EXECUTIVE SUMMARY FOR POLICY MAKERS

Taking mental health to school: A policy-oriented paper on school-based mental health for Ontario

EVIDENCE AND DIRECTIONS

Epidemiological studies indicate that up to one in five children and youth suffer from a diagnosable mental disorder including substance abuse. Many more students experience mental health difficulties that cause significant problems. These disorders and difficulties impose considerable barriers to the normal academic, emotional and social-developmental tasks of childhood and adolescence. Adult mental health disorders frequently onset in adolescence or before. Therefore, treating and coping with these students has significant financial costs to education, health and social service systems.

Mental health and substance abuse issues are recognized as critical for school systems. An international principal survey and our scan of Ontario school boards indicate that educators rank mental health problems as a key issue. A paramount concern is the recognition that mental health disorders and difficulties are closely associated with declining academic performance. Despite the existence of many school-based initiatives to prevent and intervene with students experiencing difficulties, educators acknowledge that current approaches are not dealing with the problems systematically and effectively.

EVIDENCE

Recent reviews and meta-analyses of the research on school-based prevention and intervention for mental disorders and substance abuse indicate that there is solid research evidence for programs for prevention, early intervention and treatment. Offering programs such as stress or anger management, reducing violence and substance abuse, and modifying the school environment to promote prosocial behaviour (skills for self-awareness, decision making, and
positive relationships) both facilitates the development of good mental health and prevents the development of disorders and difficulties.

Effective programs share key characteristics and must be implemented with fidelity. Knowledge mobilization, leadership, training and resource support are central to implementing and sustaining programs. Health and mental health literacy improve mental health and enhance the capacity of educators to detect problems and encourage students to seek help.

Ontario school boards have established a wide range of programs to prevent and intervene with mental health and substance abuse problems. There is broad acknowledgement that student mental health needs exceed the current capacity of school systems to respond adequately. Education leaders are looking for: leadership and coordination, professional development, guidance in selecting programs and models of cross-sectoral service delivery at the local level.

**FUTURE DIRECTION**

In Ontario, the care and support of children and youth are the collective responsibilities of many agencies and providers. Mental health and substance abuse issues are dealt with by hospital and community-based mental health professionals and some components of care are provided within education, child welfare and youth justice systems. For this reason, evolving and implementing the most effective school-based mental health and substance abuse programs will require leadership and coordination at the provincial, regional and local levels.

Moving forward successfully on a broad scale will require:

1. Establishing an inter-Ministerial leadership body which 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
2. 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.

3. Broad implementation of programs guided by current evidence in knowledge translation and implementation science. Future initiatives in Ontario will provide 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.

4. 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.

USEFUL SOURCES
http://rtckids.fmhi.usf.edu/publications.cfm
http://www.casel.org/downloads/PackardTR.pdf
National Implementation Research Network – closing the gap between research and practice
http://www.fpg.unc.edu/~nirm/
EXECUTIVE SUMMARY FOR PRACTITIONERS

Taking mental health to school: A policy-oriented paper on school-based mental health for Ontario

EVIDENCE AND DIRECTIONS

Epidemiological studies indicate that up to one in five children and youth suffer from a diagnosable mental disorder including substance abuse. Many more students experience mental health difficulties that cause significant problems. These disorders and difficulties impose considerable barriers to the normal academic, emotional and social-developmental tasks of childhood and adolescence. Adult mental health disorders frequently onset in adolescence or before. Therefore, treating and coping with these students has significant financial costs to education, health and social service systems.

Mental health and substance abuse issues have become a key concern for school systems as well. International principal surveys and our scan of Ontario school boards indicate that educators rank mental health problems as a key issue in the current school environment. A paramount concern is the recognition that mental health disorders and difficulties are closely associated with declining academic performance. Despite the existence of many school-based initiatives to prevent and intervene with students experiencing difficulties, educators acknowledge that much more needs to be done and are actively looking for effective programs to address the needs of both students and staff.

