

WORKING
TOGETHER
TO SUPPORT
**MENTAL
HEALTH IN
ALBERTA
SCHOOLS**

Acknowledgments

Thank you to school authorities, community partners and cross-ministry partners for their willingness to share their expertise in the development of this resource, including:

- Calgary Board of Education
- Calgary Catholic School District
- Edmonton Catholic Schools
- Edmonton Public Schools
- Alberta Children's Services
- Alberta Health
- Alberta Health Services
- Alberta Justice and Solicitor General
- Alberta Mentoring Partnership
- Alberta Regional Professional Development Consortia
- Canadian Mental Health Association-Alberta Division
- Palix Foundation

Alberta Education would also like to acknowledge the Calgary Regional Consortium for its leadership in the development of the planning and implementation tool: *Key Conditions for Supporting Mental Health in*

Schools, which is included in this resource.

Alberta Education also acknowledges the work of the Alberta Regional Professional Development Consortia, the Alberta Teachers' Association and their education partners who collaborated in the development of [A Guide to Support Implementation: Essential Conditions \(2010\)](#), and to School Mental Health ASSIST (Ontario) for their willingness to share content from their publication [Planning for Sustainable Practices in School Mental Health and Well-Being \(2016\)](#). Content from both of these publications informed the development of *Key Conditions for Supporting Mental Health in Schools*

An additional thank you to those who contributed feedback during the development of this resource and to everyone who is committed to promoting student mental health and creating welcoming, caring, respectful and safe learning environments across Alberta.

ISBN 978-1-4601-3299-9 (PDF)

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Introduction

Current research clearly identifies the importance of mental health to learning, as well as to students' social and emotional development. Students¹ who experience positive mental health are resilient and better able to learn, achieve success and build healthy relationships. Given the important relationship between positive mental health and academic success, schools have an important role in nurturing students' positive mental health and well-being.

Much of the good work currently underway across the province related to inclusive education, including: [welcoming, caring, respectful and safe learning environments](#); [high school redesign](#); [Regional Collaborative Service Delivery \(RCSD\)](#); [Comprehensive School Health](#); and [Mental Health Capacity Building](#) projects; supports students' mental health and well-being. It is this work that we can learn from, refine and build on.



¹ In this resource “student” refers to all children in Early Childhood Services (ECS) and in Grades 1 to12.

Goals of this resource

This resource is an invitation for schools and their partners to reflect on current practices, leverage current initiatives and consider how the promotion of mental health can be more effectively embedded in school and system policies, practices and services. As understanding about mental health, brain development, learning environments and school communities evolves, best practices will also change and evolve.

The goal of this resource is to bring together the learning from this work, as well as the latest Canadian research, and help build a shared understanding of how schools, community partners and government can better work together to support mental health. This collaborative effort will ensure that every student in Alberta has the learning opportunities and supports they need to develop positive mental health, be an engaged and successful learner and reach their full potential.

The resource provides information and guidance for:

- developing a shared language related to mental health that partners can use for collaborative conversations and planning;
- understanding the connections between brain development and mental health;
- shifting to a more strength-based approach by building resiliency, enhancing social-emotional learning and supporting recovery;
- implementing a whole-school approach that supports positive mental health;
- designing a continuum of supports and services to meet the mental health needs of students and their families;
- understanding what is meant by pathways to services; and
- identifying roles of key partners in supporting mental health in schools.

In addition, this resource offers a tool that schools can use for planning and implementing mental health strategies, action plans and/or initiatives. The tool is based on implementation science and was developed collaboratively by the Calgary Regional Consortium.

Inclusive education and mental health

The [Ministerial Order on Student Learning: Goals and Standards Applicable to Education in Alberta \(#001/2013\)](#) states that the fundamental goal of education is to “... inspire all students to achieve success and fulfillment, and reach their full potential...” This statement emphasizes our responsibility to all students in an inclusive education system.

The [Inclusive Education Policy](#), introduced in the 2015-2016 [Guide to Education](#), reinforces that the Ministerial Order on Student Learning applies to all learners and that all learners should be treated equitably and with respect. It also emphasizes that all students must have access to both meaningful learning experiences and the instructional supports they need to be successful.

At its heart, inclusive education addresses three of the most significant determinants of mental health: social inclusion, freedom from discrimination and violence and access to resources. It also addresses factors that contribute to the gaps in achievement experienced by individual or groups of learners, including poverty, social exclusion, marginalization and mental health issues.

Inclusive education is an approach that demonstrates universal acceptance of all students, values choice and ensures opportunities for all. It is based on the premise that, with the right supports and opportunities, all learners can be successful.

An inclusive learning environment is structured to anticipate, value and respond to the diverse strengths and needs of all students. A focus on positive mental health creates learning environments that are more accepting and supportive of all students.

Inclusive education is a continuous search to find new and better ways of supporting diversity and student differences. It is an ongoing process of identifying and removing barriers so that all students are engaged with the programs of study, within a welcoming, caring, respectful and safe learning environment.

Welcoming, caring, respectful and safe learning environments

[Welcoming, caring, respectful and safe learning environments](#) make a significant contribution to the mental health and well-being of students, staff and families. In June 2015, the [School Act](#) was amended to articulate the importance of these supportive learning environments in an inclusive education system.

The amendment reads:

Students are entitled to welcoming, caring, respectful and safe learning environments that respect diversity and nurture a sense of belonging and a positive sense of self.

In welcoming, caring, respectful and safe learning environments:

- healthy and positive relationships are fostered;
- school staff and community partners collaborate to support students' sense of safety and well-being;
- students feel that adults care for them, both as a group and as individuals;
- academic and behavioural expectations are clear, consistent and regularly communicated and reinforced;
- promotion and prevention strategies for mental health and social-emotional learning are embedded in daily instruction and school-wide activities;
- support is provided to students who are impacted by inappropriate behaviour, as well as to students who engage in inappropriate behaviour; and
- students who demonstrate unacceptable behaviour receive fair and appropriate consequences (that take into account age, maturity and individual circumstances), as well as support.

First Nations, Métis and Inuit education and mental health

The 2015 [Valuing Mental Health](#) report acknowledged that First Nations, Métis and Inuit peoples and communities in Alberta encounter unique circumstances, challenges and opportunities. Many of the mental health issues faced by Indigenous populations are rooted in historical and intergenerational trauma, socio-economic inequalities and discrimination. High rates of suicide, both provincially and nationally, as well as an overrepresentation of Indigenous people in our justice and health care systems, are pressing concerns.² Many of these challenges impact Indigenous students' mental health, well-being and social, economic and educational outcomes.

The urgency for action is underscored by current national and regional demographic trends that show First Nations, Métis and Inuit peoples are the youngest and fastest-growing segment of Canadian society.

Welcoming, caring, respectful and safe learning environments that value all students and respond to individual and diverse cultural needs will reduce barriers, such as marginalization, exclusion and discrimination, and improve educational outcomes for First Nations, Métis and Inuit students and their families.

Government and school authorities need to ensure that jurisdictional disputes do not cause Indigenous students to experience denials, delays or disruptions of services and supports ordinarily available to other Albertans.³

School staff and mental health providers require increased access to information and services to manage the impacts of trauma and multigenerational issues resulting from Indian residential schools.

To promote reconciliation and align with the [United Nations Declaration on the Rights of Indigenous Peoples](#), actions to support students' mental health should be informed and guided in collaboration with First Nations, Métis and Inuit communities.

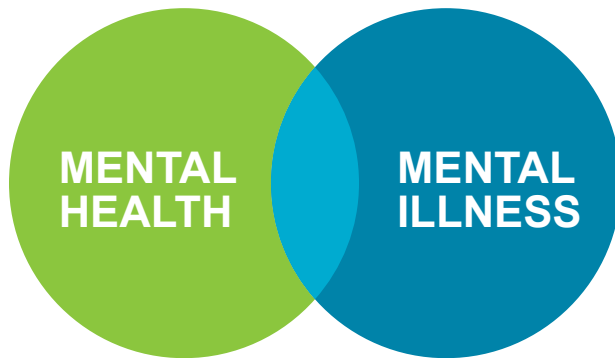
2 Valuing Mental Health: Report of the Alberta Mental Health Review Committee, 2015. <http://www.health.alberta.ca/documents/Alberta-Mental-Health-Review-2015.pdf>

3 Valuing Mental Health: Report of the Alberta Mental Health Review Committee, 2015. <http://www.health.alberta.ca/documents/Alberta-Mental-Health-Review-2015.pdf>

Developing a shared language

Clarity regarding the words we use when we talk about mental health and mental illness is important. A [common language](#) will help build a shared understanding and facilitate collaborative conversations and planning with partners.

The terms *mental health* and *mental illness* are often used interchangeably; this can lead to confusion and misunderstanding. They are two separate but inter-related concepts.



Mental health, as defined by the World Health Organization, is “a state of well-being in which every individual realizes his or her own potential, can cope with the normal stresses of life, can work productively and fruitfully and is able to contribute to his or her community.”⁴

The Public Health Agency of Canada offers a similar definition: “Mental health is the capacity of

each and all of us to feel, think and act in ways that enhance our ability to enjoy life and deal with the challenges we face.”⁵

Mental health is not fixed. It is influenced by a range of factors, including life experiences, learning and work environments and the social and economic conditions that shape our life.

