School-based mental health interventions

What's the evidence-base?

Mina Fazel

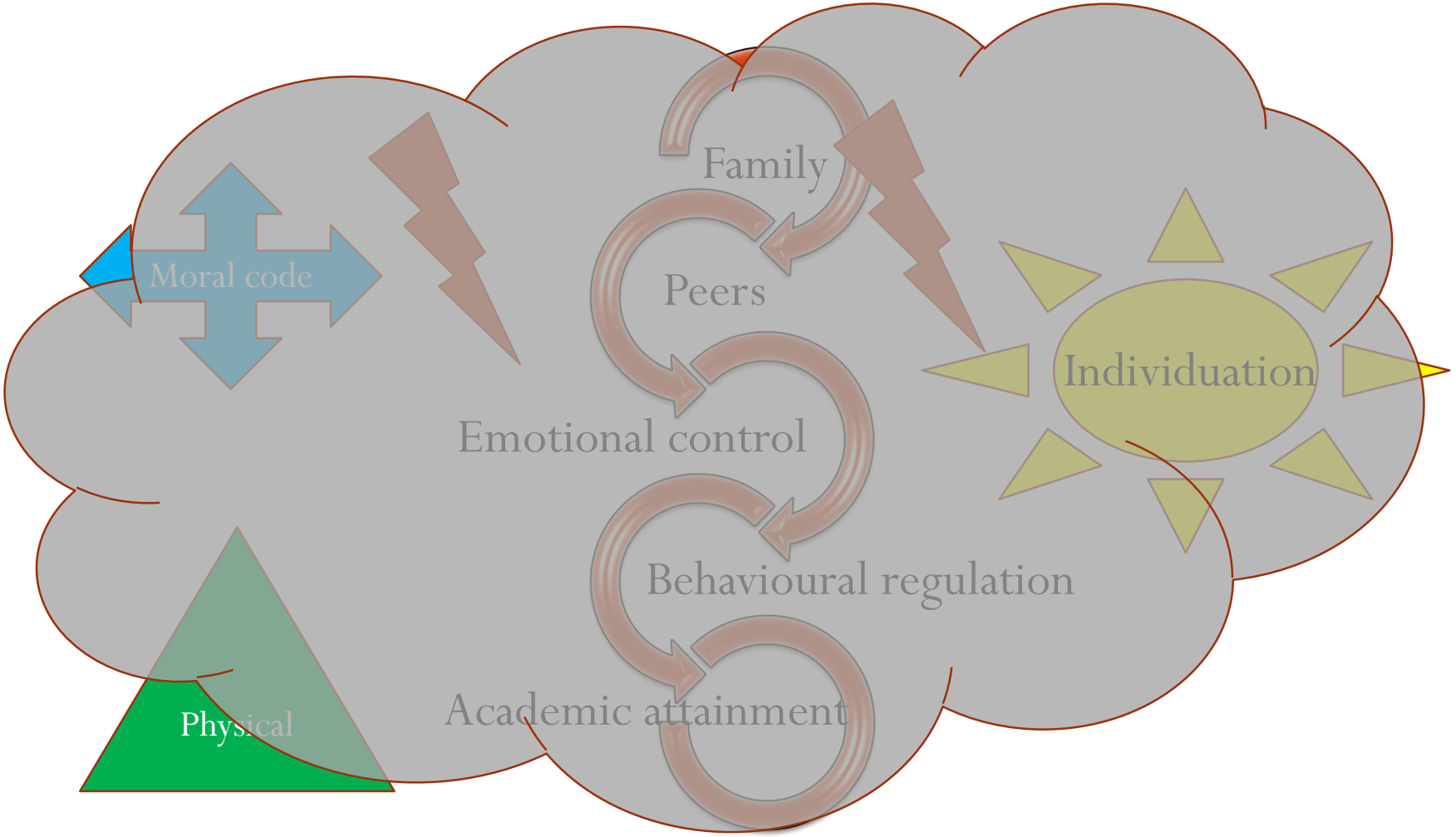
Associate Professor, Department of Psychiatry, University of Oxford &

Consultant in Child and Adolescent Psychiatry, Children's Psychological Medicine, Oxford Children's Hospital

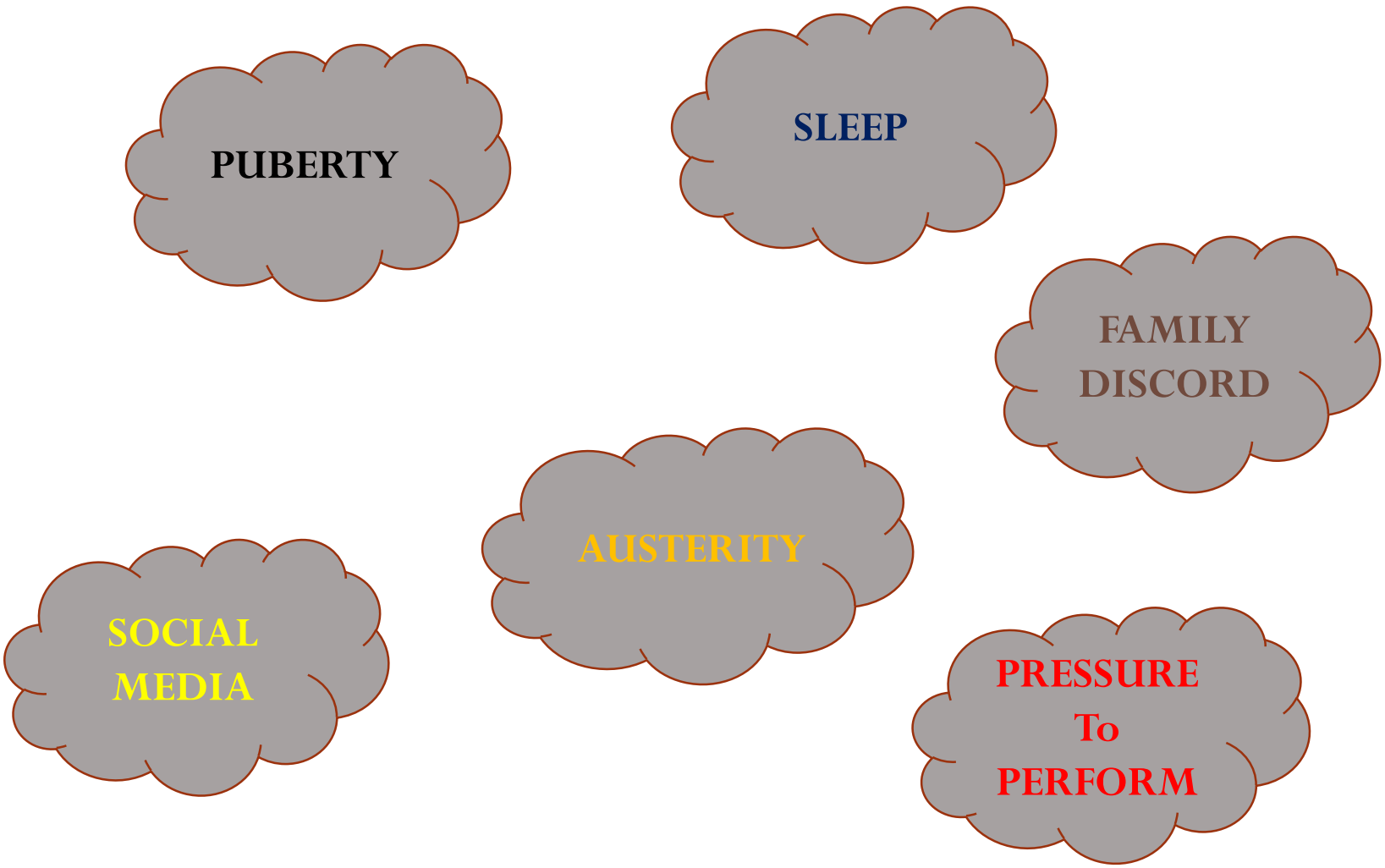
Overview

- Tasks and Complexities of Childhood
  - Mental health of school-aged populations
  - What happens in school
- Unique role of schools
- What can be done

