

2017 Premier’s Anika Foundation Youth Depression Awareness Scholarship

Engaging the Primary CareGiver:

Youth mental health education, prevention and intervention in the context of family and school collaboration.

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# Introduction

Studies have shown that effective engagement and community collaboration has a significant positive impact on the prevention, diagnosis, intervention and continued support of young people.

# Focus of Study

The study tour involved an exploration of how NSW schools can create collaborative partnerships with families/caregivers and support agencies for prevention and intervention of young people with mental illness. The investigation included access to research, professional experience and current theories to identify barriers for intervention, provide tools for review and promote effective strategies for responding to youth mental health in the context of school and family collaboration.

Through accessing a wealth of experience from educational, health and community professionals this report endeavours to:

* identify evidence based best practice for the development and promotion of mental health literacy amongst students, staff and parents
* highlight ways schools can engage caregivers, build their capacity and confidence to contribute to the development of their child’s wellbeing and resilience
* recognise the importance of teacher training in risk reduction, intervention and promote best practice for teacher referral and engagement
* introduce the importance of mental health strategic planning and identify new collaborative approaches to mental health intervention, which seeks to engage all stakeholders.

# Significant Learning

## Informing and Engaging Parents: FamilySMART Practice

“Where families stay together, learn together, and heal together”

Sharon Lund, Alderwood Family Development Centre

Schools need to embrace a holistic, family centred approach to mental health by prioritising family unity, building the capacity and enhancing the skills of the family to engage in help seeking behaviours congruently. Schools need to streamline accessibility of information to strive to not just engage but motivate parents at critical stages of assessment, intervention and support, encouraging them to become active participants, who advocate for the best interest of their child.

For schools, a key to parent engagement is to develop an appropriate method for reaching out to families. There must be a clear intention and purposeful approach to fostering connectedness, “The tone, type of invitation and intention for communication is vital when engaging parents”, Marcia Dunlop-Powers from Toronto District School Board asserts. The tone should be respectful and emphasise equality, the invitation is for genuine collaboration and the intention for engagement should focus on productive partnerships, not intervention.

Schools can help to enhance the active engagement of families and promote resilience through building capacity and empowering parents, ultimately enlivening a sense autonomy and hope. This is vital to recovery for many families who have experienced intergenerational trauma and mental illness.

Keli Anderson from F.O.R.C.E Society affirms this notion stating, “In order to reach parents they must feel safe, respected…that their contribution matters and that they are not alone in their experiences”, further highlighting that building authentic community centred relationships will manifest into positive engagement from parents and subsequently sustainable change for students. Schools who effectively do this, see parents as partners and work with them to run and promote events, which is necessary for successful engagement. Parent mentors, who have direct knowledge of, and experience with, the local service providers, can work with schools to provide essential resources, encourage community connectedness, assist families in navigating their way through the multitude assistance networks. This person centred approach assists in breaking down any stigma that prevents parents from committing to mental health intervention strategies for their child.

Moving beyond mentors, as partners in the care and wellbeing of young people, schools should develop policies and procedures that ensure that parents are an active and informed participant within the referral process and initiating service engagement. Dr Pignatiello from SICK Kids Hospital recommended schools use the strategy clinicians know as, ‘warm hand overs’. Normally facilitated by an employed social worker/psychologist at the school or a trained parent liaison volunteer this strategy aims at personalising the referral and transition points, thereby ensuring greater commitment from parents and decreasing the likelihood of disengagement. The specialist care providers, school personnel and the parents use this initial consultation to collaborate on intervention options and initiate a critical care plan.