Mental illness is alterations in thinking, mood or behaviour associated with significant distress and impaired functioning in one or more areas such as school, work, social or family interactions or the ability to live independently.⁶

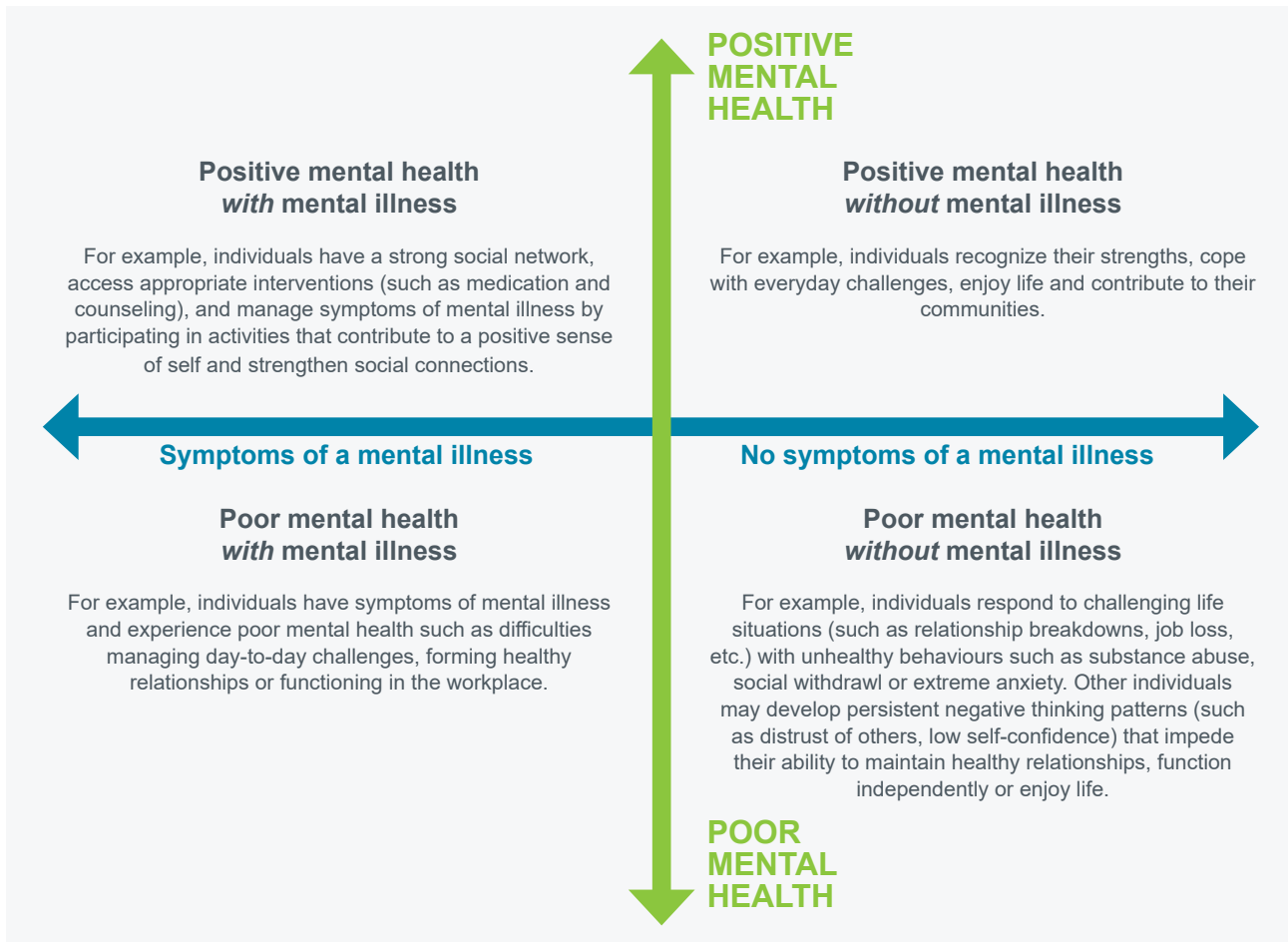
It is estimated that 10-to-20 per cent of children and youth in Canada experience mental illness and that only one in five children and youth who need mental health services receives them.⁷ Seventy-five per cent of mental illnesses have their origin in childhood.⁷ Mental illnesses can be treated effectively, and early diagnosis and treatment are the best ways to help in recovery.

4 World Health Organization http://www.who.int/features/factfiles/mental_health/en/

5 Public Health Agency of Canada <http://www.phac-aspc.gc.ca/mh-sm/mhp-psm/index-eng.php>

6 Public Health Agency of Canada <http://www.phac-aspc.gc.ca/cd-mc/mi-mm/index-eng.php>

7 Canadian Mental Health Association <http://www.cmha.ca/media/fast-facts-about-mental-illness/#.WIoRkrYrLZs>



Mental health is not the absence of or the opposite of mental illness. For example, a person could have a mental illness, but because they have the support of family and a strong social network, coupled with effective interventions such as medication and counseling, they could experience positive mental health and be able to handle day-to-day challenges, maintain relationships and enjoy life.

On the other hand, an individual may not have a diagnosed mental illness but may experience poor mental health as a response to stressful life events (such as relationship breakdowns or academic failure) without the benefit of a supportive social network. Over time, these individuals may also

develop negative thinking patterns that impede their problem-solving abilities. Evidence of poor mental health might include difficulties maintaining healthy relationships, coping with daily stress and managing feelings of fear or anxiety.

Consider the graphic above, illustrating how an individual may experience different combinations of mental health and mental illness. The four quadrants are representational only and the two arrows suggest two continuums of possibilities; dependent on an individual's strengths, resources and life context.

Mental health issues or problems

Some students will experience mental health difficulties that are not necessarily symptoms of a mental illness. Mental health issues or problems are reactions to life circumstances or events that have an impact on an individual but are insufficient symptoms for a formal diagnosis of a specific illness or disorder.

For example, an individual may respond to common struggles and difficulties by feeling stressed, upset, confused or overwhelmed. These feelings can have a real impact on the student's mental health and his or her ability to learn, maintain relationships and enjoy life. Students experiencing mental health issues or problems will benefit from the help, support and understanding of a caring adult. These students may not always require professional mental health services, but it may be useful.

Reducing stigma around mental health

It is important to reduce the stigma associated with mental illness and mental health issues. Stigma (or negative stereotypes) can make experiences and situations even more challenging. For people with mental health difficulties, other peoples' reactions to their appearance, behaviour, and/or their need for services and treatment may result in discrimination, prejudice and even social exclusion.

While symptoms can usually be mitigated by a number of strategies and interventions, the inherent stigma and discrimination associated with mental illness may persist for a lifetime and can manifest in a number of subtle and not-so-subtle ways. Typically, stigma takes the form of stereotyping, distrust, fear or avoidance and can negatively impact students' feelings of self-worth. The stigma of mental illness can also discourage students and their families from reaching out for help and pursuing needed services and treatment. Along with the stigma faced by the individual, associative stigma can impact the family and friends of that individual.

Much stereotyping is due to the negative depiction of mental illness and mental health issues prevalent in the media. Television, movies, literature and news articles often reinforce negative stereotypes.

Increasing understanding of mental health and mental illness is one of the most effective strategies for reducing stigma. It is important to provide opportunities for students, school staff and community partners to talk about mental health and build an understanding of biases. Being more aware of your own attitudes and behaviours can help individuals see beyond labels and stereotypes and recognize that people with mental illness

have many other personal attributes that do not disappear just because they have a mental illness. This increased awareness encourages people to focus on the positive and recognize the strengths and contributions of individuals.

Students, school staff and community partners can also counter stigma through education that challenges myths and stereotypes. For example, learning that mental illness is a biological condition that affects behaviour, versus a result of an individual “choosing to act out,” can lay the groundwork for creating more effective supports within school environments and the community.

Research also shows that increasing levels of contact with people who experience mental health issues or mental illness can improve understanding and increase positive attitudes of acceptance, empathy and respect.

Building social-emotional competency will also ensure that people experiencing mental health problems are treated with dignity and respect. Developing empathy allows others to consider how they would like to be treated if they were in the same situation.

Using respectful and positive language

Words are powerful and they can shape ideas, perceptions and attitudes. It’s especially important to keep this in mind when talking about students’ mental illness or mental health issues.

When we see a diagnosis or condition as the defining characteristic of a student we devalue that person as an individual. It is important to use respectful and positive language when talking about mental health and mental illness with school staff, families, other students, and especially with the students themselves.

What we need to remember is that individuals with mental illness or mental health problems are first and foremost people. They have a range of strengths, needs, interests and experiences, just like everyone else. Use “people-first language” that puts the individual first, as in “a student experiencing mental illness,” rather than “a mentally ill student” or a “disabled student.”

It is also important to acknowledge the diversity of experiences individuals will have with mental illness or mental health problems and not assume that students with similar types of conditions will have similar personalities, abilities and needs. Just like gender, ethnicity, and other traits, mental health and mental illness are simply among the many parts of being human.

Depending on the circumstance, it may be necessary to talk about a student’s specific mental health issue or mental illness when discussing specialized supports and services or when working with specialists. However, most of the time at school, in the community and with families, it may be unnecessary to label the illness or condition

at all. It is often more helpful to describe what the student needs with the same language you would use for any student. (For example, “a student requiring additional behavioural supports” or “a student requiring support to manage anxiety.”)

Avoid language that encourages stereotypes or puts people into categories, such as “the mentally ill” or “the emotionally disturbed.” Also avoid words or phrases that evoke pity or guilt such as “afflicted with,” “plagued with” or “suffers from.” As much as possible, use everyday language rather than medical terminology.

For example, rather than “disease” or “impairment,” use more neutral words such as “conditions,” “traits” or “difficulties with.” Intervene when someone is using hurtful or derogatory language that reinforces negative stereotypes.

[Respectful and positive language](#) can make a world of difference in the attitudes of [school staff working with students](#) experiencing mental illness or mental health problems, and in the lives of those students (and their families), today and for years to come. Respectful and positive language can also go a long way to reducing stigma and building feelings of hope and optimism.



Understanding mental health and brain development

Early experiences are built into our brains and our bodies and positively or negatively affect lifelong learning, behaviour and health outcomes. Brain research shows that experiencing nurturing,

responsive and stable relationships is essential for healthy brain development. By providing these supportive relationships, family members, caregivers, school staff, coaches and other

Fear and Anxiety Affect the Brain Architecture of Learning and Memory

PREFRONTAL CORTEX

Center of executive functions; regulates thought, emotions, and actions. Especially vulnerable to elevation of brain chemicals caused by stress. Matures later in childhood.

AMYGDALA

Triggers emotional responses; detects whether a stimulus is threatening. Elevated cortisol levels caused by stress can affect activity. Matures in early years of life.

HIPPOCAMPUS

Center of short-term memory; connects emotion of fear to the context in which the threatening event occurs. Elevated cortisol levels caused by stress can affect growth and performance. Matures in early years of life.

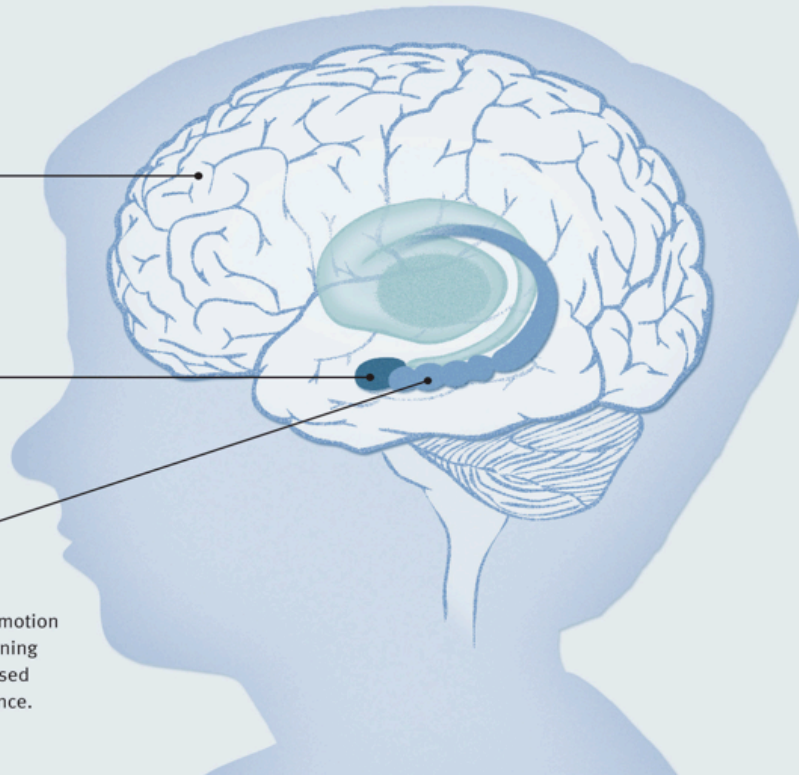


ILLUSTRATION BY BETSY HAYES

Illustrated by Betsy Hayes. Reprinted with permission by the Center on the Developing Child at Harvard University. <http://developingchild.harvard.edu>

significant adults in students' lives play an important role in building a strong foundation for learning, memory, behaviour, health and the ability to form healthy relationships.