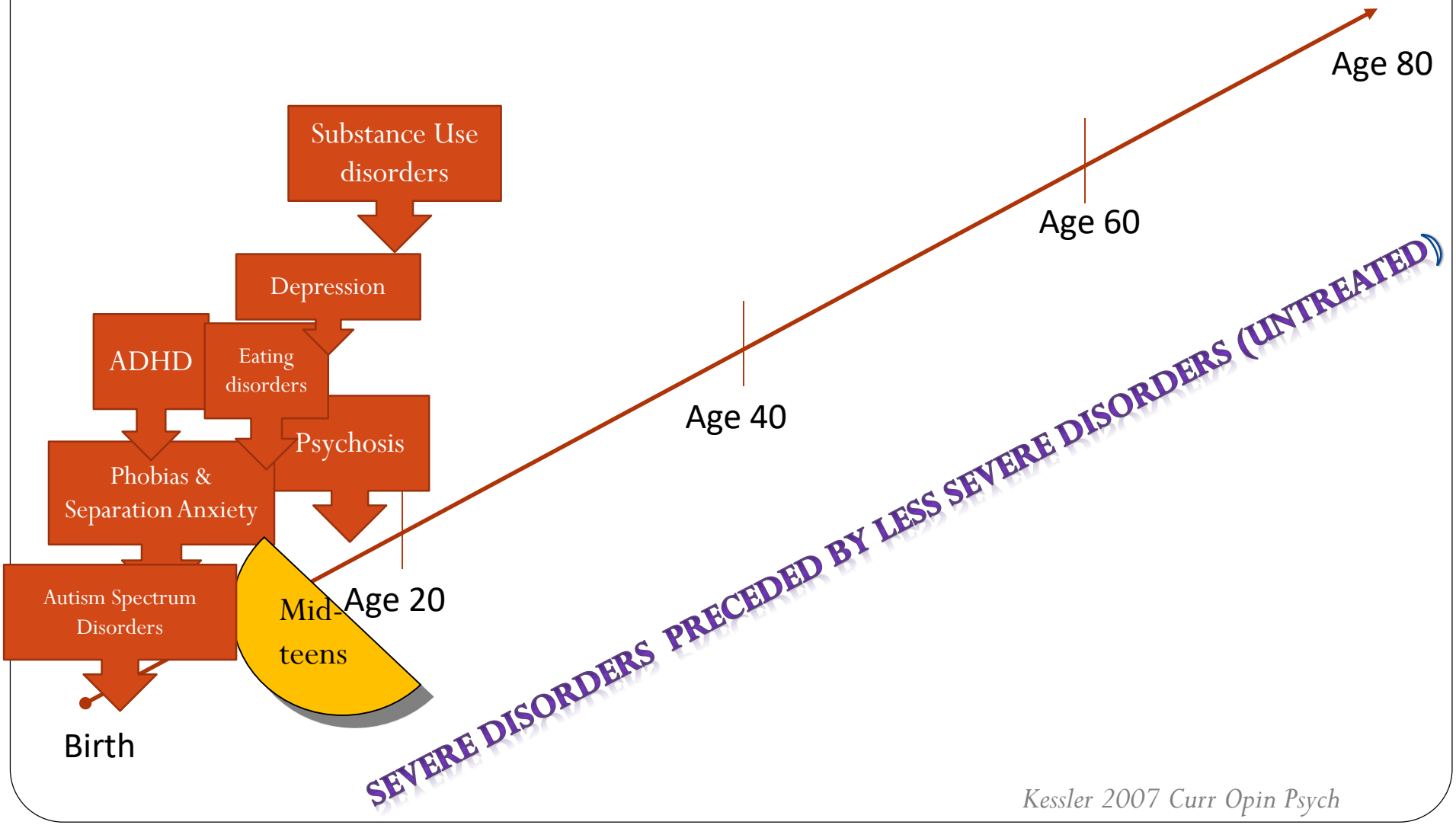
Developmental tasks of childhood and adolescence



