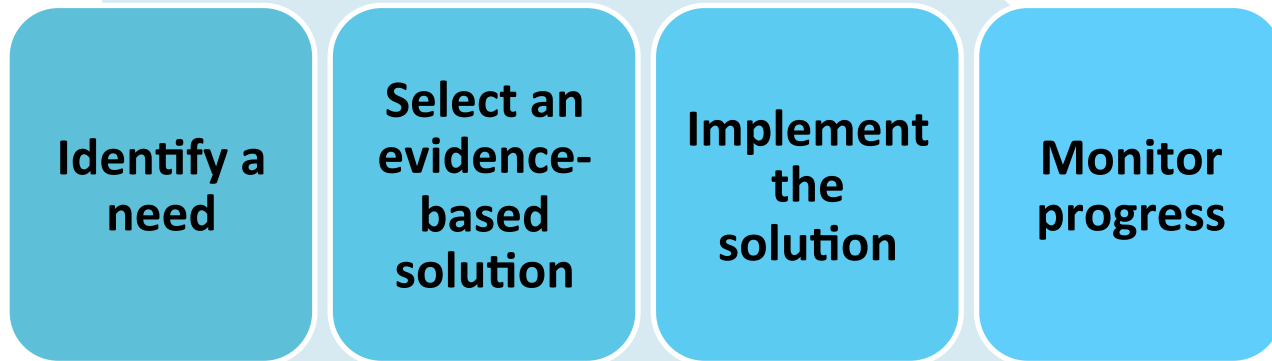


World of Practice

- **What we DO (usually)**
- Fragmented and uneven uptake of programs that are inconsistently aligned with evidence and without attention to elements of sustainability, like conditions and capacity building

Evidence-Based Practice in real life is complex

Ideally...



What gets in the way of adopting, and benefiting from, evidence-based programming?

Need/Priority Realities

- Classrooms contain students with a range of mental health needs
- Students rarely present with simple mental health difficulties (comorbidities, complex lives)
- Educators are not typically trained in recognizing and assessing needs in this area (and should not be diagnosing problems that they observe!)



- It can be difficult to determine where to focus efforts

Selection Realities

- Many books, speakers, resources, campaigns etc. related to mental health and well-being
 - Some are helpful
 - Some are benign (but costly)
 - **Some are harmful**
 - Many are untested, poorly tested, or awaiting results

- Evidence-based resources can be:
 - difficult to access
 - costly
 - time-consuming
 - difficult to choose from!



Implementation Realities

Classroom Reality

- High academic / curriculum expectations
- Many competing demands on educators
- Range of mental health needs in the classroom
- Sense of feeling ill-equipped to recognize and address social-emotional difficulties
- Stress and challenges to educator well-being
- Evidence-based programs can be difficult to implement with fidelity
- Lack of resources



Monitoring Realities

- Inconsistent access to evaluation / CQI expertise in schools
- Inconsistent access to monitoring tools
- Risk of bias
- Lack of planned abandonment – layering of program influence
- Challenges to school-based research protocols



Scale and Sustainability Realities

- Population roughly 13.7 million (of Canada's 35.5 million)
- 72 school districts
 - 31 English Public (secular, open to all)
 - 29 English Catholic
 - 4 French Public
 - 8 French Catholic
- Approximately 5000 schools
- Approximately 2 million students
- Approximately 117,000 teachers
- Approximately 7400 principals/vice principals



Ontario's school system acknowledges and celebrates its diversity. Our students come from multi-faith, multi-language, multi-economic, multi-racial backgrounds. They identify as LGBTQ, immigrant/refugee/ethnocultural, Indigenous, and have a variety of learning needs.



These Practice Realities are Common

Longitudinal Studies of Comprehensive School Reform show:

Evidence Based Practice	Actual Supports, Years 1-3	Outcomes, Years 4-5
Every teacher trained	Fewer than 50% of teachers received training	Fewer than 10% of schools used the practice as intended
Every teacher continually supported	Fewer than 25% of these teachers received ongoing support	Vast majority of students did not benefit

Aladjem & Borman, 2006; Vernez, Karam, Mariano, & DeMartini, 2006

So, before investing, we ask...

- Does this program align with our board/school mental health strategy?
- Can this universal program be scaled up to reach every student who would benefit from it?
- Can the program be implemented with fidelity at the school/class level?
- Can we offer high-quality training and on-going support?
- Can we sustain the costs over time?