Recent progress in neuroscience highlights the importance of welcoming, caring, respectful and safe learning environments that nurture well-being, and a positive sense of self and belonging. Healthy interactions and experiences shape the developing brain in positive ways; negative experiences interrupt brain development.

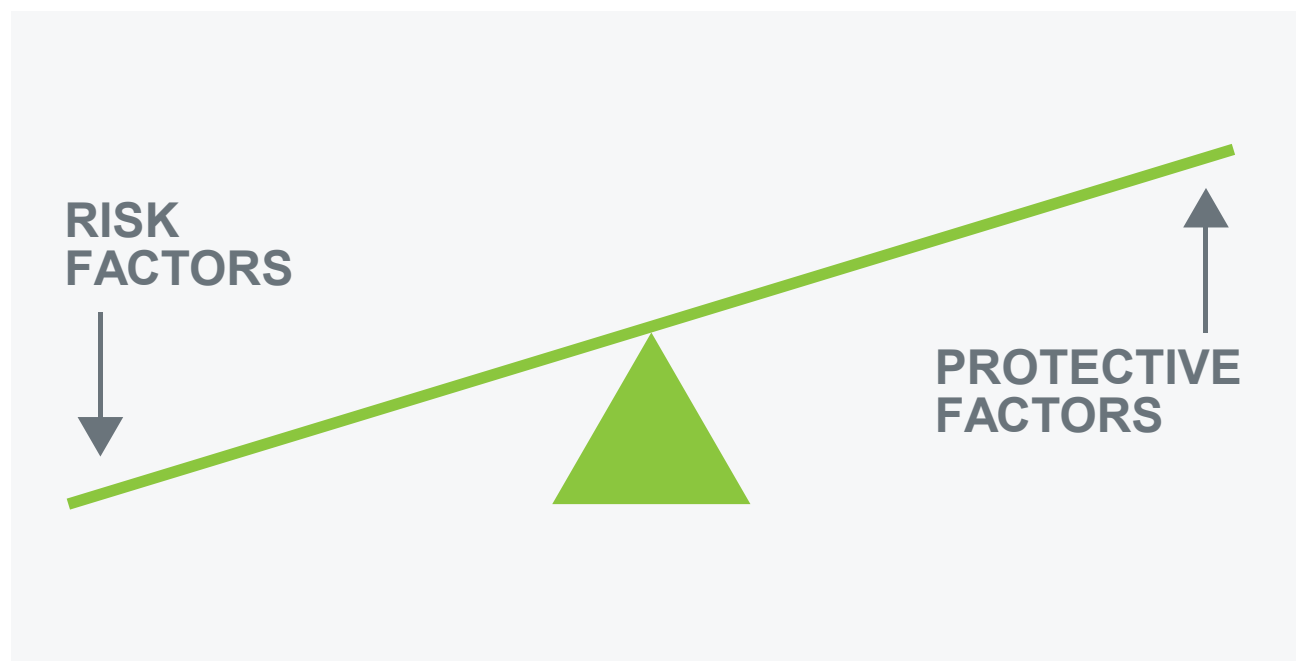
On the other hand, interactions that are repeatedly negative or unresponsive can negatively impact learning, behaviour and well-being.

Students who experience poor mental health may have been exposed to frequent or prolonged adverse childhood experiences that put them at risk.

When students experience frequent or prolonged adversity, such as physical, sexual or emotional abuse; chronic neglect or abandonment; exposure to violence; or substance abuse of a family member; the stress experience can become intolerable and toxic. Toxic stress derails healthy development and can result in trauma. This is especially true when a student has no caring adult to act as a buffer.

For further information on how the architecture of the brain is foundational for learning and mental health, see the video [How Brains are Built](#).

The effect of these adverse experiences on a child's developing brain increases the risk of long-term mental and physical health problems. To minimize these long-term health issues and protect students from the effects of toxic stress, we must increase the number of protective factors in a student's life while decreasing risk factors.



Protective factors are conditions or attributes that promote well-being and reduce risk for negative outcomes (or insulate individuals from harm). These factors strengthen students' mental health and buffer the effect of risk or adverse factors. Protective factors are built when students have opportunities to develop social-emotional skills and healthy relationships. The more protective factors in a student's life, the more likely they are to have positive mental health.

Protective factors that promote students' mental health include experiencing success in school; having support from a wide circle of family, friends, peers and school staff; and learning to understand, express and manage their emotions and behaviour.

Risk or adverse factors are attributes, characteristics or experiences that increase the likelihood of illness or injury. Risk factors for students' mental health may include events that challenge their social-emotional well-being such as unsupportive or negative interactions, isolation, learning delays, bullying, loss and grief, maltreatment including exposure to abuse (substance, physical, psychological, sexual), poverty, abandonment, malnutrition and transiency. Generally speaking, the more risk factors in a student's life, the higher the chances of them experiencing mental health difficulties. Protective factors lessen the effect or impact of risk or adverse factors.



Moving toward a strength-based approach

A strength-based approach shifts the focus from the prevention of specific problems to a more positive, holistic view of child and youth development. Interventions include a co-ordinated sequence of positive experiences and providing key developmental supports and opportunities. A strength-based approach emphasizes a student's existing strengths, capabilities and resources. This approach involves a different way of thinking about students and of interpreting the ways they cope with life challenges. It allows one to see opportunities, hope and solutions, rather than problems and hopelessness.

For more information on using a strength-based approach, see [Creating Strength-Based Classrooms and Schools](#) on the Alberta Mentoring Partnership website.

A strength-based approach focuses on:

- building resiliency;
- enhancing social-emotional learning; and
- supporting recovery.

Building resiliency

Students with positive mental health are resilient and better able to learn, achieve success and build healthy relationships.

Resiliency refers to the capacity of individuals to cope successfully with stress-related situations, overcome adversity and adapt positively to change. Resiliency is often compared to a rubber band with the capacity to stretch almost to its breaking point, but still able to spring back into shape.

Just as students come to school with varying skills in reading, they also have differing levels of resiliency. Supporting resiliency means helping students develop the skills and attitudes that will help buffer against negative life experiences. Students who experience mental health issues or mental illness may have been exposed to a number of adverse experiences that put them at risk.

Recent research suggests that resilient individuals have protective factors that help them handle difficult situations without becoming overwhelmed. These protective factors (and the related risk factors) are described in the following chart.

Protective and Risk Factors that Affect Mental Health⁸

	Protective Factors are conditions or attributes that protect mental health	Risk Factors (or adverse factors) that may threaten mental health
Individual Attributes	<ul style="list-style-type: none"> • Positive sense of self, confidence • Ability to solve problems and manage stress or adversity • Communication skills • Physical health and fitness 	<ul style="list-style-type: none"> • Negative sense of self • Emotional immaturity and limited ability to manage stress and solve problems • Difficulties communicating • Chronic health condition or frequent illness • Substance abuse
Social Circumstances	<ul style="list-style-type: none"> • Social support of family and friends • Healthy family interactions • Physical and economic security • Scholastic achievement 	<ul style="list-style-type: none"> • Loneliness, bereavement • Neglect, family conflict • Exposure to violence or abuse • Low income and/or poverty
Environmental Factors	<ul style="list-style-type: none"> • Equality of access to basic services • Social justice and tolerance • Social and gender equality • Physical security and safety 	<ul style="list-style-type: none"> • Limited access to basic services • Injustice and discrimination • Social and gender inequality • Exposure to war or disaster

⁸ adapted from http://www.who.int/mental_health/mhgap/risks_to_mental_health_EN_27_08_12.pdf

Research suggests that resilient individuals:

- feel appreciated and valued for their individual strengths and contributions;
- understand how to set realistic expectations for themselves and others;
- have effective problem-solving skills;
- use productive coping strategies when they encounter challenges;
- seek help from others when they need support; and
- experience positive support and interactions with peers and adults.⁹

⁹ Pan-Canadian Joint Consortium for School Health <http://www.jcsh-cces.ca/index.php/resources>

Enhancing social-emotional learning

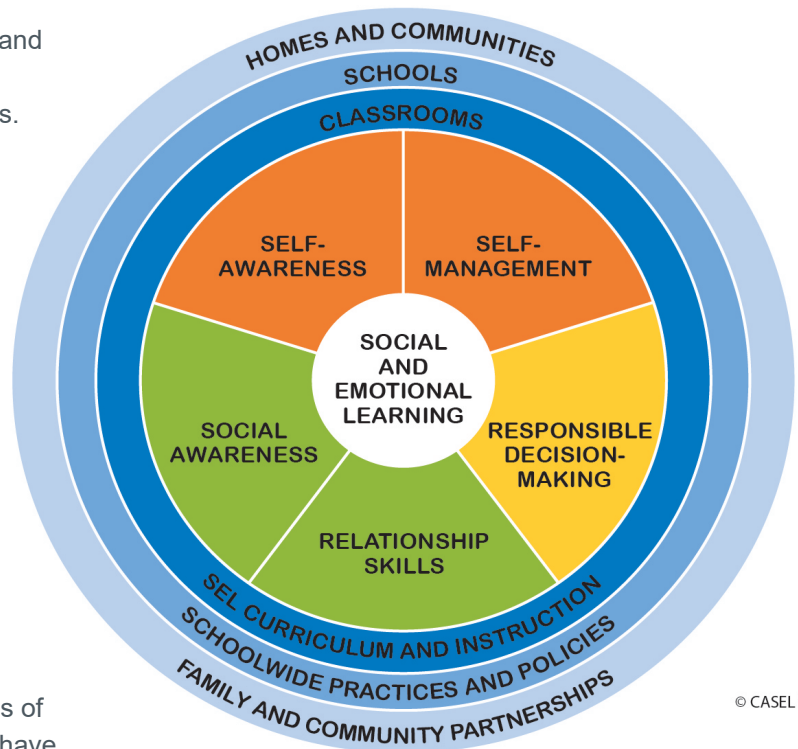
Social-emotional learning is the process of developing students' knowledge, attitudes and skills to manage emotions, build healthy relationships, set goals and make decisions.