In addition, research shows that parents who model healthy help-seeking behaviours and qualities of resilience profoundly impact the development of these qualities in their children. Dr Ella Amir, director of Ami-Quebec, challenges schools to endeavour to assist families in establishing appropriate strategies for and commitment to self-care. Schools achieve this by inviting external agencies to run education programs, community engagement seminars as well as family and individual support sessions on the school premises. Dr Amir noted that this is particularly effective when responding to families who are reluctant or fearful of mental health intervention. Schools who have embraced this model and employed a parent mentor have found that the experience of mental health has been normalised amongst parents, significantly reducing parent disengagement and resulting in parents valuing treatment and intervention. Moreover, observations indicated that there has been more effective and sustained parent engagement, which has proven to show growth in family resiliency, including positive improvement in the mental health of their children.

## Enhance Mental Health Literacy and Help Seeking Behaviours

“Schools are excellent places to promote good mental health”

Elana Bloom Center of Excellence in Mental Health

A mandatory mental health curriculum is not only a positive step forward within education, as Lisa Woudzia from the Kelty Mental Health resource centre stated “improving the mental health literacy of families and young people is vital if we are to see significant improvement in mental health outcomes”. By implementing a mental health curriculum, schools and teachers are playing an important role in promoting mental wellness for everyone, not just those identified as struggling with mental illness. By implementing, a comprehensive and evidenced based curriculum that focuses on wellness and successfully strengthens the mental health literacy of young people and their families schools can proactively respond to the growing crisis of mental health in two significant ways. Firstly, the promotion of strategies to enhance the willingness for early engagement in mental health intervention, reduces the length and severity of episodes of mental disturbance. Secondly, and perhaps more importantly, it enhances coping strategies and propensity for an enhanced resilient approach to life’s uncertainties.

Research indicates that there appears to be a significant deficit in the effectiveness of current educational programs. Previously, many programs were focussed on mental illnesses – educating on signs, symptoms and triggers of mental illness in secondary school students. This was often overwhelming and while it helped educate students on mental health, it did not improve their resilience or ability to respond to mental illness within their lives. Current programs are informative but they lack the situational relevance where young people were able to apply this knowledge to everyday scenarios and enhance their coping/response skills.

Research has shown that mental health promotion focussed on positive psychology principles and healthy social/emotional learning strategies has the most promising outcomes for students long term, assisting them to develop the necessary empathy and relational skills as well as positive coping strategies. Schools need to be discerning about the mental health literacy programs they select. The programs developed/implemented must be are grounded in evidence based best practice. Schools need to review their capacity to meaningfully appropriate the strategies into the curriculum, as well as embedding it in school practice and culture.

Lorrain Millette from the Centre for Research and Intervention on Suicide and Euthanasia (CRISE) named a few programs that have been implemented that she believes do this very well – Zippy’s Friends, Passport and the work of Dr Paula Barrett Resiliency and Friends for Life programs. What Millette likes best about these programs is that they promote a common language around mental wellness and resilience, they help young people recognise their strength and acknowledge the toolkit of strategies they have used and can continue to use.

The programs focussed on developing and recognising inherent coping strategies, fostering compassion and healthy habits of mind. Focusing on goal setting, their desires for the future, building confidence, and identifying ‘adult allies’ are all positive features of these programs that enhance the protective factors around young people, not just those experiencing mental health concerns. They also provide opportunities for student-parent participation, promoting proactive parenting and encouraging parents to have open conversations about wellbeing and resilience in a non-threatening way. Significant benefits of implementing these programs are that schools and parents observed that the young people appeared to be more connected within their community, became more involved in community projects, maintained greater academic engagement, demonstrated a significant increase in positive help seeking behaviour and a possessed a greater sense of hope and optimism for the future.

Online platforms, eLearning modules, apps and gaming models are being implemented worldwide, providing innovative ways for young people to access information in a way that interests them and makes sense for their lived experience with technology as an essential life tool. The current research around these digital resources is showing higher levels of engagement across young people. Melissa Taylor–Gates from MindYourMind, an organisation that is pioneering online mental health literacy programs and applications for accessing treatment, believes this is where mental health education is heading in the future. The use of online tools and apps capture the interest of young people at a point of enquiry, provides them with appropriate information wherever they are and whenever they need it, but more importantly consistently direct youth to family, friends and organisations that can give them personal one on one treatment.