Some of the additional [modern] complexities of childhood



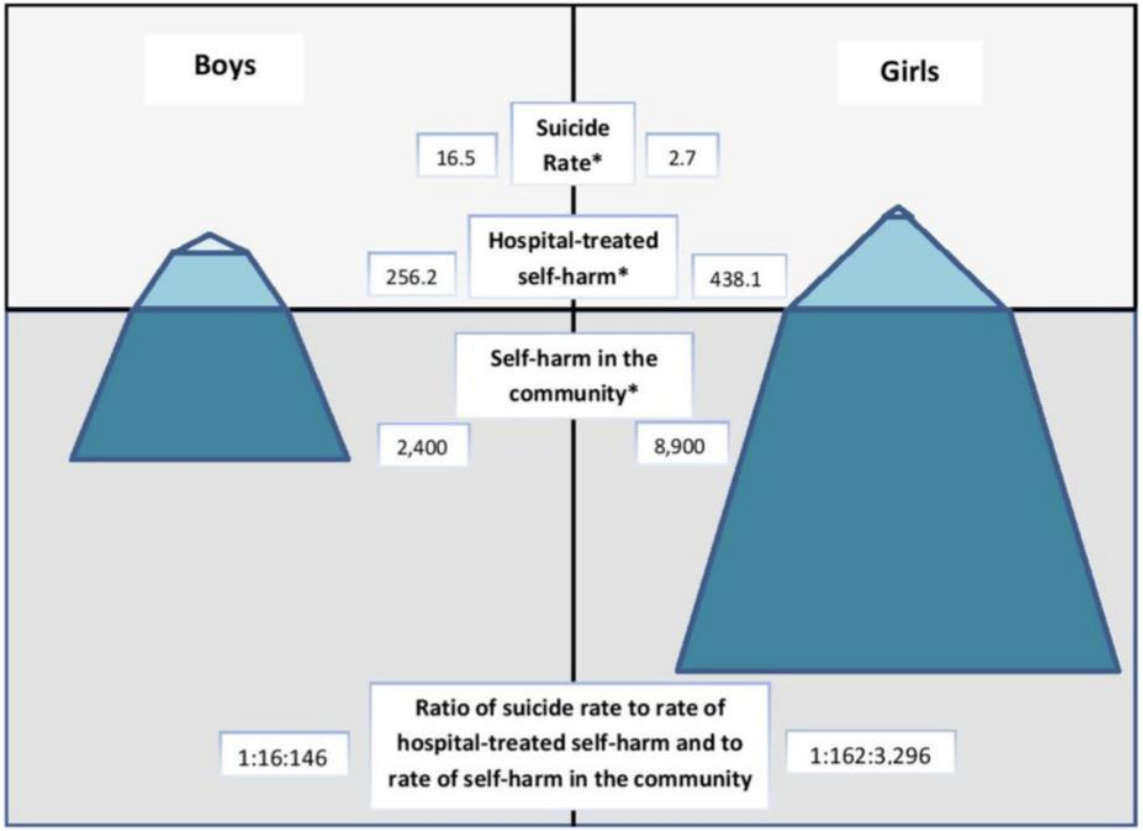
Median Age of Onset: Mental Illness



Kessler 2007 Curr Opin Psych

Self-harm in adolescents

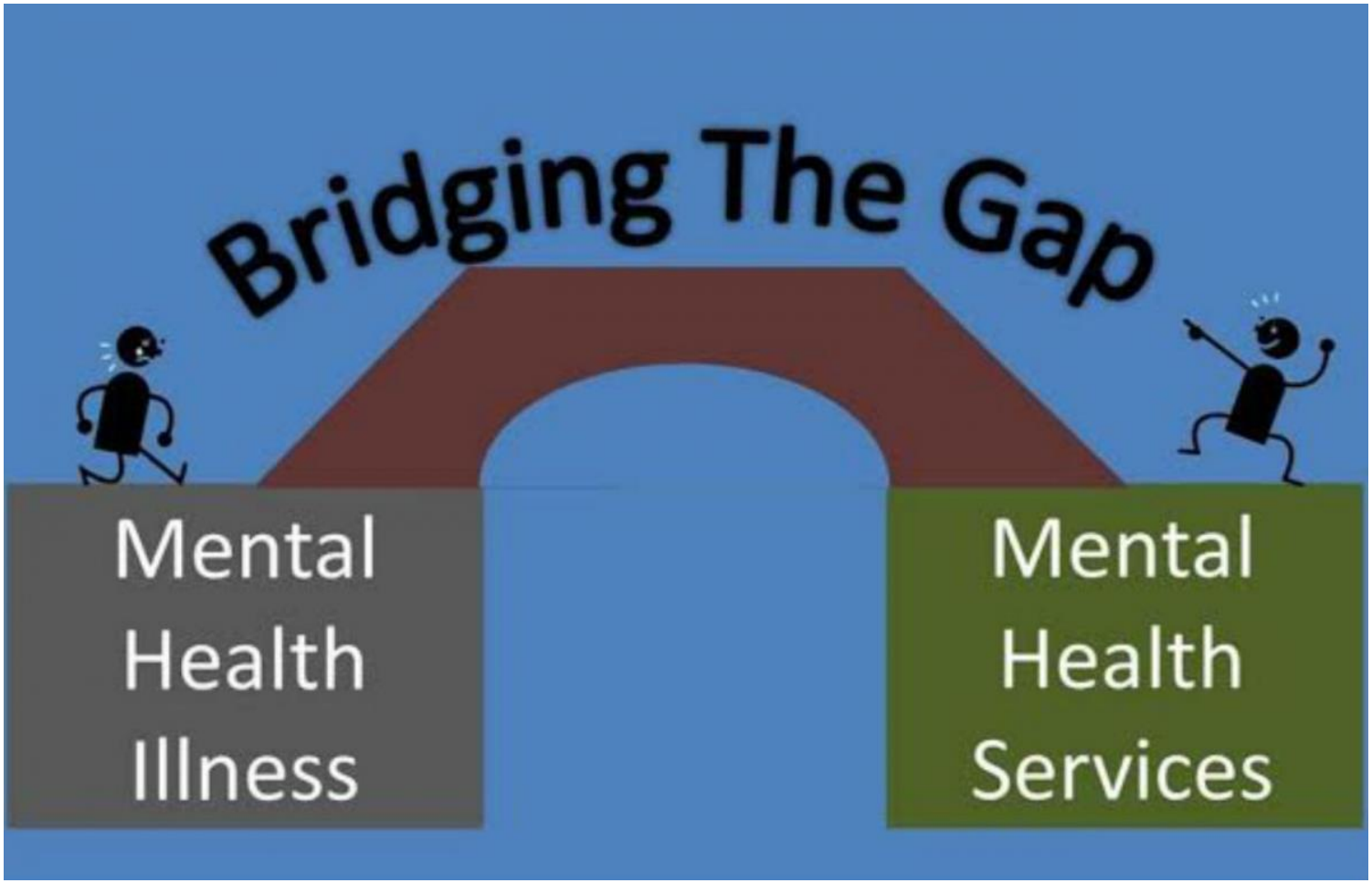
Fig. 1 Relative incidence of suicide, hospital-treated self-harm and self-harm in the community for boys and girls aged 15–17



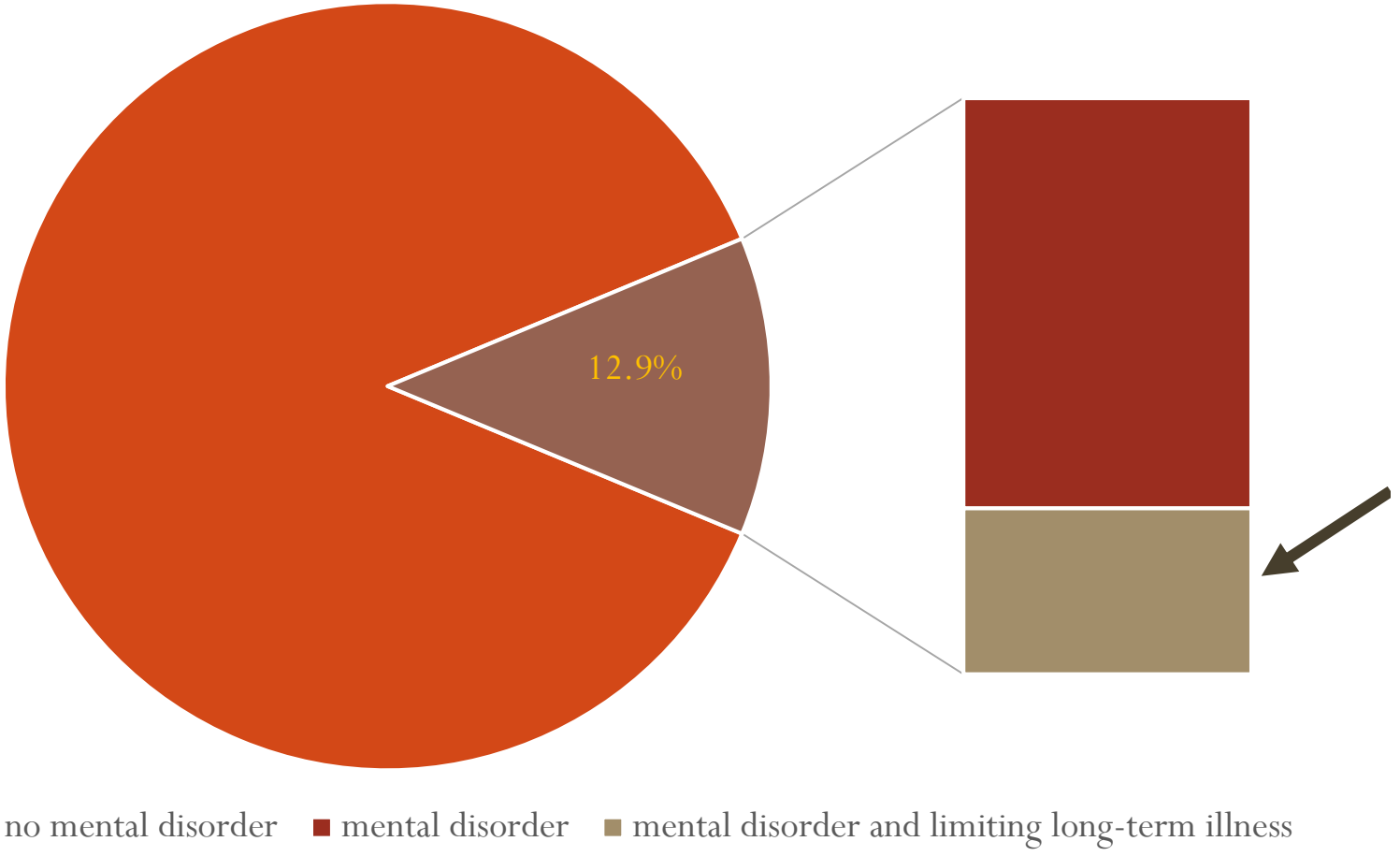
*Annual incidence rates per 100,000

Relationship:
education & mental health

Problems with access to services



2017 UK Child Data



teachers

peers

Overview

- Tasks and Complexities of Adolescence
- Unique role of schools
  - What are school-based mental health interventions
  - Promotion
  - Prevention
  - Treatment
  - Some learning from the Oxford
- What can be done

Schools: provide a unique platform to access and support psychological difficulties in children and adolescents

What are school-based mental health interventions?