If yes, go for it!

If no, consider other options



Another
Option!

Everyday Mental Health Project

Promoting social emotional learning in Ontario's JK-8 classrooms, *everyday*



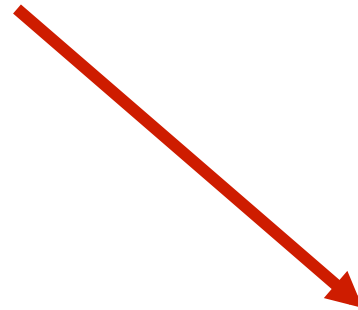
Evidence-Based, Implementation-Sensitive Programming

- ☑ Evidence-Based
- ☑ Implementation-Sensitive
 - Attentive to realities of school context
 - Viewed as consistent with existing practice
 - Low cost to introduce, low cost to sustain
 - Easy to learn, easy to implement, easy to maintain fidelity
 - Supported by colleagues, supported by school administrators
 - Can become part of the daily fabric of schools
- SMH ASSIST Learning Lab:
 - **Everyday Mental Health Project**
 - Let's Talk Help-Seeking middle school resource
 - Secondary SEL curriculum resource
 - BRISC (*Brief Intervention for School Clinicians*)



Project Goal

- To co-create a resource that educators can use to promote student mental health in the classroom as part of everyday practice



This resource will be:

- **Built by and for Ontario educators**
- **Voluntary to use**
- **Aligned with the evidence-base**
- **“Evergreen”**
- **Free to Ontario educators**

Our Path is Relatively Uncharted

- But we have some beacons:
 - PracticeWise
 - Towards Flourishing Manitoba
 - WellAhead B.C.



clinical protocols and summaries representing the most common components of evidence-based practices.



Towards Flourishing - Manitoba

Manitoba model for public health home visiting

- Daily “kernels” of evidence-based practice
- Results suggest enhanced positive feelings, sense of independence, and skills for relaxation amongst parents as well as positive reports by Public Health nurses in terms of use of most of the everyday strategies

Mariette Chartier, R.N. Ph.D.
Principal Investigator, the Towards Flourishing Project
Manitoba Centre for Health Policy

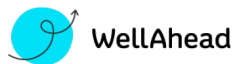
Towards Flourishing Everyday Strategies

- Physical Activity
- Nasal Breathing
- Progressive Muscle Relaxation
- Three Minute Breathing Break
- Three Good Things
- Self Monitoring
- Belonging
- Creating a Vision
- Social Connections

- ❖ Simple activities to promote mental health
- ❖ Scientifically proven
- ❖ Easy to use
- ❖ Low cost
- ❖ Spread by word of mouth



Well Ahead - BC



Ideas Selected for Prototyping



2x10*: The 2x10 strategy is simple: spend 2 minutes per day for 10 days talking with a student about anything she or he wants to talk about. The strategy builds a rapport and relationship between teacher and student, and lets the student see that the teacher genuinely cares about him or her as a person. This practice turns that abstract, where-do-I-start concept of relationship building into something easily manageable. For teachers who feel overwhelmed by their students' needs, this is a great way to start.



'Be' in Nature*: Classes of students will be scheduled to 'Be in Nature' during instructional time to increase opportunities and time to be and to learn outdoors. Through this practice, students can have regular opportunities to go outdoors to explore, to learn and to connect with nature.



Circle*: This practice involves gathering students in a circle once a day to share and practice their social skills in a predictable, safe space. The teacher will facilitate the circle and establish its cultural protocols, rules and guidelines (e.g. positive body language, right to pass, non-judgmental language).



Personalized Greeting/Everyday Greeting*: Every day, students are greeted at the door by name and engaged with eye contact by caring school staff, adults from the community, or students. Everyday everyone greets each other by name wherever they are (hallways, outside, office, staffroom etc.).



Take a Pause*: Every day students and school staff will take at least two 'pauses'. Teachers will find two times during the school day to stop students and guide them through a process where they pause and take four deep breaths, tuning into their bodies and observing the physical and mental sensations that come (sensations, emotions, thoughts etc.) Teachers will choose the times during the class day when a pause will encourage them to refocus and calm their minds and bodies.