## Strategic Planning and Review: MindSafe Schools

### Addressing Underlying Values and Bias

Connecting on an authentic human level without prejudice or judgement is an essential component to establishing and maintaining a culture of genuine equality and care within schools. Schools must be open to a strategic review of policy and practice to recognise and address any evidence of unconscious bias either at a personal or systemic level

Emerging unconscious bias research has shown that subconsciously individuals and organisations may hold values that result in stigma related behaviour which at times can be a significant factor in determining the quality of care schools and mental health services agencies offer. Dr Javeed, a leading researcher into this phenomenon addressed this saying, “Despite our best intentions, many of us unconsciously and automatically label patients with mental illness…as dangerous and unpredictable (or even time consuming and unfixable), which leads to discriminatory behavior”. As care providers, schools need to be courageous enough to recognise and accept responsibility for their unconscious judgements and take necessary action to reduce the negative impact it may have on the management and care of students and their families.

One significant area where this exists is in discipline and behaviour management. Procedures should be critically evaluated whereby schools can ensure that they have clear unbiased policies in place that do not impose punitive consequences that could contribute to further discrimination and trauma. Unbiased practices should be embraced that assist individual behaviour modification which is respectful of the student’s mental illness and works to enhance resilient social-emotional learning. Moreover, at a classroom level Dr Jarveed advocates for getting back to what is termed Compassionate Care Curriculum where teaching and learning experiences support all students to develop core communication and empathy skills, which universally address bias and stigma.

Trauma informed practice is becoming more prominent in the field of mental health intervention It is a person centred approach where programs and procedures seek to acknowledge trauma and the impact it has on human development, emotion, cognition and physiology. It provides an understanding of how trauma influences the way an individual defines themselves and their experiences, choices and coping strategies – even maladaptive ones.

Not employing a trauma informed approach, Genevieve Fecteau from the Canadian Mental Health Association (ACSM Division) suggested can lead to changes in the way we perceive and approach the young person, at times in extreme circumstances the student may ‘start to be considered a problem, we may see them as resistant, we can focus on their faults and unwillingness to engage, we develop justification for these faults that have the potential to entice or permit us to further disengage’.

Schools are encouraged to use a strength-based approach, such as social emotional learning strategies that place a strong emphasis on autonomy, self-directedness, belonging, connectedness, competence and sense of accomplishment. This encourages schools to reconsider both the young person and their family as a resource and individuals capable of discerning actions for positive change. In addition to a trauma informed approach, schools seek to help teachers to manage their experiences of powerlessness, by implementing procedures that validate an individual’s experiences, the impact of underlying trauma and engage in practices that assist the individual to develop essential life skills that will promote healthy living practices for the future.

## Teacher Education and Training

“Trusted adults in schools help to promote health and the inherent value of life for our students” – Richard Leiberman

Research has affirmed the importance of teacher training and building confidence in area or mental health and suicide prevention. Schools must ensure that teachers are not just adequately trained in recognising warning signs, discerning when and what level of intervention is needed and social/emotional learning strategies but are educated in the correct approach when dealing directly with young people and their families. By supporting appropriate teacher professional development schools make a commitment to improve methods for identifying students at risk, provide stability, a language to use and a pathway to support life that is safe for the young person and the educator. The following are some evidence-based courses already available that provide this training throughout New South Wales.

* Applied Suicide Intervention Skill Training (ASIST) and SafeTalk: these workshops provide a framework for ‘suicide first aid’.
* Awaken Youth Teacher Suicide Prevention Training: targeting teachers in schools this training aims to engage, educate and energise teachers in safe suicide prevention strategies, which is respectful of arenas of safety and self-care.
* Mental Health First Aid: provides a comprehensive outline of a range of mental illnesses, possible causes and risks factors, treatment options, and methods to assist someone to seek help.