The development of these skills is an important component of a welcoming, caring, respectful and safe learning environment. The Collaborative for Academic, Social and Emotional Learning (CASEL), has identified five connected sets of competencies:

- self-awareness;
- self-management;
- social awareness;
- relationship skills; and
- responsible decision-making.¹⁰

Students come to school with varying levels of social-emotional skills, similar to how they have varying skills in reading or mathematics. Teachers have many opportunities to teach social-emotional skills within the curriculum and across the school day. Learning these skills builds resiliency and helps buffer students from the potential results of negative experiences such as bullying, abuse, violence or poverty.

For more information on the importance of social-emotional learning, view Alberta Education's [video Social-Emotional Learning](#) and the related [conversation guide](#).



© CASEL 2017

10 CASEL <http://www.casel.org/what-is-sel/> ©CASEL. Social and Emotional Learning Core Competencies. 2015. <http://www.casel.org/social-and-emotional-learning/core-competencies/>

Supporting recovery

The concept of recovery in mental health refers to living a satisfying, hopeful and contributing life, even when mental health problems and mental illness cause ongoing challenges. Recovery is a process in which people living with mental health problems and mental illness are actively engaged in their own journey of well-being. A recovery-oriented approach builds on individual, family, cultural and community strengths and is supported by many types of supports, services and treatments.

A recovery-oriented approach:

- recognizes that each person is unique, with the right to determine their path toward mental health and well-being; and
- recognizes that we live in complex societies where many intersecting factors (biological, psychological, social, economic, cultural and spiritual) have an impact on mental health and well-being.

Recovery principles, including hope, self-determination and responsibility, can be adapted to the developmental stage and capacity of individual or groups of students, and to a full range of mental health problems and mental illnesses.

Implementing recovery-oriented practices will enhance health outcomes and quality of life for students living with mental health problems or mental illness.



Implementing a whole-school approach

Many Alberta schools are using a whole-school approach to create welcoming, caring, respectful and safe learning environments that support the positive mental health of students. A whole-school approach recognizes that all aspects of the school community impact students' mental health and well-being, and that learning and mental health are inextricably linked.

A [whole-school approach](#):

- is built on research, theories, strategies and practices that are evidence-informed (i.e., effectiveness is documented and credible);
- aligns with the specific needs and priorities of the school community;
- happens over a sustained period of time (i.e., full school year or longer);
- is embedded into classroom instruction and activities;
- is embedded into school-wide policies, practices and activities;
- is inclusive of all students in the school;
- builds student capacity;

- engages students in active learning and critical thinking;
- strengthens staff capacity;
- is supported by quality professional development;
- engages and supports family and community partnerships; and
- uses data collection and analysis to inform planning and evaluation of effectiveness.

There is an abundance of programming, services, speakers and campaigns available for promoting mental health, from both commercial distributors and not-for-profit agencies. However, many of these options provide an introduction only, and are often designed as one-time events. These types of programming can be challenging to adapt to local contexts and are often difficult to sustain and scale up over the longer term. However, some of these programming elements can be useful as part of an overall whole-school approach. When selecting additional components to supplement a whole-school approach, ensure programming is evidence-informed, uses a strength-based approach and is robust enough to contribute to behaviour change.

There are a number of evidence-informed frameworks, practices and strategies that schools are using as a whole-school approach to support positive mental health, including:

- [Comprehensive school health](#)
- [Social-emotional learning](#)
- [Response to intervention](#)
- [Trauma-informed practice](#)
- [Restorative practices](#)
- [Positive behaviour supports](#)
- [Mentoring](#)
- [Student advisories](#)
- [Peer networks](#)
- [Bullying prevention](#)
- [Service learning](#)



Designing a continuum of supports

Many Alberta schools use a pyramid of intervention approach (sometimes called response to intervention or multi-tiered supports) to address student learning and social-emotional needs. This approach offers a systematic way of providing a continuum of supports that range in type and intensity, depending on the individual needs of students. Student needs can shift and change over time and context, therefore supports and interventions must also be fluid and flexible.

A pyramid of intervention approach to supporting mental health is strength-based because it builds on two key understandings.

- With the right strategies and supports, all students can be successful learners and experience positive mental health and well-being.
- Identifying the most effective supports for students is a collaborative, problem solving activity.

A typical pyramid of intervention is organized around three levels of supports and interventions:

- universal (also called Tier 1 or primary prevention tier);
- targeted (also called Tier 2 or secondary prevention tier); and
- specialized (also called Tier 3 or tertiary prevention tier or intensive/individualized).

The metaphor of the pyramid also illustrates that to be effective, targeted and specialized levels of support need the solid base of universal supports. Enhancing universal supports will reduce the number of students requiring targeted supports, and enhancing targeted supports will lessen the number of students requiring specialized levels of supports. In addition, intervention typically starts with universal supports before moving to more intensive interventions.

Universal supports for all students

Universal supports are those strategies and supports incorporated into the learning environment for all students. This includes frameworks and strategies that contribute to welcoming, caring, respectful and safe learning environments such as, social-emotional learning, comprehensive school health, bullying prevention and positive behaviour supports.

Many universal supports that enhance positive mental health can be naturally embedded in day-to-day activities and practices across the school day. This includes practices such as showing compassion and support, demonstrating interest in students and incorporating opportunities for students to learn and practice social-emotional skills into classroom activities. Students, school

staff and community partners can also counter the stigma associated with mental health issues or mental illness through education that challenges myths and stereotypes.

All students benefit from universal supports, regardless of risk factors, and these supports are sufficient for 80 to 85 per cent of the student population to experience success.

Targeted supports and interventions for some students

Targeted supports are those strategies and interventions designed for the approximately five-to-15 per cent of the student population who require additional supports or interventions to be successful.

Students identified as being at risk for, or experiencing, mental health problems that affect their functioning at some level (home, school and/or community) may need targeted, short-term interventions focusing on skill-building in areas such as managing emotions, focusing attention, resolving conflict or problem-solving. There may be a need for referral to mental health supports or services that may be internal or external to the school.

Targeted strategies are proactive in addressing mental health problems that are typically reactions to life circumstances or events, and that are impacting a students' ability to function.

Specialized supports for a small number of students

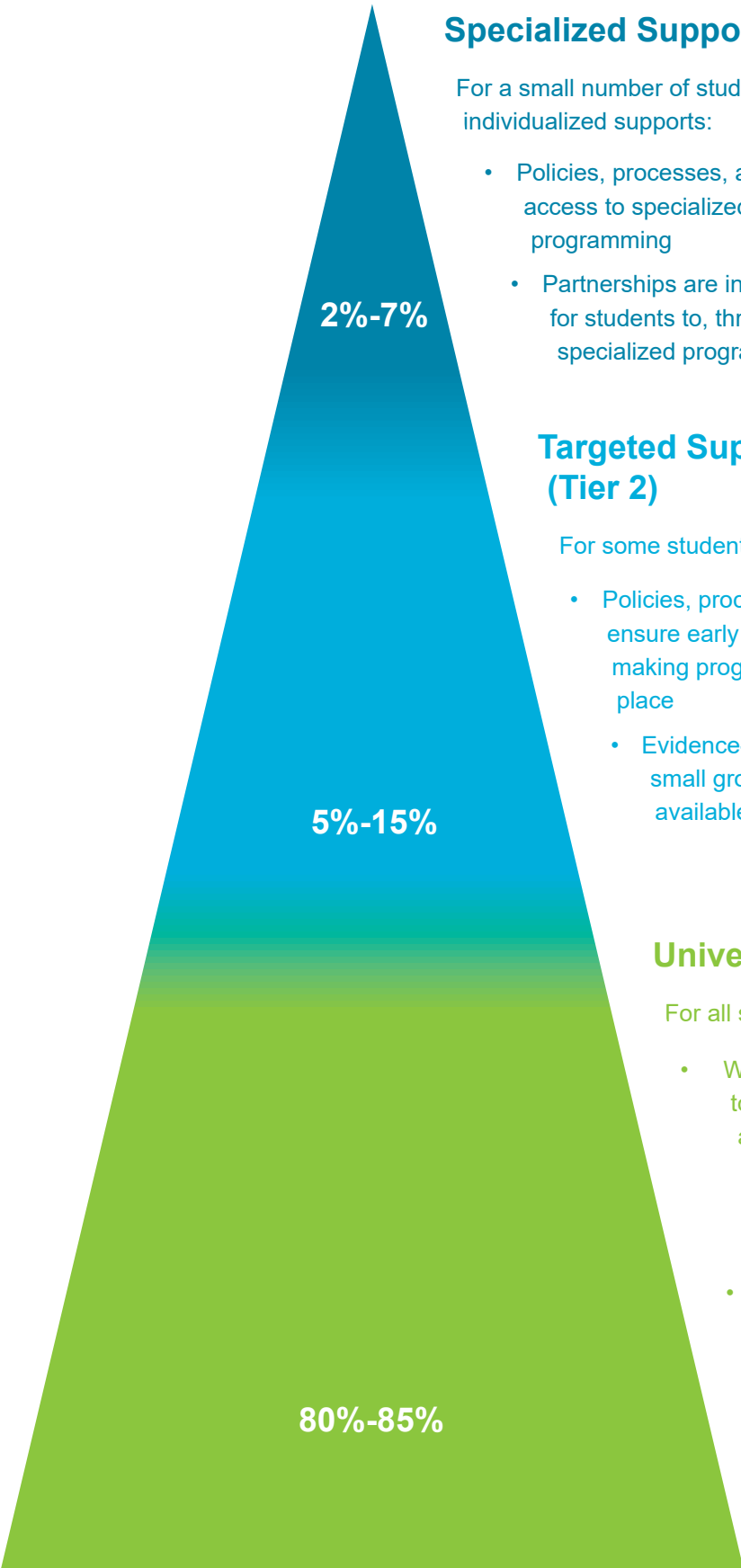
Specialized supports are supports and interventions for those two to seven per cent of students who require more intensive and individualized supports that focus on their particular mental health needs. This level of support may include access to specialized service providers, partners or training.

The complexity and intensity of significant mental health needs can challenge school staff's capacity and may sometimes require intervention services in a clinical setting. Educators often do the initial referral (as they are often the first to notice changes in a student's performance or behaviour) and the diagnostic and therapeutic role is taken on by a clinical service provider, either at the school authority or health-system level.

In these instances, the role of school staff is to support students as they move to, through and from community services.

Clear communication and the sharing of appropriate information between schools and community partners is a key component in the success of treatment planning. School administrators ensure that collaborations align with their school and school authority policies and practices, understand board protocols and procedures for information sharing and know the resources available both within the school and in the community.

When individual students are receiving specialized supports or services, the teacher's role is primarily to create a supportive classroom environment and to reinforce skill development and learning.