Transition Time**: In a 5-minute session after transitioning to school in the morning, and another before they transition back home, students are guided through a personal reflection exercise. The reflection could focus on a highlight or memorable moment from the morning, or could focus on personal challenges and strategies to respond using humour, reflection, drawing, and writing.

* These practices are being prototyped and descriptions will be updated.

** This practice is currently being significantly shaped & reconsidered by Prototyping Team and may not continue to be prototyped in its current form.

www.wellahead.ca

➔ The J.W. McConnell Family Foundation

➔ Social innovation lab

➔ Prototyping everyday strategies in British Columbia schools



Common Components Analysis

- Review of 19 evidence-based class-wide SEL programs
- Inclusion criteria (target kindergarten to grade 8 students, universal, evidence-based manualized programs) – *led to exclusion of 4 programs*
- Conducted a deductive content analysis on 15 programs; an element was deemed “common” if it appeared in 4 or more programs
- Initial set of 14 common elements was identified. Further distilled into a list of 6 common categories in consultation with subject matter experts.

camhPSSP
Provincial System
Support Program



Common Elements Categories

- **Identifying and Managing Emotions** (recognizing emotions in self and others, body cues, relationship between emotions, thoughts and behavior)
- **Relationship Skills** (listening, cooperation, friendship, empathy, conflict resolution, being respectful to others, recognizing emotions in others)
- **Positive Motivation** (growth mindset, optimism, positive attitude, grit)
- **Stress Management** (problem solving skills, relaxation, secret calming, mindfulness, cognitive restructuring, support seeking)
- **Self-Confidence and Identity** (mattering, assertive communication, knowing oneself)
- **Learning Skills and Executive Functioning** (goal-setting, problem solving skills, time management, study skills, perseverance, decision-making, organization skills)

Creating Everyday Practices

What is an Everyday Mental Health Practice?

A strategy, routine, or activity that an educator can embed into the regular flow of the school day, that supports student mental health and resiliency. It should be:

- ✓ Brief
- ✓ Easy for educators to learn and apply
- ✓ No or low cost
- ✓ Safe and inclusive for all students
- ✓ Evidence-based



This may include activities related to:

- providing a welcoming environment,
- including and engaging students in learning and school life,
- deepening understanding about mental health,
- promoting resiliency skills, attitudes, knowledge and habits
- partnering with families, the board, and the community

Consider using everyday mental health practices when you welcome students to class, during transitions, at circle time, and at the end of the day



Everyday Mental Health Practices support one or more of the following **social-emotional learning skills**:

- Identifying and managing emotions
- managing stress
- building and maintaining relationships
- keeping an optimistic outlook / growth mindset
- executive functioning skills (goal-setting, organization, decision-making, learning skills)
- expressing identity and self-confidence

Evidence to Practice

➔ What specific techniques or strategies occur across multiple evidence-based practices on a specific topic? How could this translate into an everyday practice?

CAMH Evidence Review

Category

Core Element

Practice Example

Educator Consultation

Managing Stress

Deep Breathing

**Belly Breathing
Hot Chocolate Breathing
Breathing Kindness**



Process: Co-Design, Co-Creation



Collaboration

- 2016: SMH ASSIST approached ETFO to partner on a resource to assist our members
- Our team included SMH ASSIST, ETFO, our members, school board Mental Health Leaders
- Creating the conditions to develop a working relationship of professional collaboration and support to assist educators to develop a “*Everyday Mental Health Practices*” resource.



Process

- Recruitment: ETFO put out a call to its members: 10 initial participants were selected.
- Work: Educators and MH professionals created a series of everyday practices that related to the “active ingredients”
- Practice: 10 + 40 recruits tried and evaluated each activity
- Feedback: Evaluation forms and focus groups were conducted
- Revision: Feedback was incorporated to reflect the daily reality of teachers + evidence was tied to each activity retained

Project Phases

1. Initial Focus Group Consultation (November 2016)

- Identify educator preferences for resource content and format, and gather initial classroom ideas for promoting everyday mental health

2. Initial Resource Review (January 2017)

- Gather impressions and suggestions related to draft resource materials from educators and mental health leaders

3. Field Testing of Resources (February –April 2017)

- Educators try out 6-10 activities from the resource

4. Feedback Session (May 2017)

- All participants complete an on-line survey; focus group participants join a web meeting to discuss experiences with the resource

5. Revisions to the resource (Summer 2017)

- Feedback is used to revise the resource, prepare for dissemination

Everyday Mental Health Suggestion Template



Everyday Mental Health Suggestion Template

Everyday Mental Health Strategies are:

- ✓ Brief
- ✓ Easy to implement as part of daily classroom routines
- ✓ Safe and inclusive for all students
- ✓ Designed to support social emotional skill development related to: managing stress, problem-solving, self-regulation, building relationship/collaboration skills, and/or showing respect and kindness.