EVIDENCE

Recent reviews and meta-analyses of the research on school-based prevention and intervention for mental disorders and substance abuse indicate that there is solid research evidence for multiple strategies for enhancing the well-being of children and youth. There are proven programs for prevention, early intervention and treatment. Moreover, offering programs such as stress or anger management, reducing violence and substance abuse and modifying the school environment to promote prosocial behaviour (skills for self-awareness, decision making, positive relationships) both facilitates the development of good mental health and prevents the development of disorders and difficulties.

Effective programs share key characteristics and must be implemented with fidelity. Knowledge mobilization, leadership, training and resource support are keys to successfully implement and sustain effective programs. Health and mental health literacy are central to improving mental
health as well as enhancing the capacity of educators to detect problems and encourage students to seek help.

Ontario school boards have established a wide range of programs to prevent and intervene with mental health and substance abuse problems. While many initiatives have been developed and implemented entirely within boards, there are outstanding examples of cross-sectoral collaboration to detect and treat youth with serious disorders. School leaders are looking for guidance and assistance in selecting and implementing effective prevention and intervention programs at all levels. There is broad acknowledgement that student mental health needs outstrip the current capacity of school systems to respond adequately. Education leaders are looking for leadership and coordination, professional development, guidance in selecting programs and models of cross-sectoral service delivery at the local level.

FUTURE DIRECTION
In Ontario, the care and support of children and youth are the collective responsibilities of many agencies and providers. Mental health and substance abuse issues are dealt with by hospital and community-based mental health professionals and some components of care are provided within education, child welfare and youth justice systems. The interference of mental health and substance abuse problems with academic performance makes school-based interventions of interest to educators. The opportunity provided by the school context for mental health promotion and prevention initiatives is unmatched. The unmet need of students with untreated mental health and substance abuse problems and disorders and the long-term costs to the individual students and society make school-based intervention imperative.

Moving forward successfully on a broad scale will require:

1. Boards and educators to recognize that acting to improve mental health and prevent and intervene with mental health and substance abuse problems/disorders is a priority.
   a. Individual boards and schools must develop strategies including leadership and management plans for addressing mental health and substance abuse problems.
   b. 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.
   c. 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.
2. The development of the capacity to select evidence-based programs that are appropriate for local schools and communities.
   d. Boards must work with community partners, researchers and Ministries to implement programs with fidelity.
   e. Plans for programs must take long-term sustainability into consideration.
3. A high degree of collaboration among boards, educators and community-based mental health and substance abuse agencies, parents and other stakeholders.
   f. We must establish community collaboration structures and processes around the mental health and substance abuse issues of the local community.
   g. Boards and agencies must train and support staff for collaborative initiatives.
   h. Boards and agencies must permit and incent staff to partner to deliver programs.
4. Communities and boards to work together to create the resources and processes to:
   i. Select appropriate programs given the local problems, infrastructure and resources.
   j. Develop the skills and collaborative capacity to monitor program fidelity and continuously evaluate program outcomes.
   k. Establish collaborative research relationships to enable continuing program development, evaluation and refinement.

USEFUL SOURCES
http://rtckids.fmhi.usf.edu/publications.cfm
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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/
EXECUTIVE SUMMARY FOR RESEARCHERS

Taking mental health to school: A policy-oriented paper on school-based mental health for Ontario

EVIDENCE AND DIRECTIONS

Epidemiological studies indicate that up to one in five children and youth suffer from a diagnosable mental disorder including substance abuse. Many more students experience mental health difficulties that cause significant problems. These disorders and difficulties impose considerable barriers to the normal academic, emotional and social-developmental tasks of childhood and adolescence. Therefore, treating and coping with these students has significant financial costs to education, health and social service systems.

Mental health and substance abuse issues are recognized as critical for school systems. An international principal survey and our scan of Ontario school boards indicate that educators rank mental health problems as a key issue. A paramount concern is the recognition that mental health disorders and difficulties are closely associated with declining academic performance. Despite the existence of many school-based initiatives to prevent and intervene with students experiencing difficulties, educators acknowledge that current approaches are not dealing with the problems systematically and effectively.

EVIDENCE

Recent reviews and meta-analyses of the research on school-based prevention and intervention for mental disorders and substance abuse indicate that there is solid research evidence for programs for prevention, early intervention and treatment. Offering programs such as stress or anger management, reducing violence and substance abuse and modifying the school environment to promote prosocial behaviour (skills for self-awareness, decision making, and positive relationships) both facilitates the development of good mental health and prevents the development of disorders and difficulties.