Specialized Supports and Services (Tier 3)

For a small number of students requiring intensive or individualized supports:

- Policies, processes, and pathways are in place to ensure access to specialized expertise, service providers and programming
- Partnerships are in place, including transition strategies for students to, through and from services, treatment and specialized programming

Targeted Supports and Interventions (Tier 2)

For some students requiring additional supports:

- Policies, processes and practices are in place to ensure early identification of students who are not making progress when universal supports are in place
- Evidence-informed, short-term, individual and small group supports and interventions are available within the school setting

Universal Supports (Tier 1)

For all students:

- Whole-school approaches are in place to create welcoming, caring, respectful and safe learning environments (e.g., comprehensive school health, positive behaviour supports, trauma-informed practice)
- Quality instruction responds to a diverse range of learning strengths, needs and challenges
- Social-emotional learning is part of instruction, classroom activities and school practices

Understanding pathways to service

A pathway to service is a continuum of supports from promotion to prevention, early identification, intervention and specialized services. It provides a seamless link between students in need of mental health supports and care providers and school staff who provide support to students. An integrated pathway to service includes processes for co-ordination and collaboration between schools and their communities (e.g. families, healthcare providers and policy makers).

The aim of a school-based pathway to service is to:

- promote positive mental health across environments;
- provide universal supports within the classroom and school settings;
- identify students in need of additional mental health supports;
- facilitate referrals to specialized school staff and/or mental health care providers; and
- support the student's recovery process in the school setting once interventions have been initiated.

The overall goal of a comprehensive pathway to service is to enhance collaboration and optimize the use of resources to ensure all students and their families have timely access to needed mental health supports and services.

To create this pathway to service, families, youth, school staff and service providers need a shared understanding of the route to, through and from mental health services in their community. This includes identifying and understanding the unique but complementary roles of each key partner who serves children and youth; most specifically, families, community mental health agencies, hospitals and other health care organizations, schools and young people themselves.

Understanding roles and responsibilities in pathways to, through and from service enhances partners' abilities to collaborate and ensure students who need mental health supports receive them in timely, sustainable and culturally-appropriate ways.

Identifying key roles for all partners

Creating an inclusive education system that supports the mental health needs of all students is a shared responsibility of government, school authorities, community partners and parents/guardians/families. Everyone has a role to play in creating welcoming, caring, respectful and safe learning environments. It will take a concerted and collective effort, as no single or prescribed set of strategies can address the mental health needs of all students.

Role of Government of Alberta

The role of government is to establish legislation, policy and standards; allocate funding; and support the development of programs, professional development and initiatives that contribute to the overall well-being of all Albertans.

Cross-ministry initiatives are areas of special importance to the government that, because of their nature, span across ministries and require a system-wide approach. There are times when various ministries need to work together and rely on the joint efforts of partners across government and the community. When government ministries work together to support the mental health of students, this collaborative effort enhances integration, communication, alignment and co-ordination across projects and initiatives.

Alberta Education

Alberta Education is committed to working with school authorities to provide students from Early Childhood Services (ECS) through Grade 12 with the instruction and supports essential for life-long success. One significant way the ministry is moving forward is through strategies that build an education system that is inclusive, strengthens capacity and shares responsibility with education partners for the well-being of all students. This is reinforced in both the [Inclusive Education Policy](#) and in the ministry's work to support First Nations, Métis and Inuit student success and Indigenous education for all students.

Alberta Education supports students, teachers and school and school authority leaders by:

- establishing direction for the delivery of educational programming through legislation, regulations, policy and standards;
- developing provincial curriculum;
- developing professional development resources; and
- allocating funding to school authorities.

The *School Act* places an emphasis on welcoming, caring, respectful and safe learning environments that respect diversity and nurture a sense of belonging and a positive sense of self.

Alberta Education is developing professional practice standards for teachers, principals and superintendents to emphasize and highlight the competencies needed to ensure excellence in teaching and leadership. Among the important outcomes arising from this work will be the guidance for teachers, principals, school authority leaders and superintendents in further developing their competencies needed to create inclusive learning environments, recognize and support student mental health, and establish the conditions under which the learning aspirations and the potential of First Nations, Métis and Inuit students will be realized.

As new provincial curriculum is being developed, personal growth and well-being will be emphasized and embedded across subject areas. To ensure that provincial curriculum meets its intended purpose, the development is guided by the consistent and holistic application of the principles and standards articulated in [The Guiding Framework for the Design and Development of Kindergarten to Grade 12 Provincial Curriculum \(Programs of Study\)](#). Future curriculum will also include Education for Reconciliation, which addresses First Nations, Métis and Inuit contexts.

Alberta Education is supporting a number of collaborative programming initiatives that contribute to students' mental health, including High School Redesign, Regional Collaborative Service Delivery and Comprehensive School Health.

Moving Forward with [High School Redesign](#) is a province-wide initiative focused on three outcomes: engaged students, high levels of achievement and quality teaching. It's about redesigning high

school to be more student-centred and responsive. Participating schools are using two key foundational principles that have significant implications for improving mental health: personalized learning and developing meaningful relationships.

[Regional Collaborative Service Delivery](#) (RCSD) is an approach to enable collaboration at local and regional levels. There are 17 RCSD regions across the province; each of the regional partners work collaboratively and share available resources to address regionally identified needs; co-ordinate and leverage systems; build system capacity; and plan for sustainability.

[Comprehensive School Health](#) (CSH) is a whole school approach that supports healthy school communities by addressing four distinct but related components: social and physical environments; teaching and learning; policy; and partnership and services. Education encourages schools to use a CSH framework to support improved student health and learning outcomes. This internationally recognized framework helps schools to apply knowledge through a broad spectrum of programs, policies, activities and services in schools and surrounding communities. CSH initiatives funded by Health and Education focus on strategies that support healthy eating, active living, and positive social environments, including positive mental health and healthy relationships.

Alberta Education also supports school authorities through the evaluation of accountability measures to help school authorities analyze their results and identify areas needing improvement. The [Accountability Pillar](#) includes a Safe and Caring Measure that looks at how teachers, parents and students assess the learning environment as it relates to feeling safe and cared for—an important requisite for positive mental health.

Alberta Children's Services

Children's Services leads the work of child care, intervention, early childhood development, foster and kinship care, adoption, and improvements for children and youth in the province.

Children's Services supports the mental well-being of children, youth and families by developing policy and programs and delivering services that:

- Promote child, youth and family development focusing on social, physical, emotional, cognitive and spiritual well-being in order to support children attaining their developmental potential.
- Promote caregiver capacity building to strengthen caregivers' and parents' skills and knowledge to enable them to create safe, responsive and nurturing environments and support healthy child development.
- Promote social connections and support to promote positive connections between infants, children, youth, parents, families, caregivers and communities.
- Focus on the prevention of risk factors and the promotion of protective factors to enhance mental well-being for all children, youth and families.

Alberta Community & Social Services

The Ministry of Community and Social Services helps to build strong families and inclusive, supportive communities for all Albertans. The ministry's integrated delivery approach makes it easier for Albertans to access the services and programs that enrich their lives and help them reach their full potential. With a focus on family and community supports and services in the areas of income, employment, homelessness, disabilities supports, and family violence prevention, Community and Social Services helps some of Alberta's most-vulnerable populations achieve social and economic independence.

Alberta Health

The goal of Alberta Health is to ensure that all Albertans (including students and their families) receive the right health care services, at the right time, in the right place, provided by the right provider with the right information.

As part of the commitment to supporting mental health in schools, Alberta Health sets priorities and allocates resources in the health care system. A key priority is improving the connection and integration of mental health services across health and community partners. This includes:

- enhancing connections between primary health care, schools and addiction and mental health to foster improved service; and
- developing pathways to support co-ordination within and transition between care and community settings (including schools), as well as between sectors.

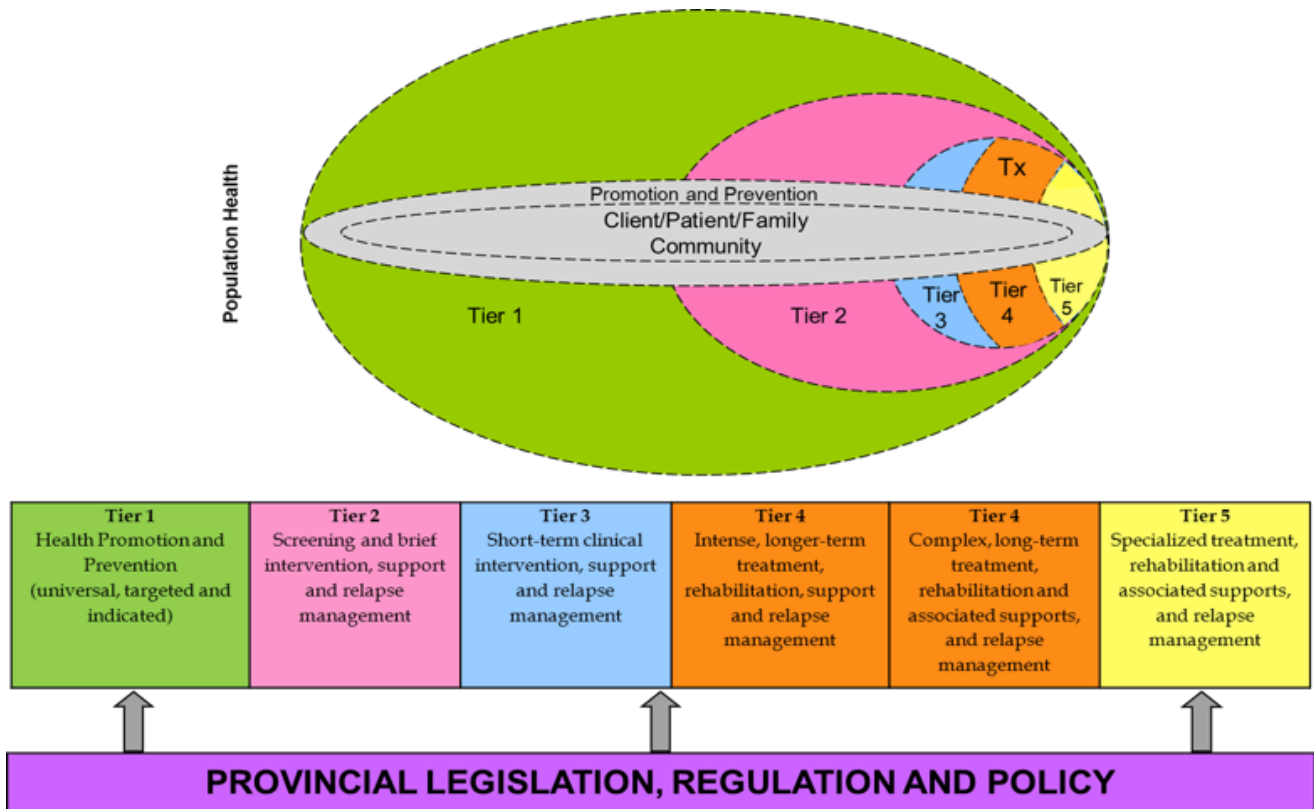
Alberta Health Services

Alberta Health Services is the operational component of Alberta’s health care system that provides addiction and mental health service to individuals and communities through zone programs and initiatives. Alberta Health Services works with zone partners to determine local service needs. Alberta Health Services is currently providing promotion, prevention and clinical intervention services in collaboration with school authorities across the province.