1 Who gives the treatment?

Internal ← → External

- Peers
- Pastoral support staff
- Teachers
- School counsellors
- School nurse
- School psychologist
- Charities
- Mental health service

2 To whom?

- Whole school
- Classroom
- Pupils at risk
- Diagnosed pupils

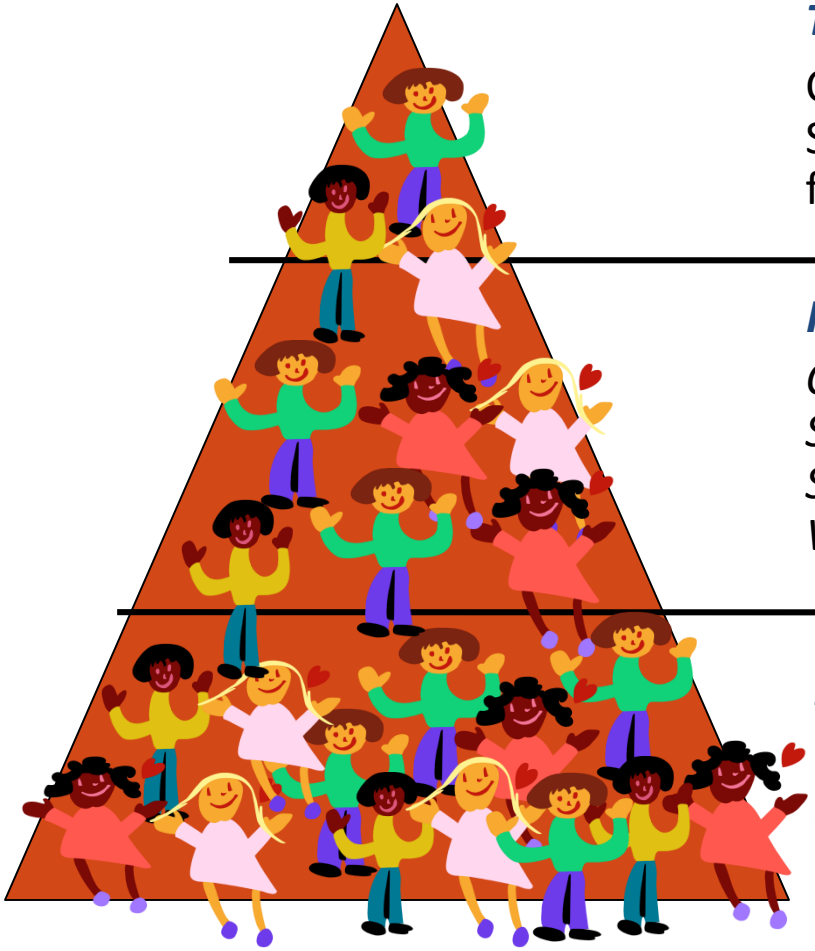
3 What treatment?

- Cognitive behavioural therapy
- Behavioural intervention
- Art therapy
- Counselling
- Medication
- Family therapy

4 Important prevailing issues

- Consent?
- Confidentiality
- Evidence based
- Whose responsibility?

Types of School Interventions



***Treatment/Indicated*:**

Cognitive Behavioral Intervention for Trauma in Schools (CBITS), Coping Cat, Interpersonal Therapy for Adolescents (IPT-A)

Prevention/Selected:

Coping Power, FRIENDS, The Incredible Years, Second Step, SEFEL and DECA Strategies and Tools, Strengthening Families Coping Resources Workshops

Promotion:

Good Behavior Game, PATHS, Positive Behavior Interventions and Support (PBIS), Social and Emotional Foundations of Early Learning (SEFEL), Olweus Bullying Prevention, Toward No Tobacco Use

Types of interventions: mental health promotion

- Social and Emotional Learning (SEL) programmes
- Reasonably good evidence
  - Mindmatters
    - Student supports (SEL)
    - Teacher: professional development
  - I can problem solve
  - Good Behaviour Game
    - Divide class into groups
    - Define behaviours that are wanted and not wanted
    - Reward

Health Promoting Schools

- Curriculum teaching and learning
- School organisation and ethos
- Community links and partnerships

- A health promoting school is one in which all members of the school community work together to provide pupils with integrated and positive experiences and structures, which promote and protect their health. This includes both the formal and the informal curriculum in health, the creation of a safe and healthy school environment, the provision of appropriate health services and the involvement of the family and wider community in efforts to promote health.

Types of interventions: prevention

- Universal
  - Advantages as can fit into school system
  - CBT-based
  - Anxiety-disorders: no long term benefits
  - Suicide prevention: SEYLE RCT (YAM intervention)
- Selective
  - Coping power: risk of aggression
  - CBITS: violence
- Indicated
  - Those who have self-harmed

FRIENDS for life

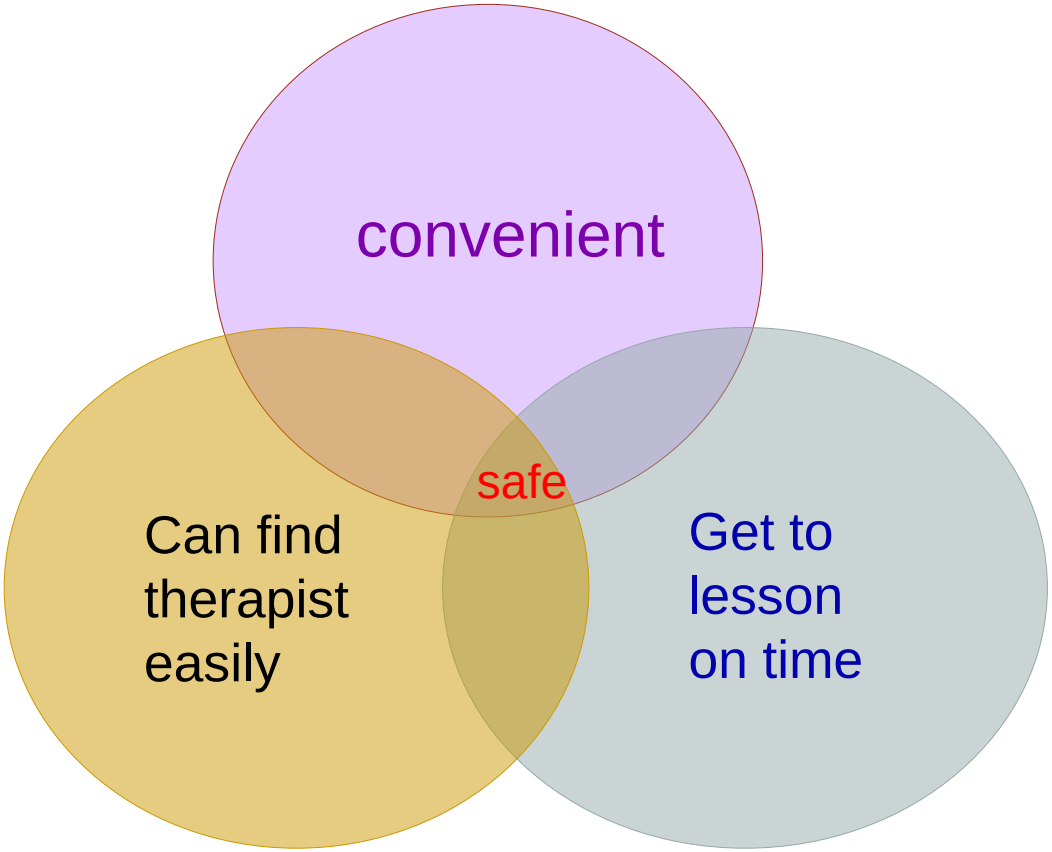
- Cognitive Behavioural Therapy programme
  - Whole classes; age 7-11
  - 10 x 1 hour sessions
- Components
  - Identifying feelings and teaching empathy skills
  - Understanding one's physiological response
  - Learning to relax
  - Linking thoughts and feelings
  - Developing coping step plan