## Interagency Collaboration

Sharon Lund from the Alderwood Family Development Centre stated, “In the past, different agencies would work beside each other, not really valuing the role of one another and at times would unknowingly contradicted each other in some of the strategies they used. This would lead to the child feeling overwhelmed and confused, resulting in a feeling of low self-esteem – that they had failed again to meet expectation… which would often lead to premature disengagement of treatment and a reluctance to seek help in the future”.

From this common observation, the interconnectedness of school, community agencies and the family is vital to the success of any mental health education or intervention program. An integrated approach seeks to bring together educators, paediatricians, psychologists, social workers, occupational therapists and family support services to collaborate on solutions focused practice. To achieve this a systems approach, with a common vision, clear protocols and guidelines that ensure effective collaboration is needed.

Ideally, through regular meetings and a commitment to trauma informed social and emotional practices, the school will become an active member of an integrated network of support with the young person and their family in control. The processes implemented will allow young people and their families to set the treatment pathway, their input informs the approach, the timeline for intervention and the strategies used. Moreover, programs and treatment options must continually promote autonomy and choice in a non-coercive environment which allows a greater sense of control and builds confidence within young people and their families.

One approach observed throughout the research tour was the engagement of a mental health capacity building coach within schools. The role of the coach is to work with established school structures to enhance, augment or change current practices so that the school can provide quality mental health education and intervention in a contextually relevant, integrated, timely, cost effective and appropriate manner. It recognises the educational context of schools and respects the privileged role schools have in the care and wellbeing of students by providing a balanced framework that is manageable and realistic for the school to implement. The coach works not just with the school executive, but with families, agencies and community groups in building supportive structures, appropriate referral connections and organic workflows between agency professionals and school personnel.

In addition, part of the collaborative process which was very successful, was the development of an interagency role called a ‘Care Navigator’ who assists to connect young people and their families with appropriate service providers within their community. They walk the transition journey with the young person and their family aiming to develop what is called an Integrated Care Pathway (ICP). At each point the Care Navigator liaises with the school and agency personnel to ensure that they remain aware of the progress and facilitate collaborative care meetings. The ICP aims to ensure that the youth, sees the right people, in the right order, in the right place, at the right time. They attend initial appointments, stay in regular contact with them and continue to seek out access to community resources until the young person and their family have established a consistent and manageable care plan. This has improved the commitment of families in pursuing and preserving ongoing care, which has had a profound impact on the health and wellbeing of their children.

The role of schools and agencies is to assist to educate in healthy life choices, they contribute to the momentum of healing by promoting positive help-seeking behaviours and provide opportunities to enhance resilience by emphasising relationships and connectedness. However, the challenge is for these collaborative partnerships to think creatively and propose innovative solutions to complex challenges, with localised community-based solutions. Not only does this approach make a clear delineation of the school's role as educators, it assists in establishing clear avenues for referral, follow up and care management that complements other health care professionals, thus decreasing the financial burden on schools to provide crisis support and counselling services to their students.

# Conclusion

“Every child deserves a healthy start, a strong mind and a bright future”

Dr Pignatiello – a child and youth psychiatrist at SickKids Centre for Brain and Mental Health

Engaging in strategic development, teacher training and review of policy and practice around mental health, schools have an opportunity to create an informed, inclusive and accepting school support system that brings together parents, teachers and agency workers focussed on the goal of improving the quality of education and life for young people struggling with mental health. Through improved programming and a commitment to enhancing mental health literacy, schools can provide an experience of learning and connecting that develops within young people a coping toolkit that helps them overcome adversity, be resilient and thrive in life well beyond the school gates.

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## Want to know more?

For more detailed information on strategies, important considerations and study tour findings access the Anika Foundation Scholarship-Engaging the Primary Care Giver Facebook page <https://www.facebook.com/Anika-Foundation-Scholarship-Engaging-the-Primary-Care-Giver-268030646971100/>