Title	
Brief Description / Instructions	
Social Emotional Goal	<input type="checkbox"/> managing stress <input type="checkbox"/> problem-solving <input type="checkbox"/> self-regulation <input type="checkbox"/> building relationship/collaboration skills <input type="checkbox"/> showing respect and kindness <input type="checkbox"/> other:
Grade (circle most appropriate grades for this activity)	JK SK 1 2 3 4 5 6 7 8
Time Required	
Materials	
AIMing for:	<input type="checkbox"/> welcome (social and physical environments) <input type="checkbox"/> include (student engagement) <input type="checkbox"/> promote (curriculum, teaching and learning related to social emotional skills) <input type="checkbox"/> understand (well-being literacy and knowing your students) <input type="checkbox"/> partner (home, school, community partnership)
Contact Information	

Educator Consultations

➤ >70 Practices!

➤ Some overlapping, some needed more information

Emerging Criteria:

Aligned with evidence

One core idea

Student focused

Not a program

Simple to explain

Brief to apply

Low cost

Will not cause harm

Desirable, impactful, feasible, sustainable



Initial Database of 60 Everyday Practice Examples

Idea	AIM Focus	Skill	Brief Description	Division



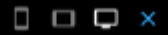
Outcome:
Everyday Mental Health Toolkit





Everyday Mental Health Practices

Each day in Ontario schools educators work to support the learning and well-being of our students. This resource is designed to enhance the work already being done in schools and aid educators in embedding well-being strategies into the everyday culture of their classroom in an intentional and sustainable way. These activities are designed to promote calm and increase engagement in learning. Each activity provides an outline, links to learning skills, and



In order to house the activities and ensure that we are able to control the access to the resource (and to evaluate the use of the practices), we first created a mock-up website. It has been reviewed by teachers and adapted according to their feedback. An official version is in development.



Example

Coping & Stress Management



SCHOOL MENTAL HEALTH-ASSIST
ÉQUIPE D'APPUI POUR LA SANTÉ
MENTALE DANS LES ÉCOLES

Ask 3, Then Me

Purpose	To help students understand the importance of asking questions and asking for help.
Division	ALL
Time Required	5-10 minutes
Materials	N/A
Instructions	<p>Preamble: Talk with the students about the importance of asking questions and for help. Discuss how all questions are good and how asking a question may help others who might also be wondering the same thing.</p> <p>Practice: Instruct your students to ask three classmates their question before coming to ask you for help. It is best used when you are helping another student or working with a small group.</p> <ul style="list-style-type: none">• Before any activity, clarify that if students have any questions, they need to ask 3 teammates or students nearby, before coming to you.• Enforce the practice. If a student asks you a question, before you respond, ask: "Did you ask 3 before me?"• If the student has asked 3 and doesn't have a satisfactory answer, then answer the question and praise that the student asked 3 before asking you.• Reminding students to make use of this practice in an ongoing way will help to develop this skill. <p>At the end of the activity or the day, use feedback to reinforce how students demonstrated effective use of the "Ask 3, then me" practice.</p>

Everyday Practice Activity

- Review activity card (handout)
- 3 questions to help guide the conversation
 - How would you see educators using these materials?
 - How practical and sustainable are these activities?
 - What supports/actions would you take to implement this approach?





Moving Forward

From Feasibility to Impact Assessment

Evaluation Co-Design



Proposed Measurement:

- Educator satisfaction
- Educator confidence
- Educator mental health literacy
- Educator perceptions of classroom climate
- Educator perceptions of student skills

Looking Ahead Activity

- What would facilitate the dissemination and implementation of this approach?
- 3 Guiding questions.
 - What types of supports are required?
 - What level of PD and support are needed?
 - What elements would you include in your communication plan?





