Supportive School Environments

Presentation to Symposium on Child and Youth Mental Health

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Presentation Outline

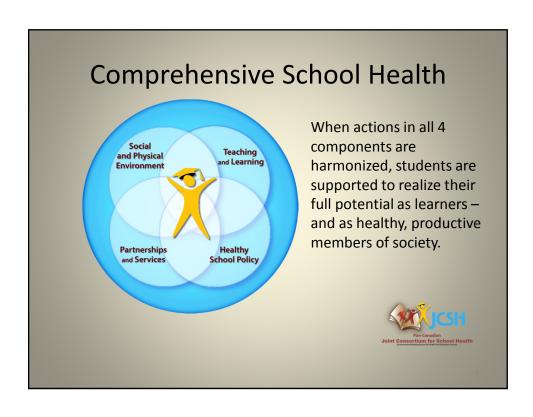
Positive Mental Health Environments

- 1. Pathways
- 2. Comprehensive School Health
- 3. Positive Mental Health Perspective and Resources
- 4. PMH Practices for School Environments
- 5. Questions and Discussion



About JCSH

- JCSH a pan-Canadian partnership of provincial, territorial, and federal governments
- Mission: collaboration across Health and Education sectors
- Focus: priority areas of FPT Ministers of Health and Council of Ministers of Education, Canada
- Three Long-Term Outcomes



JCSH and Positive Mental Health

- Development of focus and resources
 2007- present
- Link to Better Practices and Perspectives Report:

http://www.jcshcces.ca/upload/JCSH%20Best%20 Practice Eng Jan21.pdf





Healthy School Planner

The <u>Healthy</u>
<u>School Planner</u>
(<u>HSP</u>) assists
schools to

- Assess
- •Plan
- Collaborate
- Evaluate



Positive Mental Health Toolkit

- Available in English and French
- Free online resource
- User friendly
- http://www.jcshpositivemental healthtoolkit.com/





Youth Engagement Toolkit

- · Available in French and English
- Free online resource
- E-book format
- Videos and interactive pages
- Link: http://www.jcsh-cces.ca/ye-book/
- Complements PT work: eg. NB YE Initiative



Positive Mental Health

- Traditional approaches have emphasized:
 - the problems or challenges associated with existing or emerging mental health-related concerns
 - the approaches or interventions needed to remediate or address areas of risk and need
- Recent better practice research across health and educational domains assert the importance of including a positive view of mental health

Positive Mental Health in Schools

- Involves the recognition that a student's state of psychological wellbeing is:
 - not only influenced by the absence of problems and risk-need concerns
 - but also impacted by the existence of positive factors present within individuals and their social settings that contribute to positive growth and development

Paradigm Shift

- The emergence of positive mental health perspectives
 has shifted the focus of educators and health
 professionals from a preoccupation with repairing
 weakness to enhancement of positive qualities (McDougal
 & Riley-Tillman, 2004, p. 101).
- Such qualities or factors may include:
 - Positive individual traits
 - Positive personal experiences and relationships
 - Initiatives, programs and environments that assist in:
 - · Enhancing quality of life
 - Preventing or reducing the risk of developing mental health-related concerns

Assumptions

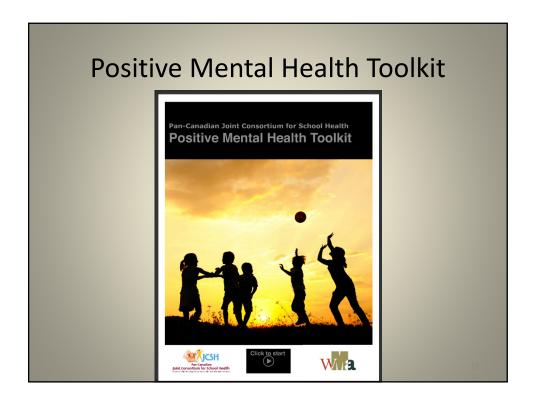
- Children and youth have inner strengths and gifts that support their capacity to initiate, direct, and sustain positive life directions
 (Hamilton & Hamilton, 2004; Losier and Morrison, 2007)
- Child and youth engagement and empowerment are critical considerations for facilitating positive development or change (CSPH, 2002; Deci & Ryan, 2007)