Indicated/ Treatments

- Depression
  - Good evidence-base
  - CBT
- Trauma
- Anxiety

Learning from School Mental Health Services in Oxford

Advantages of services in school location in refugee sample

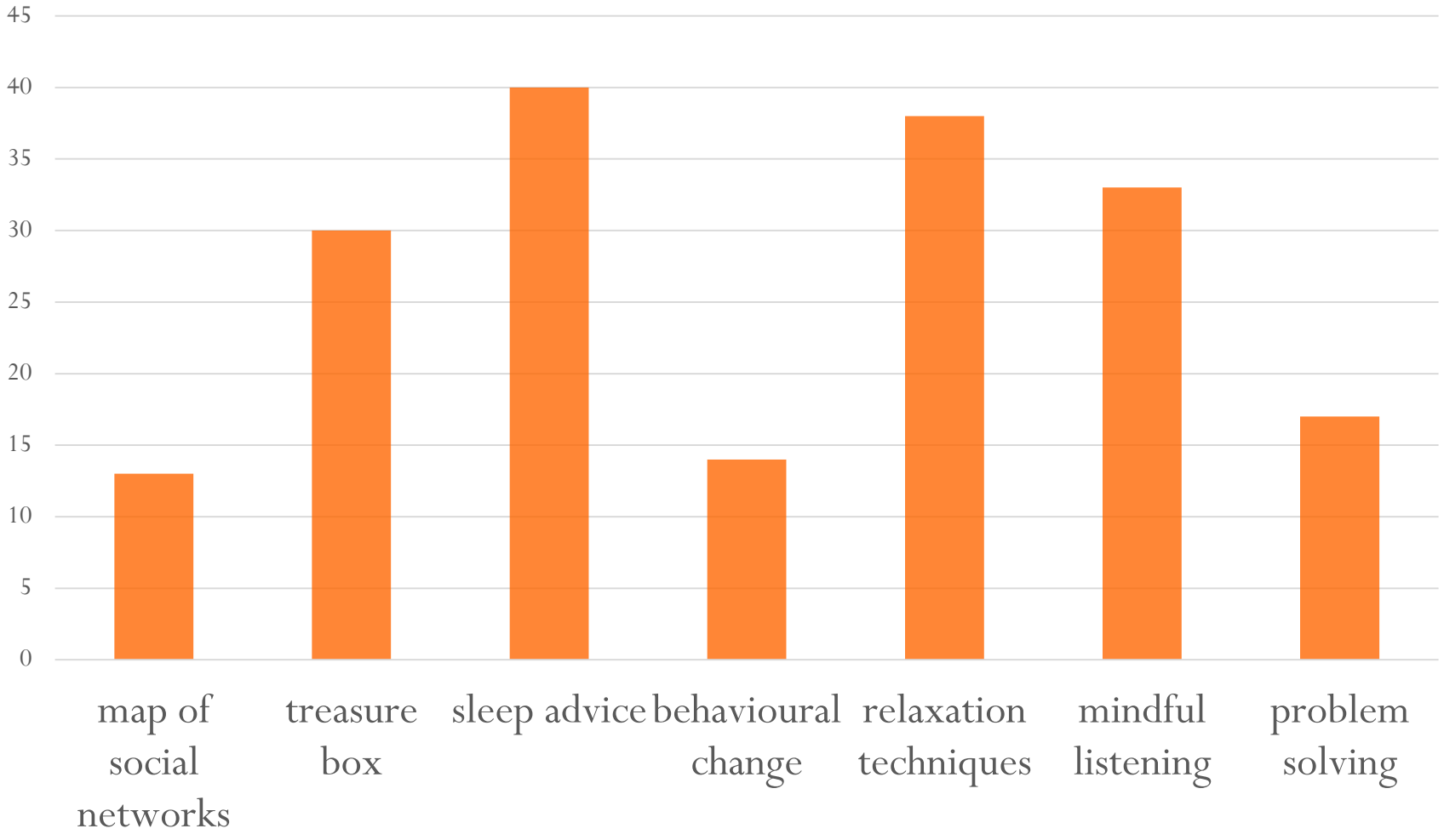


Good to have it in school, if come to hospital it is scary, I don't know if I would go if it was in a hospital …no one likes hospital

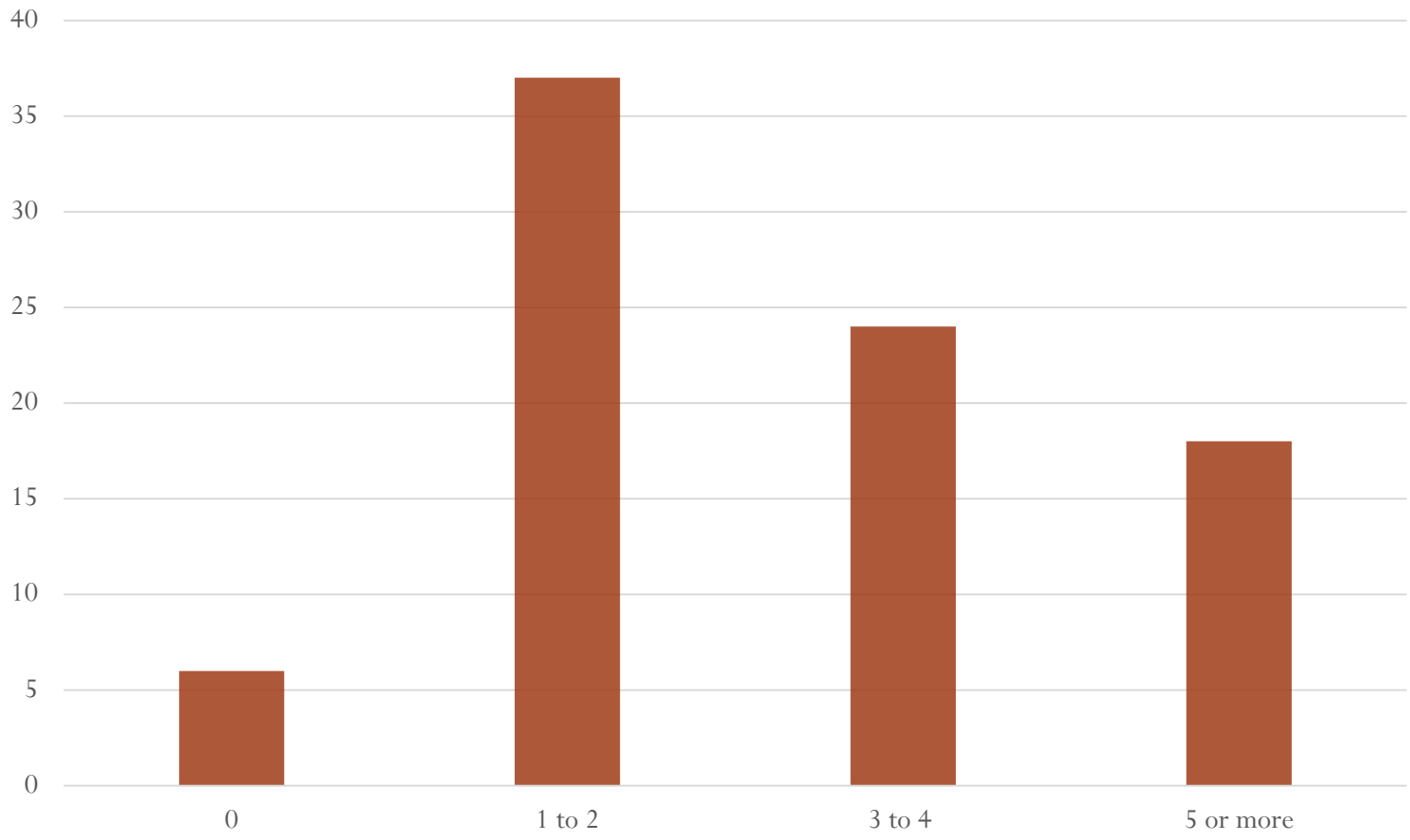
Skills teaching: Treasure box

How do I look after myself?

