



A Review of Mental Health Promotion Interventions in Schools

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Abstract

The aim of this paper is to review current evidence-based research of mental health promotion interventions in schools and examine the reported effectiveness to identify those interventions that can support current policy and ensure that limited resources are appropriately used. The prevalence of mental disorders amongst children and adolescents is an increasing global problem. Schools have been positioned at the forefront of promoting positive mental health and well-being through implementing evidence-based interventions.

Keywords: Mental health promotion, Children, Schools, Interventions.

Introduction

This is because of the amount of time young people spend in this environment. The focus of this review is therefore, on universal mental health promotion interventions in schools rather than those that target high-risk individuals or where health education is part of the treatment of a mental health disorder. Globally 10–20% of children and young people experience a mental disorder; and this is increasing. Additionally, it is estimated that 50% of adults with disorders experienced them prior to age 15. To address this, it is important to pay attention to promotion and prevention practice, with schools being well-placed to deliver.

Mental health promotion in schools

Schools are positioned at the forefront of promoting positive mental health. This is an important way of tackling the growing prevalence of mental disorders worldwide. This has prompted the publication of numerous guidelines and policies in how this could be achieved in the UK and internationally. Recently, in England the government pledged that all secondary (high) schools will receive mental health training by 2020 and each school should have a mental health champion. Similarly, governments in Wales and Scotland have produced policies and statements to advocate the promotion of positive mental health in school-aged children. Furthermore, such thinking is reflected internationally as several countries have been exploring ways of integrating health and education. Schools are pervasive environments in young peoples' lives and can positively impact on their mental health, mitigating some negative impacts of other social factors. However, for some, schools can present as considerable sources of stress, worry, and unhappiness, which can hinder academic attainment. In focusing on promotion, therefore, it is important to consider the educational context as a natural environment in which it is possible to build rights of agency, security, and personal freedom in young people, whilst recognising any limitations this may have.

Whole-school approaches

A 'whole school approach' for promoting positive mental health, recognises the importance of working collaboratively with all parts of the school community; students, families and staff, whilst acknowledging the impact of local and government policies. Adopting this approach advocates that schools should tackle mental health and well-being through their behaviour policy, curriculum design, care and support for young people, as well as staff, and engagement of parents. Internationally, this has been implemented through schools adopting social and emotional programmes; for example, in the USA, the Collaborative for Academic, Social, Emotional Learning, in Australia, Kids Matter and the UK, Social and Emotional Aspects of Learning (SEAL, DCSF. Where implemented, it has been found to not only support positive mental health, but also raise academic attainment. Furthermore, recognition of the need to have sustainable multi-sector partnership in mental health promotion offers little guidance about who the partnerships should involve or specific roles of stakeholders. However, it would seem appropriate to engage the wider community and include families, as well as young people and their teachers.

Focus and aims of the review

The focus of our review is on universal interventions of mental health promotion in schools,



recognising that universal and target types require different approaches as the aim of the interventions are different. This review aims to examine advancements in mental health promotion in contemporary education, in the context of global austerity in the last 10 years. In presenting this review, it is necessary to be aware that terminology across the educational and health sectors differs and sometimes mental health promotion is described as positive psychology or emotional health. This lack of universal terminology makes reviews complex and comparisons challenging. Therefore, for clarity our searches focused on studies that described interventions as promoting mental health and/or well-being.

Research has indicated that many young people worldwide are not well informed about mental health, and there is a clear need to raise awareness, educate, and provide interventions that facilitate the maintenance of mental well-being in young populations. Mental health promotions are potentially central to the solution, and therefore, it is unsurprising that many interventions that take this approach have been developed.

Methods

The authors reviewed the current state of knowledge on school mental health promotion interventions globally. Two major databases, SCOPUS and ERIC were utilised to capture the social science, health, arts and humanities, and education literature.

As noted, the challenge in reviewing mental health promotion is the lack of universality in language and operational definitions of key terms. It is not always clear whether when the term mental health promotion is used, it is consistent with the WHO definition. Additionally, in education, several programmes go under a different title. For example, social and emotional learning (SEAL) is often used and interventions designed to promote effective mastery of social-emotional competencies aim to achieve greater well-being and better school performance by reducing risk factors and promoting protective mechanisms for positive adjustments. For our review, we focused on searching for positive mental health promotion interventions as defined by the WHO, including social and emotional well-being, to capture an inclusive overview of the work that has been done.

Results

When matched against the inclusion and exclusion criteria, a total of ten papers were returned. Three of these utilised a qualitative design and seven quantitative design. The literature was well spread globally (e.g. UK, Australia, USA, Sweden, Denmark, Germany, Ireland) and included different interventions, all of which were targeted at the general population of young people in schools. We organised our findings around four main issues: (1) the theoretical framework underpinning the intervention; (2) support, training and supervision for staff implementing the intervention; (3) outcomes of the interventions and (4) long-term impact. Initial searches identified 25 articles reporting on mental health promotion interventions in schools. When mapped against the inclusion and exclusion criteria, 10 studies were included and explored. Three of these were qualitative and seven were quantitative.

Conclusions

A range of interventions have been tested for mental health promotion in schools in the last decade with variable degrees of success. Our review demonstrates that there is still a need for a stronger and broader evidence base in the field of mental health promotion, which should focus on both universal work and targeted approaches to fully address mental health in our young populations. Our review has demonstrated that there is some success for interventions, many of which were underpinned by the whole-school approach or similar frameworks. This was also the case for other intervention types that were not so broad in scope. However, training teachers in delivery was important and long-term outcomes unclear. Thus, building on previous work, we have demonstrated that there remain gaps in knowledge, that there are issues with sustainability of universal approaches, and that success, to some extent, relies on cooperation, training and involvement of the schools and the young people themselves. Furthermore, modes of delivery and the nature of the interventions are important and need to appeal to young people. This could be facilitated by more scoping work in terms of digital health promotion. In a digital



age, with digital tools, mobile apps, robotics, social media and the internet all forming a central part in daily life, there is potential to integrate a whole-school approach with digital interventions, and there is room to be creative with universal mental health promotion.

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