Assumptions

- Social contexts and networks provide important resources and influences that have the capacity to contribute to and enhance psychological well– being (Losier & Morrison, 2007; Sheridan, Warnes, Cowan, Schemm & Clarke, 2004)
- Children's and youths' relationships with adults and peers that contribute to psychological well– being are characterized by interactions that convey genuineness, empathy, unconditional caring and affirmation (Brendtro, 2003)

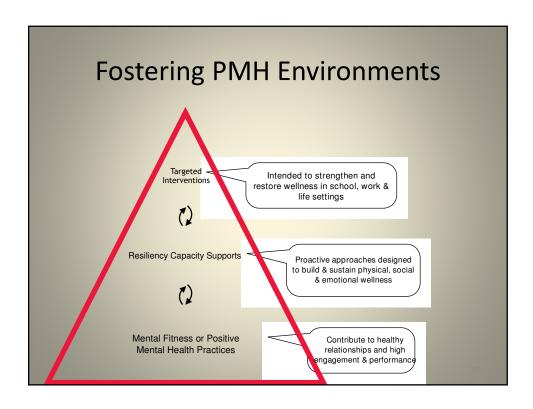
Schools as a Critical Setting for PMH

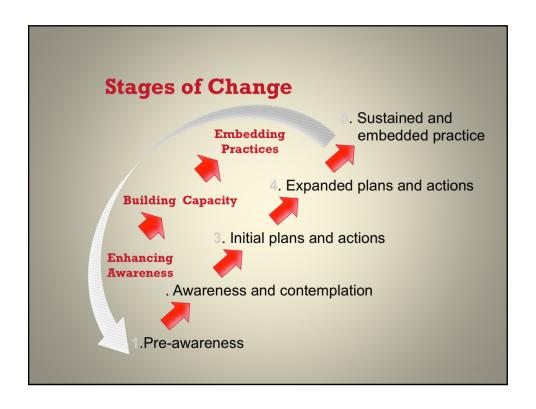
- Schools provide:
 - Critical contexts for shaping children's self-esteem, self-efficacy and sense of control over their lives
 - Key opportunities for promoting the delivery of activities and comprehensive initiatives related to positive mental health
- As children move into their early and later teen years, schools may play an even greater role than the home context in influencing youth, given the powerful influence that teacher support and peer networks have within the educational settings

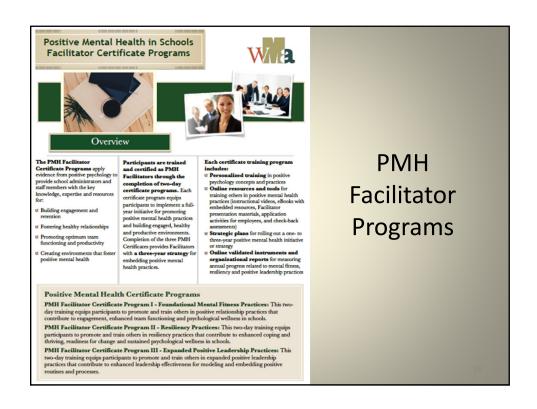


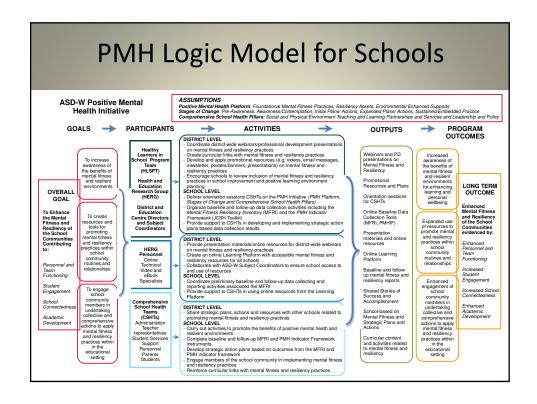
Group Activity

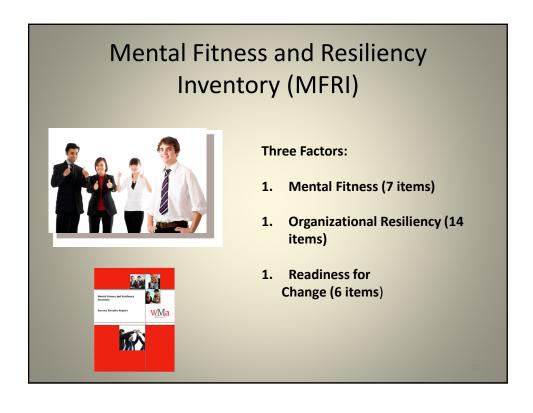
• Indicator exercise?