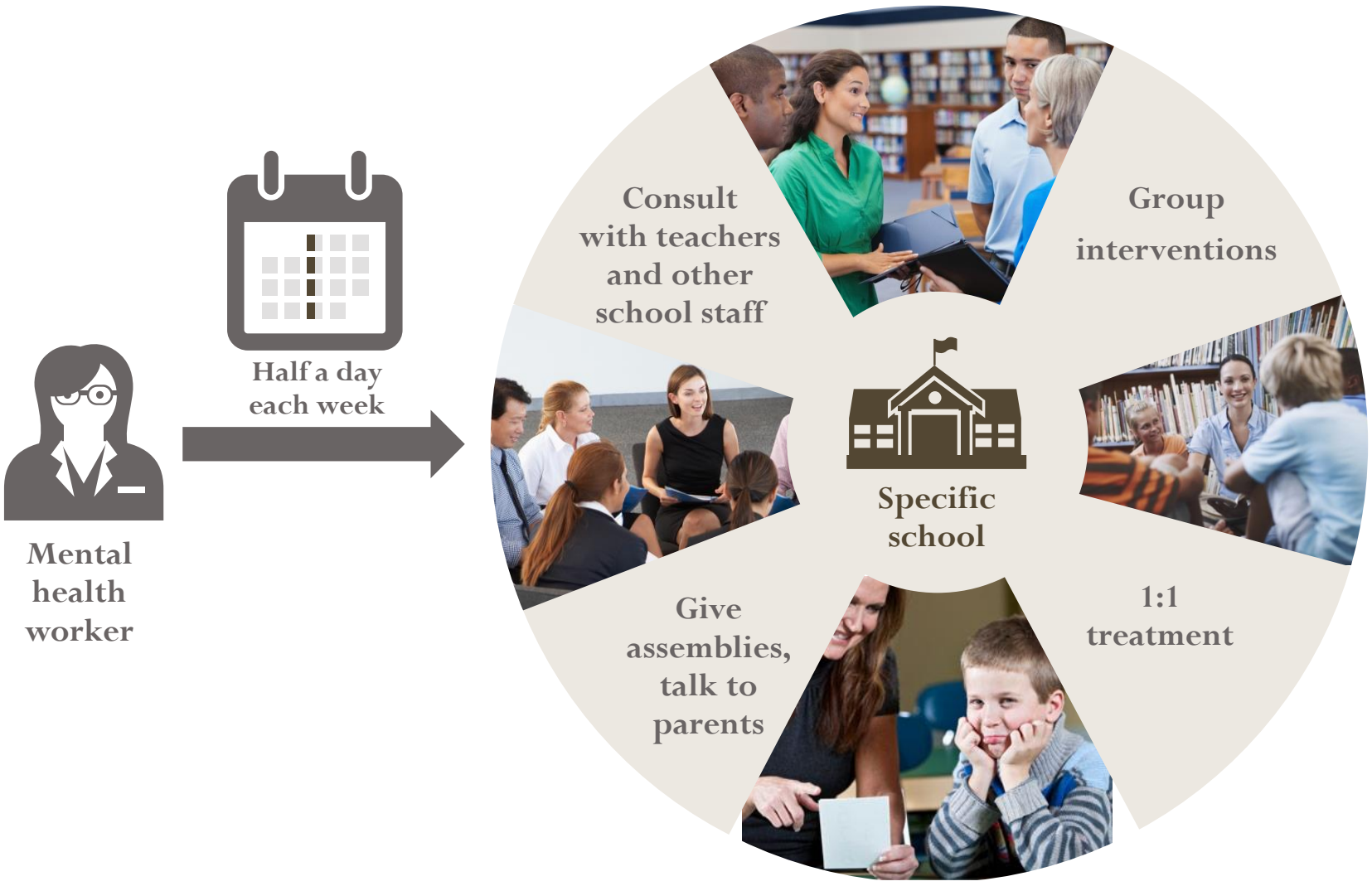
Mental Health toolbox: Which tools were used?



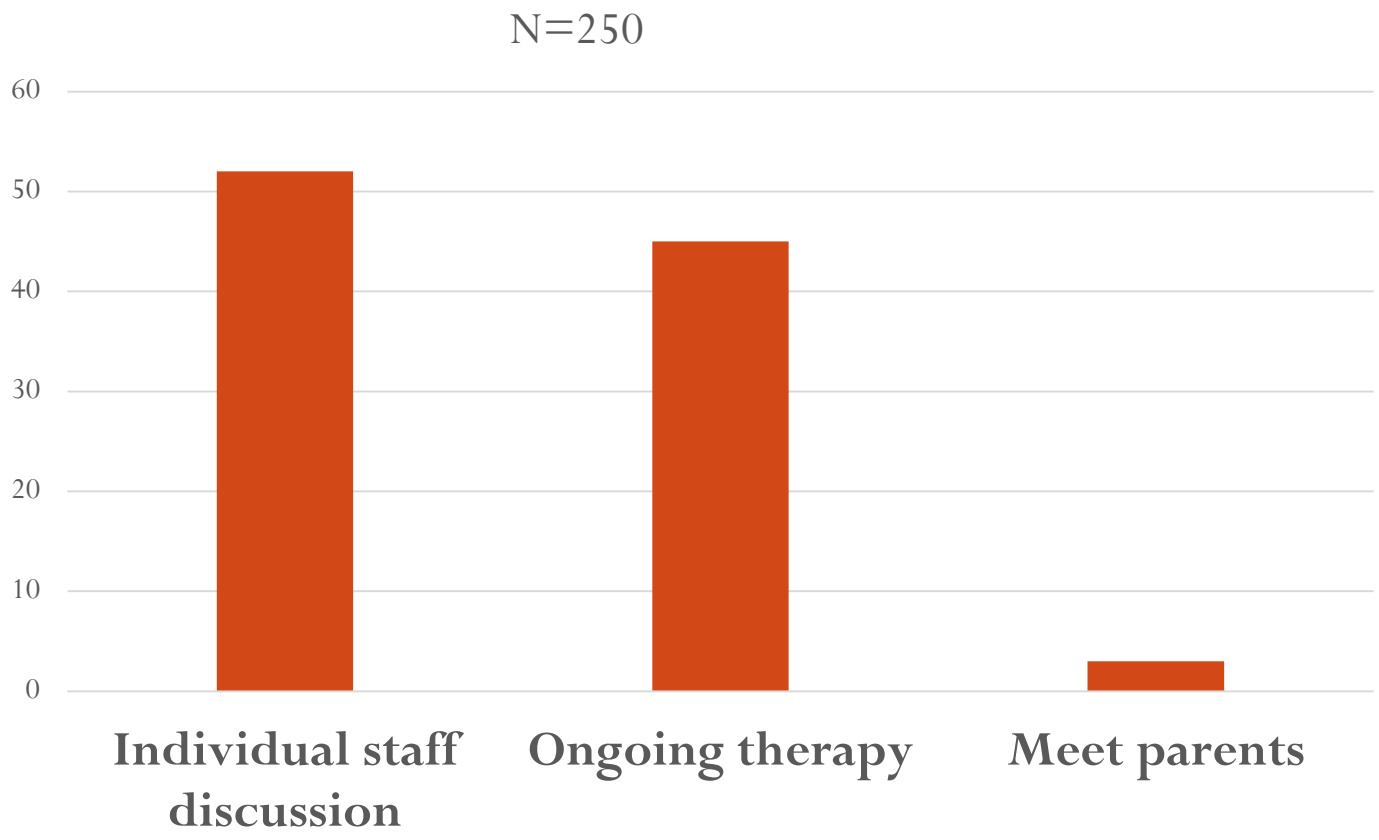
Mental health toolbox: With how many students