At the provincial level, Alberta Health Services uses an integrated service model to describe the continuum of addiction and mental health services and supports for children, youth and their families. This includes:

- health promotion and prevention;
- screening, brief intervention, support and relapse management;
- short-term clinical intervention support and relapse management;
- intense long-term support; and
- specialized supports and treatment.

Alberta Health Services Addiction and Mental Health Integrated Service Delivery Model



Alberta Justice and Solicitor General

The Young Offender Branch promotes positive behaviour changes for young people in custody using a trauma-informed lens, while preparing them for reintegration to the community. Educational and day programs are offered to meet academic and instructional needs of young people. School programs are offered through a local school board or educational institution. School programs provide for small classes with attention to individual needs and offer a full range of programs from elementary to high school, including remedial courses. Medical and mental health services are provided to all young people in correctional centres. These services include nursing, medical, dental, psychological and psychiatric care. Referrals are made to community resources where appropriate. Counselling programs include individual and group counselling as well as referrals to in-centre and community professional resources.

In addition, Alberta Health Services, Addiction and Mental Health, the Alberta Provincial Forensic Psychiatry Program and other agencies provide programs within centres, some of which are continued in the community upon release. Recreational programs provide an opportunity for physical and social development and foster the young offender's interest in activities that can be pursued once they are released into the community. Life skills programs are designed to teach young offenders skills that improve their developmental abilities, which enable them to make more responsible decisions and allow them to successfully reintegrate back into the community.

Indigenous services are provided through Aboriginal organizations representing the First Nations, Métis, and individual bands within the province. Elders visit young offender correctional facilities to provide spiritual guidance, personal counselling, instruction in sweet grass ceremonies and sweat lodges, and promote cultural awareness.

Research and Post-Secondary Institutes

Planning programming and interventions to support mental health in schools requires access to credible evidence and relevant data that can inform practice and decision-making. Alberta's universities, colleges, technical institutes, research institutes and program evaluators have produced and continue to communicate knowledge that is relevant for policy and programming development.

Collaboration between and among school authorities and research/post-secondary institutes ensures successful transitions for students from the K-12 school system into a university, college, technical institute or apprenticeship program.

To support school authorities and community partners in better responding to the mental health needs of students, research and post-secondary institutes need continued opportunities to contribute to and participate in:

- meaningful and relevant research;
- effective partnerships;
- collaborations; and
- timely knowledge exchange.

Community partners and service providers

To support the promotion of positive mental health in schools, community partners and service providers:

- provide information, support and advice to schools on promotion and prevention activities related to mental health and well-being;
- provide advice on universal supports for the classroom that will support both learning and positive mental health of all students; and
- partner with schools to offer programming that increases resiliency and promotes social-emotional learning.

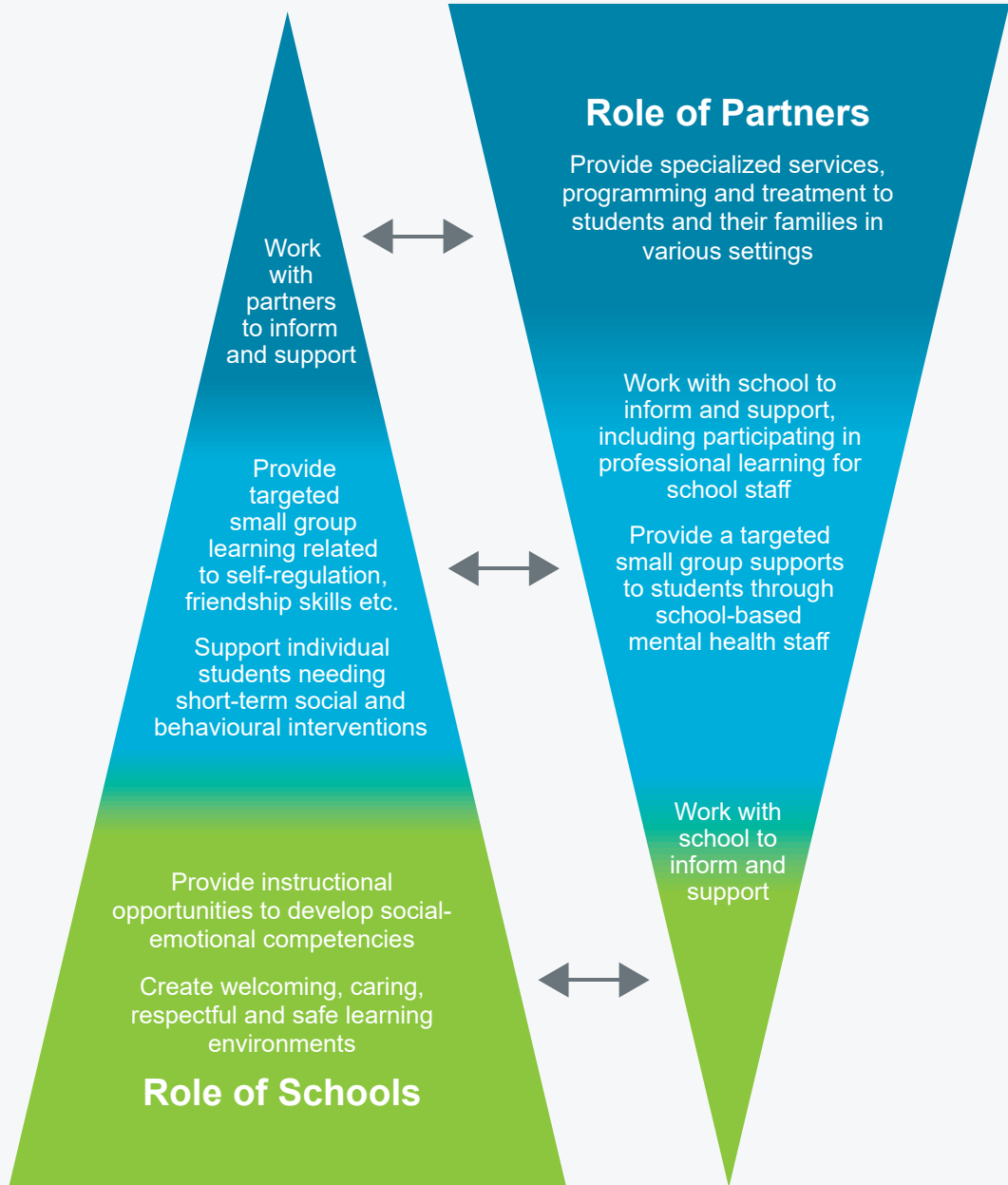
To support school-based early intervention efforts, community partners and services providers:

- provide information, support and advice to schools on early identification of mental health concerns;
- provide small-group and targeted interventions, on an as-needed basis;
- work with schools to clarify local pathways to service; and
- provide crisis response when there are significant school or community events that could negatively impact the mental health of students and school staff.

To support the specialized mental health needs of individual students, community partners and service providers:

- provide assessment and coordinated intervention and treatment for individual or small groups of students;
- ensure that procedures are in place to share relevant information from and with school staff;
- share outcomes and recommendations with families and school teams; and
- support schools in understanding and responding to the learning and transitional needs of individual students with significant mental health needs.

Shared Responsibility for Supporting Mental Health of all Students



Collective vision for supporting all students
Collaborative conversations
Shared understanding of one another's mandates

School and school authority leaders

In order to enable all students to achieve their potential and experience positive mental health and well-being, school and school authority leaders have an important role in fostering collaboration, engagement and empowerment of all partners in the educational system.

To support the promotion of positive mental health, school and school authority leaders can do the following:

- Support inclusive learning environments.
- Create welcoming, caring, respectful and safe learning environments for students, their families and school staff.
- Demonstrate a commitment to the health and well-being of all students, and to acting in their best interests.
- Ensure school staff gain a knowledge and understanding of mental health.
- Work with staff, students and their families to reduce the stigma associated with mental health issues and mental illness.
- Help identify, implement and evaluate the effectiveness of school-based, universal supports that promote positive mental health.
- Provide guidance on enhancing social-emotional learning through explicit and systematic instruction, as well as strategies for reinforcing social-emotional competencies in cross-curricular instruction and throughout classroom and school-wide activities.
- Align school resources and strengthen the capacity of the school community to support

the learning and well-being of First Nations, Métis and Inuit students.

- Enable all school staff and students to gain a knowledge and understanding of, and respect for, the histories, cultures, languages, contributions, perspectives, experiences and contemporary contexts of First Nations, Métis and Inuit people.
- Pursue opportunities and engage in practices to facilitate reconciliation within the school community.
- Build positive working relationships with students, teachers, support staff, families, school councils and community partners so mental health needs can be identified, discussed and responded to.
- Support school staff in building/strengthening capacity in responding to diverse learning needs.

To support early intervention related to identifying and addressing mental health needs, school and school authority leaders can do the following:

- Ensure school staff gain a knowledge and understanding of mental health concerns that students may experience.
- Support classroom teachers and other school staff in identifying targeted interventions to enhance mental health for students at risk.
- Engage school staff in school-wide planning to support students' mental health needs.

To support the specialized mental health needs of individual students, school and school authority leaders can do the following:

- Become familiar with available community resources that can provide additional mental health supports to students and their families.
- Build collaborative relationships with community partners to ensure students and their families receive the additional mental health supports they need.

Classroom teachers

Teachers need to work together with other school staff to help all students learn about and experience positive mental health. Teachers do this by providing inclusive learning environments in which diversity is respected and all students are welcomed, cared for, respected and feel safe.

To support positive mental health in the classroom, teachers can do the following:

- Provide appropriate universal and targeted strategies and supports to address students' strengths, learning challenges and areas for growth.
- Foster equality and nurture a sense of belonging and a positive sense of self.
- Look for teaching and learning opportunities to enhance resiliency, social-emotional competencies and other mental health literacies.
- Communicate high expectations and the belief that every student can learn and be successful.
- Have an awareness of and be able to respond to the emotional and mental health needs of

students.