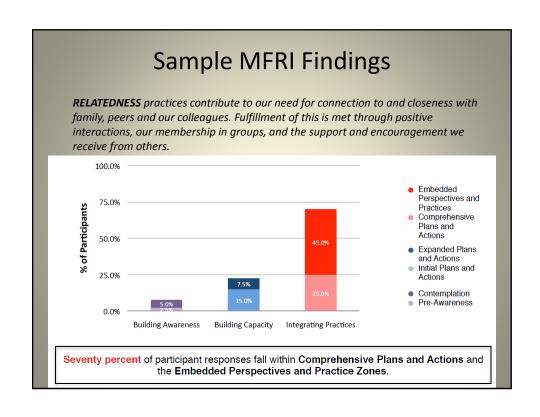


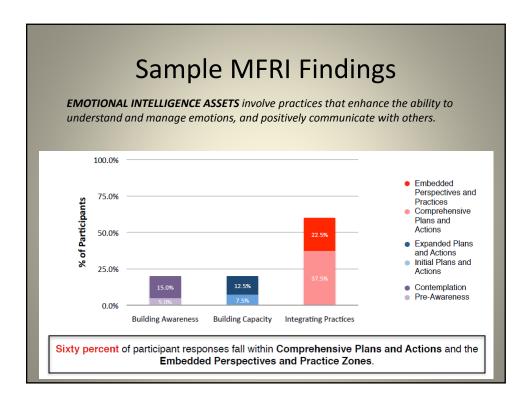


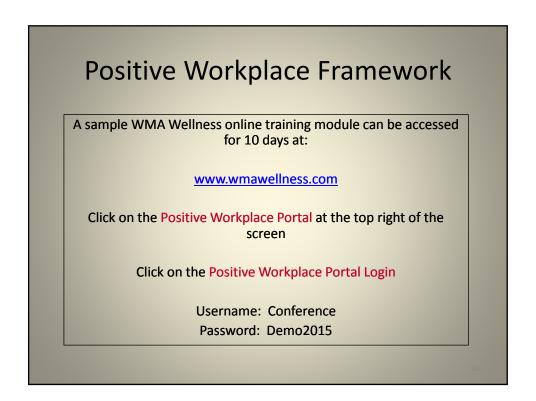












Purpose of CIM Development

Background: lack of knowledge on effect of CSH on student success

Goal: to understand how comprehensive school health impacts student achievement.



"We need to prepare them [students] for their whole life, not just for a job or good academic success"

Freeman-Hussain-JCSH Healthy Schools Framework

	COGNITIVE	BEHAVIOURAL	AFFECTIVE
ACADEMIC INDICATORS	Achievement test scores: standardized tests, GPA, report cards	Attendance: absences, lates, suspensions/expulsions	Academic motivation: academic self- concept/self- efficacy, self- regulation, self- confidence, intrinsic/extrinsic motivation, coping strategies
SUCCESS INDICATORS	High school progression: graduation rates, graduating with Honours, credit attainment, drop- out rates, post- secondary plans	Student participation: number of activities in which students participate, type of participation (e.g., leadership; on-task/off- task), variety of participation (in-class, extra- curricular, community), quality of participation (student engagement, peer relationships)	Mental health: well- being, ill-being, suicidal tendencies, depression, school connectedness
HEALTH INDICATORS	Understanding of health: physical activity guidelines, screen time limits, nutritious eating, dangers of substance use	Health and health behaviours: physical activity, screen time, eating patterns, body composition, substance use, sexual behaviour	Motivations toward optimal health: attitudes, perceived behavioural control, subjective norms
ENVIRONMENTAL INDICATORS	Understanding of Comprehensive School Health: student, teacher, school administrator, parent, community	Adult engagement: parent and family member authentic engagement in school, teacher and administrator professional development, community partnerships	Inclusive school environment: safety, accepting environment, positive school culture, healthy school "buy-in"

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