The Oxford Child Mental Health InReach Service

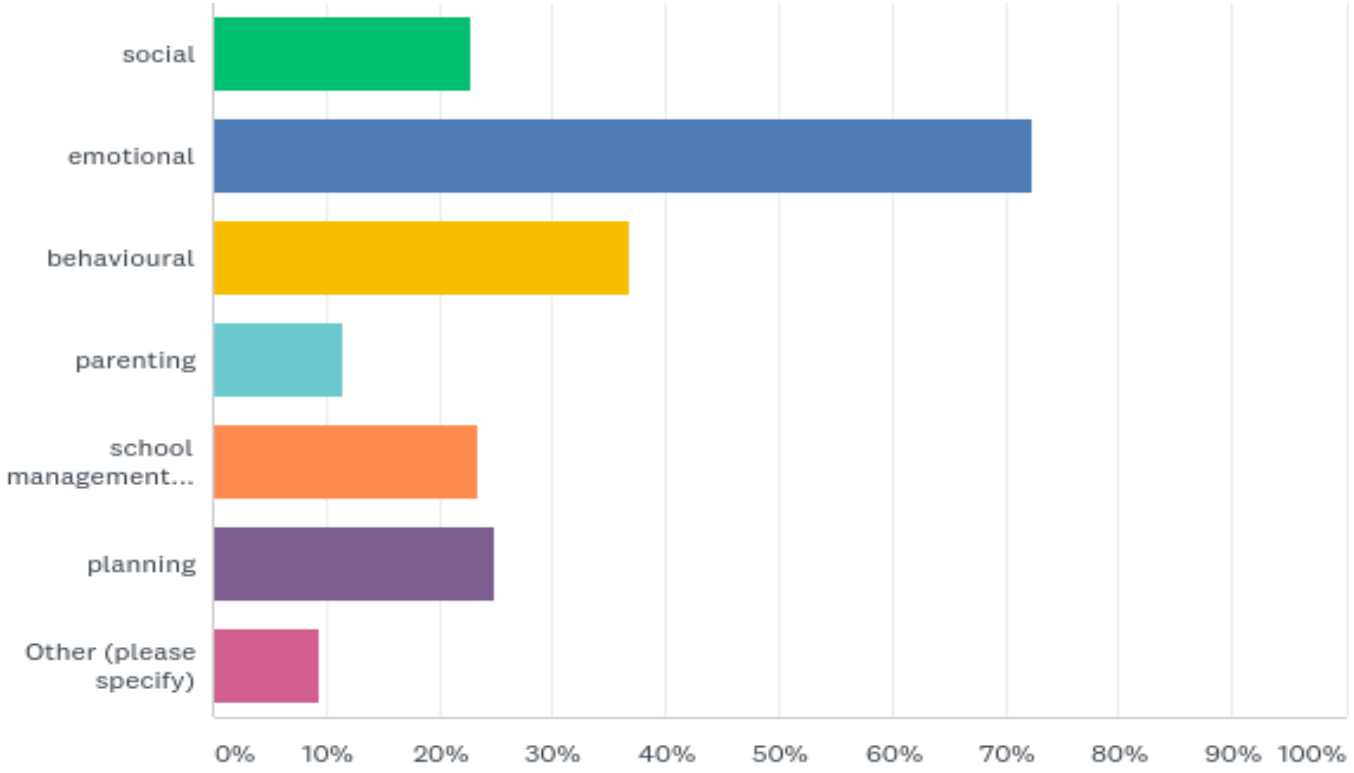


If you have seen an individual, what have you done?

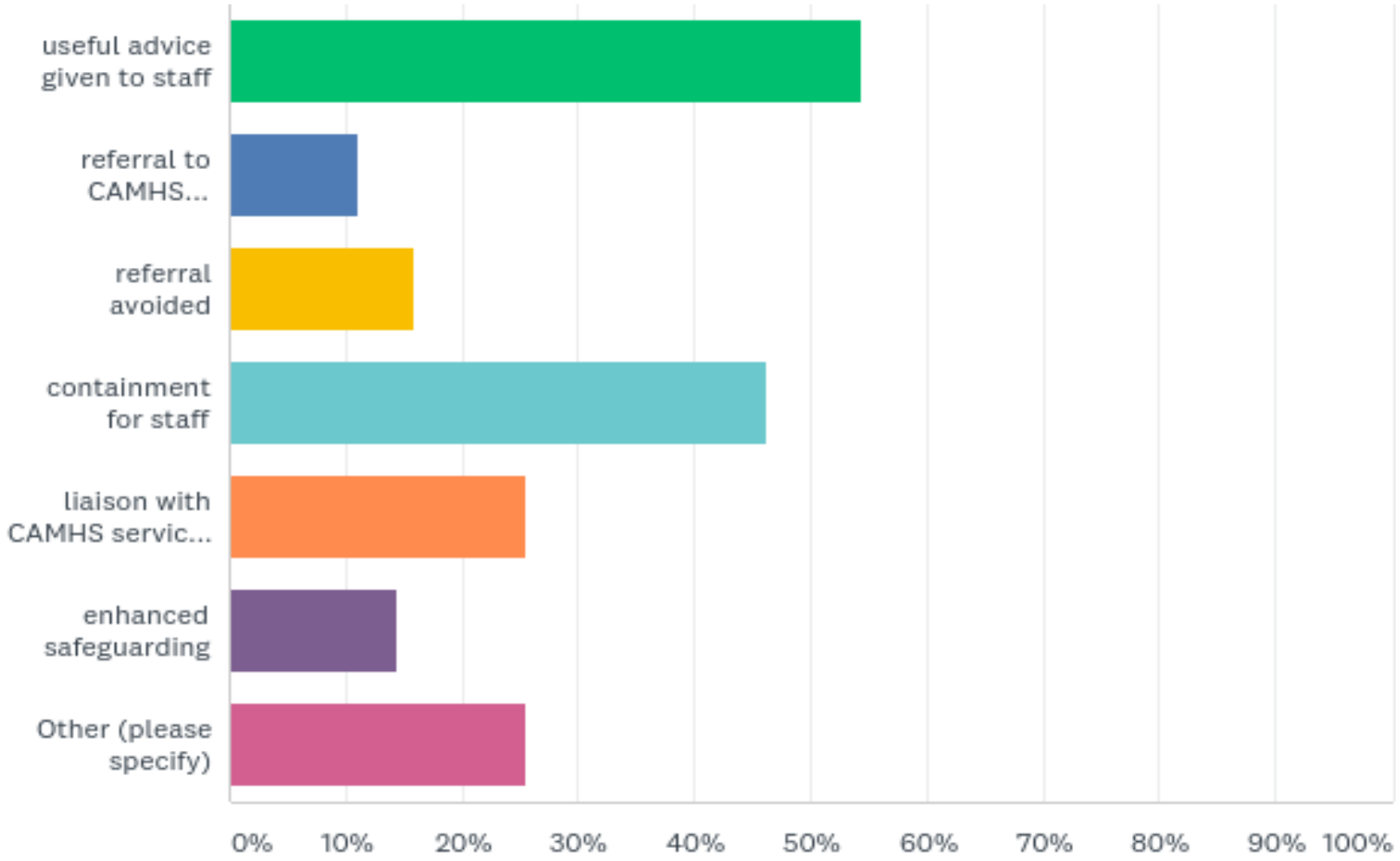


Area of need

- N=149



Possible impact (best guess)



Challenges encountered

- Ethical
  - Consent: from whom?
  - Notes & confidentiality: who should know
- Screening
  - Whether, When and How
- Pastoral care systems within schools
- Space

Overview

- Tasks and Complexities of Adolescence
- Unique role of schools
- What can be done
  - System of care
  - Teachers
  - Vulnerable populations

Policy and practice implications

What to do?