- Provide appropriate support within the framework of a welcoming, caring, respectful and safe learning environment when they recognize that a student may be struggling with mental health difficulties.
- Recognize and respond to specific learning needs of individual or small groups of students, including providing direct instruction related to building resiliency and enhancing social-emotional competencies.
- Collaborate with service providers and other specialists to design and provide targets and specialized supports.
- Use classroom management strategies that promote positive, engaging and supportive learning environments.
- Incorporate students' personal and cultural strengths into teaching and learning.
- Support student learning and well-being by engaging in collaborative, whole-school approaches to capacity building in First Nations, Métis and Inuit education.
- Build positive relationships with students, families, peers and others in the school and local community to support student learning and well-being.
- Learn about the pathways to service in their school authority (e.g., referral processes for school, district and community resources) so when appropriate, they can help connect students and their families to needed supports and services (e.g., mentors, coaching, counselling or other mental health services).
- Support students' learning and well-being as they transition to, through and from specialized mental health services and programming.

Parents/Guardians/ Families

To support the mental health of their child, parents/guardians play a key role. They are a part of fostering collaboration between schools, communities and their own families. To support the mental health of their child/youth, parents or guardians can do the following:

- support positive mental health habits at home;
- have an awareness of signs of mental health concerns;
- support their child/youth in obtaining the supports needed;
- provide information to school staff and service providers that support their child/youth;
- support communication between home, school and community;
- collaborate with service providers and school staff; and
- engage in service when and to the extent that is appropriate.

Collective impact and collaborative practices

One of the most important social policy perspectives to emerge in recent years is the awareness that no single institution can create all the conditions that children and youth need to flourish. In order to create lasting solutions to social issues on a large-scale, organizations need to co-ordinate their efforts and work together.

Collective impact is a structured approach to making collaboration work across government, school authorities and community partners. It is the

commitment of a group of partners from different sectors to a common agenda for addressing important social issues, such as improved mental health outcomes for students.

In a collaborative approach to supporting mental health, all partners are committed to creating supportive and inclusive learning environments and are invested in the success and well-being of all students.

The term collaborative practices, as used by Alberta Education, describes the many kinds of activities that contribute to a culture that ensures students receive what they need to overcome challenges and experience success in school. In a collaborative culture, schools, school authorities and their partners work together to provide supports and services that are timely, responsive and culturally sensitive.

Putting collaborative practices into action:

- strengthens relationships among education partners;
- reduces overlap in services;
- reduces gaps in supports and services;
- focuses on strengths of students and their families;
- promotes optimism and enhances motivation; and
- increases the school community's capacity to respond to the mental health needs of all students.

To learn more, see the [Working Together Toolkit](#) on the Alberta Education website.

For further information on collective impact view the video [Tackling Complex Social Problems through Collective Impact](#).

Websites

Websites in the order in which they appear in this document

1. Alberta Regional Professional Development Consortia and the Alberta Teachers' Association: A Guide to Support Implementation: Essential Conditions (2010) - <http://essentialconditions.ca/>
2. School Mental Health ASSIST: Planning for Sustainable Practices in School Mental Health and Well-Being (2016) - <https://smh-assist.ca/blog/2016/01/22/planning-for-sustainable-practices-in-school-mental-health-and-well-being/>
3. Alberta Education: Welcoming, Caring, Respectful and Safe Learning Environments - <https://education.alberta.ca/safe-and-caring-schools/>
4. Alberta Education: High School Redesign - <https://education.alberta.ca/moving-forward-high-school-redesign/moving-forward-with-high-school-redesign-1/>
5. Alberta Education: Regional Collaborative Service Delivery (RCSD) - <https://education.alberta.ca/regional-collaborative-service-delivery/>
6. Alberta Education: Comprehensive School Health - <https://education.alberta.ca/comprehensive-school-health/>
7. Alberta Health Services: Mental Health Capacity Building - <http://www.albertahealthservices.ca/amh/Page2754.aspx>
8. Alberta Education: Ministerial Order on Student Learning: Goals and Standards Applicable to Education in Alberta (#001/2013) - <https://education.alberta.ca/policies-and-standards/student-learning/everyone/ministerial-order-on-student-learning/>
9. Alberta Education: Inclusive Education Policy - <https://education.alberta.ca/inclusive-education/policy/>
10. Alberta Education: Guide to Education - <https://education.alberta.ca/guide-to-education/the-guide-to-education/>
11. Alberta Education: School Act - <https://education.alberta.ca/legislation-and-regulations/school-act/?searchMode=3>
12. United Nations Declaration on the Rights of Indigenous Peoples - <https://www.aadnc-aandc.gc.ca/eng/1309374407406/1309374458958>
13. Alberta Education: First Nations, Métis and Inuit- <https://education.alberta.ca/first-nations-m%C3%A9tis-and-inuit-education/supporting-student-success/>
14. CAMH Health Promotion Resource Centre - Promoting Mental Health: Finding a Shared Language - <https://vimeo.com/130580621>
15. Alberta Education: Respectful and positive language Changing How We Talk About Disabilities video

and conversation guide - <https://education.alberta.ca/inclusive-education/inclusive-education/everyone/video-series/> <https://education.alberta.ca/media/464636/video-discussion-guide-2-talk-about-disabilities.pdf>

16. Alberta Family Wellness Initiative: How Brains are Built - <http://www.albertafamilywellness.org/resources/video/how-brains-are-built-core-story-of-brain-development>
17. Alberta Mentoring Partnership: Creating Strength-Based Classrooms and Schools - http://albertamentors.ca/wp-content/uploads/2013/10/SB_for_Schools_and_Classrooms.pdf
18. Alberta Education: Social-Emotional Learning - <https://education.alberta.ca/social-emotional-learning/what-is-social-emotional-learning/everyone/social-emotional-learning-video/> <https://education.alberta.ca/media/3069624/social-emotional-learning-conversation-guide-002.pdf>
19. Alberta Education: Whole School Approach - <https://education.alberta.ca/safe-and-caring-schools/whole-school-approach/everyone/whole-school-approach/>
20. Alberta Education: The Guiding Framework for the Design and Development of Kindergarten to Grade 12 Provincial Curriculum (Programs of Study)- <https://education.alberta.ca/media/3273037/guiding-framework-oct-6-2016.pdf>
21. Alberta Education: The Accountability Pillar - <https://education.alberta.ca/accountability-pillar/>
22. Alberta Education: Working Together Toolkit -<https://education.alberta.ca/collaborating-to-support-students/working-together-toolkit/everyone/viewdownload-the-toolkit/>
23. Tamarack Institute: Tackling Complex Social Problems through Collective Impact - <http://www.tamarackcommunity.ca/collectiveimpact>

Key Conditions for Supporting Mental Health in Schools: A planning and implementation tool

This template, developed by the Calgary Regional Consortium in collaboration with a number of school authority partners, is a planning and implementation tool for school and school authority leaders to:

- inform collaborative conversations, and
- plan for supporting students' mental health.

Successful planning and implementation is possible when education stakeholders work collaboratively to address the following six key conditions:

1. Vision, Leadership and Commitment
2. Communication and Shared Language
3. Data, Evidence and Research
4. Roles, Responsibilities and Processes
5. Community, Collaboration and Engagement
6. Systematic Professional Learning

These conditions are inter-connected and need to be considered both individually and as a whole. Recognizing the diversity that exists within school communities and student populations, this template does not prescribe a specific approach to implementation planning. Rather, it offers guiding questions, based on implementation science, that intentionally, systematically and explicitly address the six key conditions as they relate to planning for mental health in schools.

These questions provide a context for considering local needs, existing community partnerships, available resources and the work already underway as part of three-year education plans and other local and district initiatives. The questions are a starting point for exploring the strategies and actions schools and their partners can take to support students' mental health.

Actions to support implementation happen at all levels of the system. Creating a shared vision enables partners to identify what success would look like and make decisions about what steps are necessary for moving forward.

How to use the planning and implementation tool:

This tool is designed to support collaborative conversations related to each of the six conditions. Once a working committee responsible for mental health planning in a local school or school authority has been identified, the rating scales and guiding questions will facilitate a needs assessment and planning process for them to successfully develop a mental health plan of action. To use this tool:

1. Review the overarching statement at the top of each key condition.
2. Use the “Where Are We Now?” section to reflect on strengths and gaps related to each condition by assigning a value between 1 and 4 to each statement.
 - 1 = Just beginning
 - 2 = On the road
 - 3 = Getting closer
 - 4 = Keep it up!
3. List the evidence to support your rating in the “How do we know?” column.
4. Use the ratings and observations generated by the review questions to guide ongoing conversations and inform action planning within your school and/or school authority and with partners.
5. As the plan moves forward to implementation, build in intervals for the planning committee to review and revise the action plan through revisiting all aspects of the Key Conditions for Supporting Mental Health in Schools: planning and implementation tool.

Condition #1: Vision, Leadership and Commitment

When school and school authority leaders demonstrate a shared vision and commitment to mental health in schools, this vision is evident in school authorities' policies, plans and procedures, and most importantly, in the culture and practices of schools and classrooms.

Where Are We Now?

What's our current state?

Creating the vision

We engaged members throughout the school community to create a vision for supporting mental health in our school(s).

1-Just beginning 2-On the road 3-Getting closer 4-Keep it up!

Aligning the vision

Our vision for mental health in schools aligns with the three-year education plan and other key initiatives in our school(s)..

1-Just beginning 2-On the road 3-Getting closer 4-Keep it up!

Commitment to vision

School and school authority leaders are working to support the conditions and resources necessary to enhance the mental health of all staff and students, and are clearly communicating this commitment to the school community.

1-Just beginning 2-On the road 3-Getting closer 4-Keep it up!

How do we know?

- How do we know this condition is being addressed?
- What strategies, actions and/or processes are we currently using to address this condition?
- What results and outcomes are evidence of success?

Guiding questions:

- To what extent do school and school authority leaders understand and support the key conditions for mental health in schools?
- What school authority and school-based resources are being used to support mental health and well-being in schools?
- How are school and school authority leaders communicating with school staff to build understanding and ensure implementation of strategies and actions related to mental health and well-being in schools?
- How are school and school authority leaders promoting staff mental health and well-being?
- How are students, families, school staff, school and school authority leaders, trustees and community partners engaged to help build an understanding of local strengths, needs and priorities related to mental health in schools?

Notes:

Who is Responsible?

Condition #1: Vision, Leadership and Commitment

When school and school authority leaders demonstrate a shared vision and commitment to mental health in schools, this vision is evident in school authorities' policies, plans and procedures, and most importantly, in the culture and practices of schools and classrooms.

Where Do We Go From Here?

Actions for moving forward:

Who is responsible?

Condition #2: Shared Language and Communication

Building a shared language facilitates communication and collaborative planning between school and school authority staff, between schools and students and their families, and between schools and community partners. A shared language can also contribute to minimizing the stigma associated with mental health and mental illness. Thoughtful and ongoing communication within school authorities, and with all stakeholders, is vital to sustaining support for the vision, strategies and initiatives to enhance the mental health of all students.

Where Are We Now?

What's our current state?

Shared language

We have a shared language around mental health and mental illness and are using this shared language for communicating key messages and strategies.

1-Just beginning 2-On the road 3-Getting closer 4-Keep it up!

