

Year 4

Components	High Quality Services & Programs	A Caring School Culture and Healthy Physical Environment	A Supportive Social Environment	Parent and Community Partnerships
<p>Intentional Prevention and Intervention</p> <p>(Extracted from <i>Foundations for a Healthy School Ministry of Education 2013</i>)</p>	<ul style="list-style-type: none"> Identifying areas of the curriculum where mental health can be taught throughout the year Providing staff in-service training on recognizing signs and symptoms and using appropriate intervention strategies when dealing with issues about mental health Providing programming that does not stigmatize mental disorders and that promotes positive healthy behaviours 	<ul style="list-style-type: none"> Establishing an area in the school for students to participate in physical activity and clubs, especially during the winter months Developing a resource section in the library for teachers/parents with a range of books and materials about mental health Establishing a school-based health/life style centre 	<ul style="list-style-type: none"> Providing students with information and training on mental health and with an opportunity to plan and organize a committee to address mental health issues in the school Sending out a student and/or parent survey to establish the areas of mental health that need to be focused on in the school Establishing a protocol to ensure that mental health resources used are consistent with the messages of the school and board 	<ul style="list-style-type: none"> Establishing a school council committee to discuss and coordinate mental health initiatives in the school and community Providing information from community partners in the school newsletter for parents Providing access to researchers to examine mental health issues and support available in the school
Data	<p><u>TDSB Student Census Data:</u></p> <ul style="list-style-type: none"> 38% of Gr. 9-12 students indicated they were “under a lot of stress” often or all the time 34% of Gr. 9-12 students indicated they were nervous/anxious often or all the time 17% of Gr. 9-12 students stated they were “down” often or all the time 18% of Gr.7-8 students indicated they were “under a lot of stress” often or all the time 26% of Gr. 7-8 students said they were nervous/anxious often or all the time 10% of Gr. 7-8 students stated they were “down” often or all the time <p><u>TDSB Resource Mapping Data:</u></p> <ul style="list-style-type: none"> 97% of staff indicated that student emotional well-being is very important/extremely important to academic achievement in school 44% of TDSB staff reported that “anxiety” was their top concern 41% of Board staff indicated that “depression” was their second most pressing concern 	<p><u>TDSB Student Census Data:</u></p> <ul style="list-style-type: none"> 70-76% of Gr. 7-12 students with high/middle emotional well-being enjoyed school and felt that they belonged in school all the time or often. Students with low emotional well-being were much less likely to feel that way (44%) 29% of Gr.7-12 students with low emotional well-being felt comfortable discussing a problem with their teachers Gr. 7-12 students with low emotional well-being were less physically active on a daily basis (35%), less likely to participate regularly in team sports activities outside school (24%) and less likely to eat breakfast on a regular basis (61%) 34% of Gr. 7-8 students and 46% of Gr. 9-12 students report they do not have an adult in the school that they feel comfortable going to for personal support, advice or help Having at least one significant, caring relationship with an adult is one of the positive, protective factors for child and youth mental health (“A Shared Responsibility” Ontario’s Policy Framework for Child and Youth Mental Health – MCYS, 2006) Teachers and other school staff help make schools a positive space that contributes to good mental health (“Putting Youth in the Picture” - Provincial Advocate for Children and Youth, 2013) 	<ul style="list-style-type: none"> 70% of students and 51% of service providers feel stigma is a barrier to accessing mental health supports in school (Canadian Mental Health Association) The stigma associated with mental health continues to create barriers to social acceptance and access to services/supports (Ministry of Children and Youth Services) <p><u>TDSB Student Census Data:</u></p> <ul style="list-style-type: none"> Students’ emotional well-being declined by grade. The proportion of students with high/middle emotional well-being dropped from 87% in Gr.7 to 69% by Gr.12, with greater declines over the secondary school years Male students were more likely than female students to be at the high/middle emotional well-being level Gr. 7-12 students with low emotional well-being had fewer close friends in school (63%), were less likely to get along well with other students (69%) and less likely to feel accepted by other students (55%) A quarter of Gr.9-12 students (24%) who identified themselves as heterosexual were at the low emotional level; the proportion was double for LGBTQ students (41%) 	<ul style="list-style-type: none"> Model Schools Pediatric Health Initiative – Six Pediatric Clinics in 5 elementary schools and 1 secondary school Six Telepsychiatry Sites – in 4 schools and 2 in the Education Offices (in partnership with Tele-Link for Health) “Beyond 3:30: A Multi-Purpose After-School Program for Inner-City Middle Schools” in 13 schools serving 380 students <p><u>Partnerships Between TDSB and External Resources:</u></p> <ul style="list-style-type: none"> Toronto