Scope, dose and scale of 8 largest school mental health programmes

- Reached approximately 28 million children over the last decade
- Positive Behaviour Interventions and Supports (PBIS)
  - Largest (10m)
  - Focus on positive social culture and behavioural support
  - Improved reading scores and fewer suspensions
- FRIENDS
  - Second largest (8m); 12 countries

Largest School Mental Health Programs

Programme	No years active	No students to date	Scale	No schools in last yr	Target population	Low and middle
Positive Behavioral Interventions & Supports (PBIS)	21	10,500,000	District	21,000	K-12th	N
FRIENDS	19	8,000,000	National, State, District	2,000	K-Adult	Y
Positive Action (PA)	34	5,000,000	District	15,000	PreK - 12th	N
Promoting Alternative Thinking Strategies (PATHS)	15	2,000,000	District	4,000	K - 6th	N
Skills for Life (SFL)	18	1,950,000	National	2000	1st - 4th	Y
MindMatters	18	300,000	District	1000	K-6th	N
Good Behavior Game (GBG)	47	200,000	County	89	K-6th	Y
Cognitive-Behavioral Intervention for Trauma in Schools (CBITS)	14	97.250	District		5th - 12th	N

Summary findings

- Largest studies
  - 6 delivered by trained teachers
  - 2 embedded in the school curriculum
  - Tailor-made & adapted
  - Include Tier 1 and targeted aspects

Factors that impact on quality of mental health interventions in school mental health

Individual level

- Professional characteristics
- Intervention perception & attitudes
- Psychological characteristics

Team level

- Staff allocation
- Staff expertise
- Staff turnover
- Team functioning

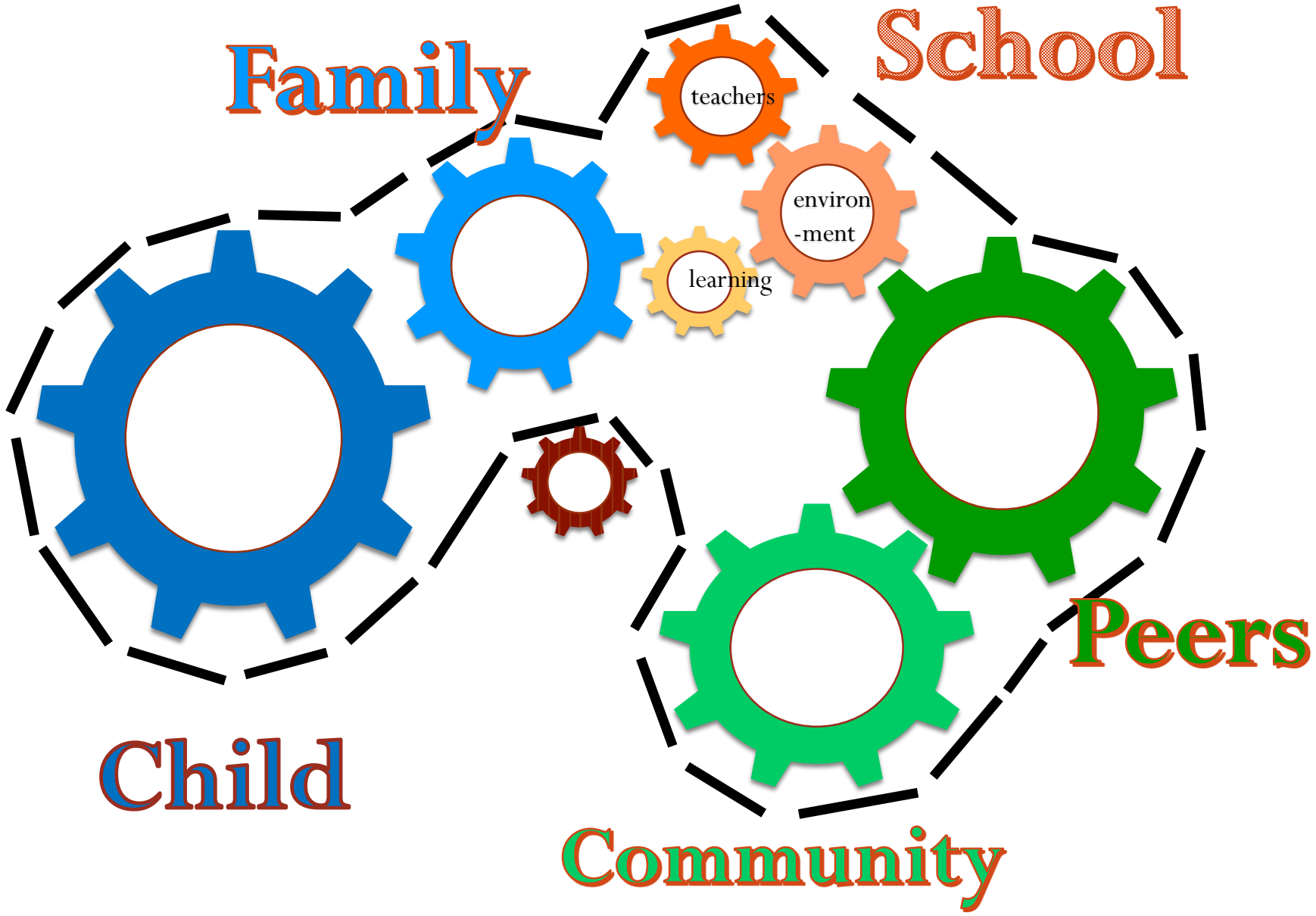
School level

- Resources (& space)
- Support
- Mission/policy alignment
- Admin leadership
- School characteristics
- School culture & climate
- Intervention fit

Macro level

- Policies and financing
- Partnerships with community
- stakeholders
- Service fragmentation
- Coordination of care

The system


Family
School
teachers
environ
-ment
learning
Peers
Child
Community

What to do

- Promote early identification
- Reduce duration of untreated mental illness
- Teachers
- Vulnerable populations
- School belonging
- Implementation focus

Teachers

- Teacher preparation programmes
  - Knowledge of Social Emotional Learning (SEL) has significant implications for
    - Students they teach
    - Job satisfaction
- Prevent Burnout cascade
- Preparedness to provide and assess mental health supports predicted by ACCESS to
  - training
  - resources
  - coaching

Target those with known risk factors

- Family discord
  - Separation
  - Substance misuse
  - Violence &/or incarceration
- Victim of abuse
  - Bullying
- Health problems
  - Physical health problems
  - Parents with mental health problems
- Early puberty
- Self-harm (Non-Suicidal Self Injury NSSI)
- Migrant/displaced populations

Don’t forget importance to focus on

- School belonging
- Improve interpersonal relationships
- Emotional regulation

Conclusions

- Issues specific to adolescent mental health
- Schools
  - Can **democratise access** all children
  - Potential way to identify and refer to clinical services
- Interventions
  - Part of a system of care
  - Look after teachers
  - Mental health promotion
  - Focus on vulnerable groups
  - Early referral to services

Questions for you:
In Secondary schools

- If a child wants to see the school mental health worker, should the parents be informed?
- Do they need to give consent beforehand?
- Who in the school needs to know?

In partnership with

bank workers charity

www.bwcharity.org.uk

Coping with your low mood

UNIVERSITY OF OXFORD

UNIVERSITY OF EXETER | MEDICAL SCHOOL

9 Common Causes of Low Mood

Bullying

Falling behind with school work

Family problems and arguments

Loneliness

Traumatic events

Physical health problems

Family history of depression

Moving school or home

Friendship and relationship difficulties

Symptoms - Mind and Body

Psychological

Frightened, worried or anxious

Upsetting thoughts

Guilt

Lack of interest and motivation

Isolating yourself

Sad and tearful

Physical

aches and pains

self-harm

changes in appetite

tired

disturbed sleep

8 Ways To Help Yourself Feel Better

Spend time with a friend

Keep active

Sleep well every night

Eat healthily and regularly

Avoid drugs and alcohol

Listen to music, draw, read or write a diar

Speak to an adult (parent, teacher or health worker)

Plan something to do each day

Places where you can get more help

Charities

Youngminds.org.uk
Youthhealthtalk.org
Childline.org.uk; 0800 1111
Samaritans.org; 116123

Books

For a list of helpful books:
Reading-well.org.uk

Contact a parent, teacher or:

Produced by The Bank Workers Charity in collaboration with
Mina Fazel and Tamsin Ford

www.bwcharity.org.uk

Thanks

- University of Oxford
  - Oxford CLAHRC
  - Prof Alan Stein and team
- Sharon Hoover, Center for School Mental Health, University of Maryland
- NIHR
- Oxfordshire services
  - Pauline Scully & Donna Clarke, Oxford Health NHS Foundation Trust staff
  - CCG: Sarah Breton and Lajla Johansson

mina.fazel@psych.ox.ac.uk