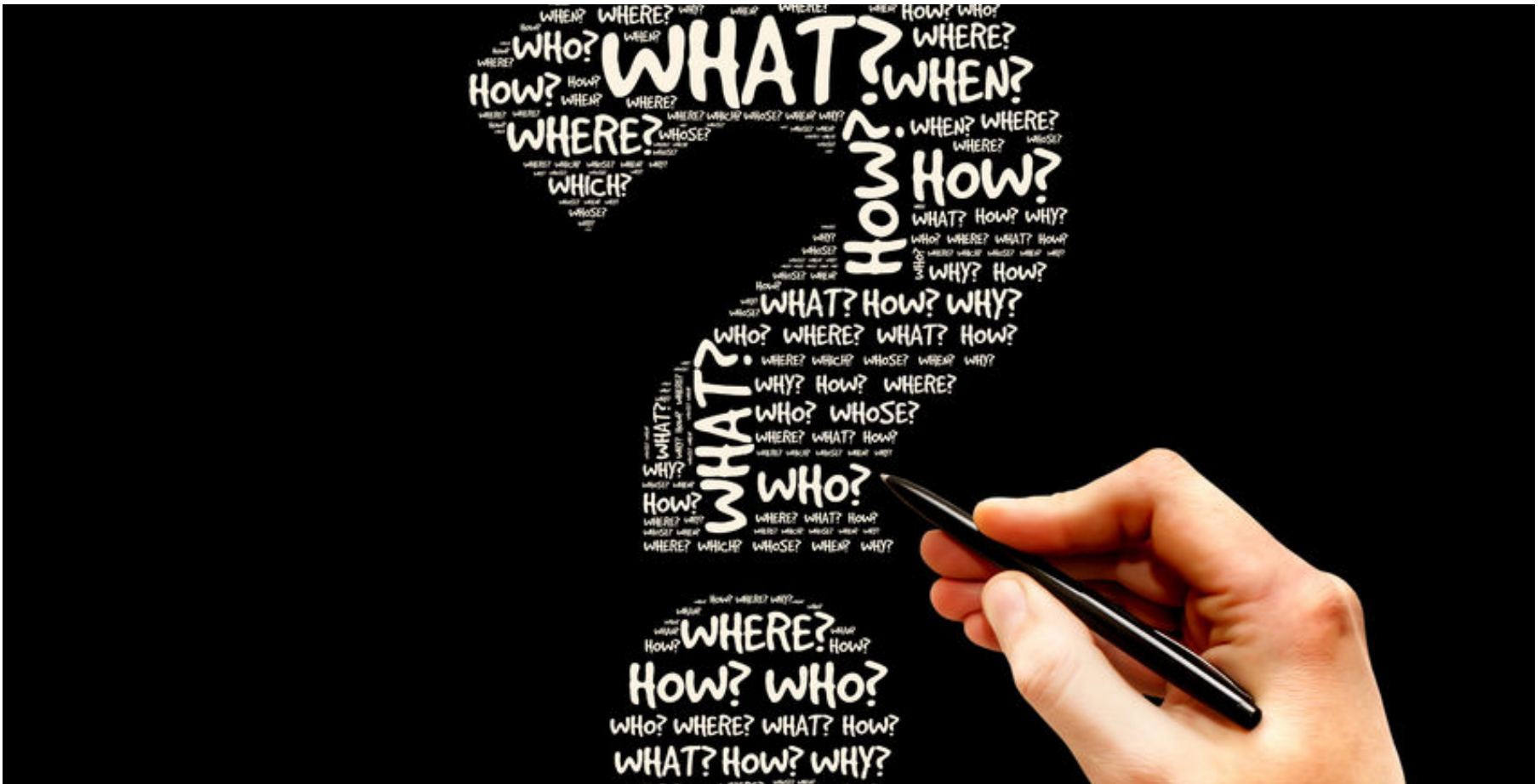
Lessons Learned So Far!



Project Implementation Drivers

- Joint leadership
- Collaboration and relationships
- Co-Design, co-creation, ongoing dialogue/sharing
- Flexibility and honouring of strengths
- Communication and approval protocols
- Focus on scale and sustainability
- Foundation in evidence-based practices
- Appreciation for classroom realities
- Funding support from The J.W. McConnell Family Foundation





Questions?



Contact Us

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interest in our work!*

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