Reducing stigma

School leaders and staff are working with staff and students and their families to reduce the stigma associated with mental health and mental illness.

1-Just beginning 2-On the road 3-Getting closer 4-Keep it up!

Connection to learning

School staff understand the connection between positive mental health, brain development and learning.

1-Just beginning 2-On the road 3-Getting closer 4-Keep it up!

How do we know?

- How do we know this condition is being addressed?
- What strategies, actions and/or processes are we currently using to address this condition?
- What results and outcomes are evidence of success?

Guiding questions:

- How are we creating and promoting a shared language and understanding around mental health and mental illness?
- What key messages and strategies are identified for the coming year? How are we communicating these messages and strategies to school and school authority leaders, school staff, and community partners?
- How are we communicating our vision of mental health to students and their families, including the importance of having universal to specialized supports? What tools and strategies are we using to communicate?
- How are we communicating our vision of mental health to our stakeholders and community partners, including the importance of a continuum of supports (universal, targeted, and specialized)?
- How are we working with students, families and school staff to reduce the stigma associated with mental health and mental illness?
- To what extent do school staff understand the connection between mental health, brain development, and learning? How are these understandings reflected in school policies and practices?
- How are school staff supporting students in developing an understanding of the connection between positive mental health and learning?

Notes:

Who is Responsible?

Condition #2: Shared Language and Communication

Building a shared language facilitates communication and collaborative planning between school and school authority staff, between schools and students and their families, and between schools and community partners. A shared language can also contribute to minimizing the stigma associated with mental health and mental illness. Thoughtful and ongoing communication within school authorities, and with all stakeholders, is vital to sustaining support for the vision, strategies and initiatives to enhance the mental health of all students.

Where Do We Go From Here?

Actions for moving forward

Who is responsible?

Condition #3: Data, Evidence and Research

All mental health strategies and actions need to be data-informed and based on credible research. As part of a continuous quality improvement cycle, ongoing data collection provides snapshots of success, identifies barriers, and helps inform decisions about next priorities. Research and evidence-informed practices, based on local needs focuses on prevention and promotion and are embedded in the instruction and daily activities of classrooms.

Where Are We Now?

What's our current state?

Data-informed planning

We have reviewed school authority, community and provincial data to help identify priorities and facilitate planning related to students' mental health and well-being.

1-Just beginning 2-On the road 3-Getting closer 4-Keep it up!

Collecting data to understand progress

We have identified the kinds of data we will collect to measure progress related to enhancing students' mental health and well-being.

1-Just beginning 2-On the road 3-Getting closer 4-Keep it up!

Evidence informed practice

Research and evidence-informed strategies and interventions to support mental health are in place in classrooms and schools.

1-Just beginning 2-On the road 3-Getting closer 4-Keep it up!

How do we know?

- How do we know this condition is being addressed?
- What strategies, actions and/or processes are we currently using to address this condition?
- What results and outcomes are evidence of success?

Guiding questions:

- Which local, provincial, national and/or international sources were used to inform the development of our vision for mental health in schools?
- What process did we use to review school authority, community and provincial data to help to identify areas of focus?
- How are we working to better use student voice to inform planning for mental health supports? What is our process for reviewing and sharing findings from a variety of sources that may be helpful in understanding student voice?
- How are we gathering data on the effectiveness of strategies and actions related to improving mental health outcomes and supports?
- What are the related measures in the three-year education plan and other school and school authority initiatives? What other measures and observations will we accept as evidence that our actions and strategies are positively affecting students' mental health and well-being?
- How are we ensuring that schools use sound measurement tools and that school staff understand and use ethical guidelines for data collection?
- How are we ensuring school and community stakeholders are engaged in the ongoing assessment of the effectiveness of strategies and actions related to improving mental health outcomes and supports?
- To what extent are evidence-informed whole-school approaches being implemented to support student mental health?
- To what extent are research-based and evidence-informed universal, targeted and specialized supports being used in schools to support students' mental health?

Notes:

Who is responsible?

Condition #3: Data, Evidence and Research

All mental health strategies and actions need to be data-informed and based on credible research. As part of a continuous quality improvement cycle, ongoing data collection provides snapshots of success, identifies barriers, and helps inform decisions about next priorities. Research and evidence-informed practices, based on local needs focuses on prevention and promotion and are embedded in the instruction and daily activities of classrooms.

Where Do We Go From Here?	
Actions for moving forward	Who is responsible?

Condition #4: Roles, Responsibilities and Processes

The mental health and well-being of students is the responsibility of all education and community partners. Clearly developed roles, responsibilities and processes enable collaboration and joint planning, and increase the schools' capacity to provide timely and effective mental health supports for students who require them.

Where Are We Now?

What's our current state?

Clarity of roles within the school authority

The school and school authorities' roles and responsibilities regarding students' mental health and well-being are identified and clearly communicated.

1-Just beginning 2-On the road 3-Getting closer 4-Keep it up!

Understanding pathways to, through, and from services

School staff, students and their families, and community partners understand pathways to, from, and through services for students who require additional mental health supports and services.

1-Just beginning 2-On the road 3-Getting closer 4-Keep it up!

School-based crisis response plan

School and school authority crisis response plans exist and articulate processes and practices for responding to traumatic events.

1-Just beginning 2-On the road 3-Getting closer 4-Keep it up!

How do we know?

- How do we know this condition is being addressed?
- What strategies, actions and/or processes are we currently using to address this condition?
- What results and outcomes are evidence of success?

Condition #4: Roles, Responsibilities and Processes

The mental health and well-being of students is the responsibility of all education and community partners. Clearly developed roles, responsibilities and processes enable collaboration and joint planning, and increase the schools' capacity to provide timely and effective mental health supports for students who require them.

Guiding questions:

- Are the descriptions of the roles and responsibilities within the school authority regarding student mental health and well-being clearly articulated and communicated?
- What level of clarity is there about the roles of teachers, support staff, school and school authority leaders, families, and community partners in relation to:
 - *Universal supports* – e.g., welcoming, caring, respectful and safe learning environments; quality instruction, social-emotional learning, mental health promotion
 - *Targeted supports* – e.g., screening, early interventions, short-term small group interventions
 - *Intensive/Individualized* – e.g., access to specialized expertise, community service providers and treatment programs?
- To what extent do students and families understand their roles and responsibilities in supporting mental health and well-being in schools?
- To what extent do school and school authority leaders understand the community mental health system and pathways to service? Can they articulate the role of the school authority, and school authority professionals, within a continuum of supports for mental health in schools?
- When working with community partners, how do school authority leaders ensure the school authority is represented and actively participating, and that the roles and responsibilities of schools are clearly articulated?
- What structures and relationships are in place to facilitate success for students who require mental health supports and service beyond what the school authority can provide?
- To what extent do school staff, students, families and community partners understand pathways to, from, and through services?
- To what extent do school staff, students, families and community partners understand the role they play in supporting students who require additional mental health supports and services?
- What practices and protocols are in place for the identification of school-based mental-health promotion, prevention, and addictions prevention activities, programming and resources?
- What practices and protocols are in place for the identification of school-based youth and family engagement and positive mental health strategies?
- What school-based practices and protocols are in place for suicide prevention, risk management and post-intervention?
- How are community partners engaged in the development and sharing of school-based youth and family engagement strategies, mental health strategies, and protocols for suicide prevention, risk management and post-intervention?
- To what extent has consideration been given to the role of community partners in school-based crisis response plans?
- In what ways do crisis response plans support positive mental health outcomes for students and the school community after traumatic events?

Notes:

Who is responsible?

Condition #4: Roles, Responsibilities and Processes

The mental health and well-being of students is the responsibility of all education and community partners. Clearly developed roles, responsibilities and processes enable collaboration and joint planning, and increase the schools' capacity to provide timely and effective mental health supports for students who require them.

Where Do We Go From Here?

Actions for moving forward

Who is responsible?

Condition #5: Community Collaboration and Engagement

Effective and efficient partnerships are built on trust, understanding and respect.

Where Are We Now?

What's our current state?

Collaboration for best practices

School and school staff collaborate with community partners to identify best practices related to mental health supports across the continuum.

1-Just beginning 2-On the road 3-Getting closer 4-Keep it up!

Communication for understanding

We are effectively communicating with school staff, students and their families, and community partners about the importance of collaborating to support mental health in schools.

1-Just beginning 2-On the road 3-Getting closer 4-Keep it up!

How do we know?

- How do we know this condition is being addressed?
- What strategies, actions and/or processes are we currently using to address this condition?
- What results and outcomes are evidence of success?

Guiding questions:

- How are schools engaging community partners in ongoing conversation about best practices related to universal, targeted and individualized mental health supports?
- How are we developing the respectful and trusting relationships necessary for engaging in conversations about mental health and mental illness with school staff, students and their families?
- To what extent have we developed respectful and trusting relationships with community partners, including those who serve specific populations?
- To what extent do we understand the mandate of our community partners?
- To what extent do our community partners understand the mandate of schools?
- How are we communicating with school staff, students and their families, and community partners about collaborating to support mental health in schools?

Notes:

Who is responsible?

Condition #5: Community Collaboration and Engagement

Effective and efficient partnerships are built on trust, understanding and respect.

Where Do We Go From Here?

Actions for moving forward:

Who is responsible?

Condition #6: Systematic Professional Learning

Planned and ongoing professional development at all levels of the system ensures that all school and school authority staff have the knowledge, skills, and attitudes to promote mental health and well-being in a way that is consistent with their role.

Where Are We Now?

What's our current state?

Planning for professional learning

Professional learning opportunities align with our vision for mental health, build on research-informed knowledge, and are inclusive and respectful of community diversity.

1-Just beginning 2-On the road 3-Getting closer 4-Keep it up!

How do we know?

- How do we know this condition is being addressed?
- What strategies, actions and/or processes are we currently using to address this condition?
- What results and outcomes are evidence of success?

Guiding questions:

- Have we planned our professional learning in ways that ensure all levels of the system are supported with learning opportunities related to students' mental health and well-being?
- To what extent are professional learning opportunities aligned with our vision of a strength-based approach that is inclusive and respectful of the diversity in our community?
- To what extent are professional learning opportunities based on research-informed knowledge and evidence-informed whole-school approaches?
- How are we engaging community partners in professional learning collaborations?
- How do we ensure professional learning opportunities go beyond knowledge sharing (e.g., one-off events with outside experts) and are ongoing, job-embedded and encourage deep learning?
- How do we support the professional learning needs of district mental health professionals who serve our students with significant and/or complex mental health needs?
- What strategies and supports are available to support educational staff in maintaining their own mental health and well-being?

Notes:

Who is responsible?

Condition #6: Systematic Professional Learning

Planned and ongoing professional development at all levels of the system ensures that all school and school authority staff have the knowledge, skills, and attitudes to promote mental health and well-being in a way that is consistent with their role.

Where Do We Go From Here?

Actions for moving forward:

Who is responsible?