Central-Community Care Access Centre, Mental Health and Addictions Nurses (Six assigned to TDSB) Toronto Public Health Over 40 Mental Health partnerships <p><u>TDSB Student Census Data:</u></p> <ul style="list-style-type: none"> Gr.7-12 students with low emotional well-being were more likely to feel their parents expected too much from them (50%), less likely to talk with their parents about school work (40%) and felt less comfortable discussing problems with their parents (36%) <p><u>TDSB Resource Mapping Data:</u></p> <ul style="list-style-type: none"> TDSB staff want increased formal partnerships with community mental health organizations; quick access to needed services; increased culturally relevant partnerships; increased direct links with community partnership and schools; access to community mental health programs across schools; and closer collaboration between the education and healthcare sector
SMART Goals	<ul style="list-style-type: none"> 100% of school staff including administrators, teachers, support staff and Professional Support Services staff will receive professional development and training in foundational knowledge and understanding of Mental Health and Well-Being. Topics to include: well-being, anxiety, depression and mood, self-harm and suicide by June 2017 	<ul style="list-style-type: none"> All schools will establish and strengthen their “Well-Being Teams” (formerly “Mental Health Teams”) that will be responsible for facilitating student mental health and well-being in the schools. Members of these teams may include teachers, support staff, students, parents, administrators and community partners 	<ul style="list-style-type: none"> 100% of schools with Grades 7 – 12 students are engaged in anti-stigma initiatives by June 2017 	<ul style="list-style-type: none"> Expand and strengthen mental health partnerships to better meet system needs Enhance and strengthen parental engagement and on-going communication between home and school
Actions 2016 - 2017 Year 4	<ul style="list-style-type: none"> Develop a “Mentally Healthy Classrooms” module Implement the Depression and Mood literacy training module Continue to implement anxiety and suicide awareness/literacy/expert training, through a tiered professional learning plan Continue to develop system capacity to understand mental health and well-being as it pertains to specific populations - Early Years, Aboriginal and LGBTQI populations Continue to track, monitor and increase the views of Foundations of Children and Youth Mental Health and Well-Being online training module 	<p>School-Based Well-Being Teams will:</p> <ul style="list-style-type: none"> Support the development and implementation of an authentic focus in Well-Being as part of the School Improvement process Integrate, enhance and embed “Caring Adult” initiatives/ programs in all schools Strengthen and support evidence-based mental health & well-being programs, activities and initiatives Create and promote classrooms, spaces and environments that are “Mentally Healthy” 	<ul style="list-style-type: none"> Integrate, enhance and embed anti-stigma programs/initiatives in all schools with grades 7 – 12 students Create and cultivate relationships that foster a sense of belonging for all students Work with system-wide Students 4 Well-Being (S4W) Committee to guide and inform anti-stigma work Support Mental Health and Well-Being Summits for middle school/secondary students to enhance student engagement and leadership in mental health wellness Organize district wide anti-stigma student symposium in partnership with SuperCouncil and other departments and community partners 	<ul style="list-style-type: none"> Strengthen the collaboration with children’s mental health agencies and hospitals to facilitate counselling supports for students Continue to monitor and evaluate the impact of mental health supports provided by our various partners Enhance services provided through the Telepsychiatry partnership to include professional development Support the Mental Health and Addictions Nurses’ to execute their role in an efficient and effective manner Continue to strengthen parent involvement through the system-wide Parents as Partners Mental Health and Well-Being Parent Committee Organize a Speaker Series for Parents Organize Mental Health Symposium for Parents in partnership with other departments and key community partners
Measures of Impact/Evidence	<ul style="list-style-type: none"> Number of staff trained through the implementation of awareness and literacy training modules Collection of evaluation survey information to assess effectiveness of the training modules 	<ul style="list-style-type: none"> <i>Keeping on Track/Monitoring the Implementation Checklists for Principals and Superintendents</i> All schools report the establishment of a Well-Being Team to their Superintendent Superintendents track and monitor the impact of a school’s well-being focus 	<ul style="list-style-type: none"> Number of anti-stigma programs in schools with Grades 7 to 12 students Effectiveness of programs measured through the data gathered from the anti-stigma programs Collection of evaluation surveys from student forums and symposiums 	<ul style="list-style-type: none"> Evaluative research conducted on MSPHI Number of programs offered by expanding existing agreements Number of formal partnerships established Effectiveness of programs measured by data collected by agencies as required by partnership agreement Number of parent participants at speaker series and symposium Collection of evaluation surveys from parent speaker series and symposium