Effective programs share key characteristics and must be implemented with fidelity. Knowledge mobilization, leadership, training and resource support are central to implementing and sustaining programs. Health and mental health literacy improve mental health and enhance the capacity of educators to detect problems and encourage students to seek help.

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mental health needs exceed the current capacity of school systems to respond adequately. Education leaders are looking for leadership and coordination, professional development, guidance in selecting programs and models of cross-sectoral service delivery at the local level.

FUTURE DIRECTION
Research in school-based programs to enhance development and wellbeing and to prevent or intervene with mental health and substance abuse problems has proliferated in the past two decades. Future research must delineate effective programs in all areas for different developmental levels and advance our understanding of how to implement programs successfully on a broad scale.

There are several outstanding challenges and new opportunities for researchers to better understand the processes and factors that govern and moderate the manner in which outcomes are acquired through school-based mental health programming. These include:

1. Extending our understanding of the nature and size of the effects. Research needs to define:
   - factors that may moderate the effectiveness of interventions (including the pre-existing literacy levels and attitudes of students, educators and parents, as well as socio-economic and regional differences).
   - factors that may mediate or explain the mechanisms which govern the nature of the effect (including attitudes towards learning and the intrinsic quality of the information provided). In this way, we can refine proven programs and develop new interventions.
   - developmental differences in both the ability of students to learn different types of materials and the manner in which materials are learned optimally at different stages.

2. Enhancing our understanding of the factors that can affect and maximize knowledge uptake and program implementation. Future research must continue to explore:
   - factors affecting knowledge translation and exchange (e.g., different types of format for information)
   - factors affecting the manner and extent to which a program is implemented (e.g., the role of champions, the ability of program facilitators to correctly implement the program over sustained periods of time and the extent to which various program elements may or may not be essential).
3. Establishing the extent to which the acquisition of proactive coping and adaptive skills (i.e., skills taught through social-emotional learning interventions) can prevent or diminish the onset of symptoms and disorder (with a focus on the elementary school years) and how best to integrate health promotion with illness prevention programs.

In Ontario, the care and support of children and youth are the collective responsibilities of many agencies and providers. Mental health and substance abuse issues are dealt with by hospital and community-based mental health professionals and some components of care are provided within education, child welfare and youth justice systems. For this reason, evolving and implementing the most effective school-based mental health and substance abuse programs will require research partnerships to implement and evaluate program models that will work effectively in Ontario. The current environment in Ontario offers several productive possibilities for researchers.

1. There are previously unmatched opportunities to establish collaborative research enterprises between university-based researchers and colleagues in educational and community-based agencies. These collaborations offer the capacity for long-term research projects which examine program development, refinement and effectiveness as well as the detailed study of implementation and collaboration itself.

2. Ontario is a large and diverse jurisdiction. The broad racial, cultural and ethnic diversity demands that research be harnessed to adapt successful programs to work with aboriginal, immigrant and refugee populations. In addition, the challenges of establishing and sustaining effective programs in the rural and remote northern areas of the province create unique opportunities for our researchers.

3. Collaborative, long-term projects provide key opportunities to strengthen research by examining long-term results across multiple outcomes (e.g., positive development, problems/disorders, academic outcomes, program sustainability). In addition, continuing research relationships across agencies permit study of questions of replicability in multiple situations.

4. Finally, the large and diverse geography and population of Ontario provide a rich laboratory to study the use of new media (e.g., the Internet and the interactive web) in
5. promoting well-being as well as in preventing and intervening with issues of mental illness and substance abuse.

**USEFUL SOURCES**

http://rtckids.fmhi.usf.edu/publications.cfm

Preventing mental, Emotional, and behavioural Disorders Among Young People (2009)  
By O’Connell, Boat and Warner (Eds.)  
http://books.nap.edu/openbook.php?record_id=12480&page=R1

National Implementation Research Network – closing the gap between research and practice  
http://www.fpg.unc.edu/~nirm/