



CAMPBELL RIVER
School District 72

Mental Health & Wellness Framework

**There is no health
without mental
health.**

– World Health Organization

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Our Shared Vision for Mental Health and Wellness

Indigenous peoples' perspectives and knowledge are closely aligned with the tenets of the BC Ministry of Education's Educated Citizen. Mental wellness is viewed through the important lens of balance in all areas of one's life.

In keeping with Indigenous perspectives and knowledge:

Mental health and wellness “illustrates the importance of mental, emotional, spiritual and physical facets of a healthy, well and balanced life. It is critically important that there is balance between these aspects of wellness and that they are nurtured together to create a holistic level of well-being in which all four areas are strong and healthy.” First Nations Health Authority

Mental wellness is a balance of the mental, physical, spiritual and emotional. This balance is enriched as individuals have:

- Purpose in their daily lives whether it is through education, employment, caregiving activities, or cultural ways of being and doing;
- Hope for their future and those of their families that is grounded in a sense of identity, unique Indigenous values, and having a belief in spirit;
- A sense of belonging and connectedness within their families, to community, and to culture;
- And finally, a sense of meaning and understanding of how their lives and those of their families and communities are part of creation and a rich history.

A quality education system assists in the development of human potential and improves the well-being of each individual person in British Columbia society.

– BC Ministry of Education

Connectedness is about creating school communities where everyone feels cared for, safe, seen, heard, supported and significant.

– Healthy Schools BC

Mental Health and Wellness – A Strategic Priority



School District 72 Strategic Plan (2019-2023)

The Board of Education heard the importance of ... supporting students' and staff mental health, all while continuing to provide innovative, caring, safe and inclusive environments ...

The Board of Education commits:

That a framework to support student and staff mental health and wellbeing [would be] developed by the end of the 2019-2020 school year and is in practice within the district.



PRIORITY TWO

Build a culture of learning and wellness.

Supporting a child's learning is a shared responsibility and a responsibility taken very seriously by all district staff, regardless of their role. The world around us is changing rapidly, as is the teaching and learning within our schools. We understand that the environments our staff work in are the same environments our students learn in and these environments form the base for our students' resiliency and attitudes around learning for the rest of their lives.

Goal 2:

District management will develop a framework to support student and staff mental health and wellbeing.

The Public Health Agency of Canada defines mental health as “the capacity of each and all of us to feel, think, act in ways that enhance our ability to enjoy life and deal with the challenges we face. It is a positive sense of emotional and spiritual well-being that respects the importance of culture, equity, social justice, interconnections and personal dignity.”

Why this? Why now in School District 72?

In Campbell River School District, 15 percent of students reported having a mental health condition (McCreary, 2018). This parallels the provincial and national average. Consistent with the pattern in previous McCreary survey years, females were more likely than males to report having a mental health condition. The rate was significantly higher among non-binary youth.

When asked about specific mental health conditions, students were more likely to report having some of these conditions in 2018 than in 2013. These included:

- Anxiety Disorder/panic attacks (19% in 2018 vs. 8% in 2013)
- Depression (15% in 2018 vs. 10% in 2013)
- Attention Deficit/Hyperactivity Disorder (7% in 2018 vs. 6% in 2013)
- Post-Traumatic Stress Disorder (3% in 2018 vs. 1% in 2013)

Further, 15 percent of students reported missing at least one day of school in the past month because of mental health challenges (e.g. depression, anxiety), including five percent who missed three or more days for this reason. Also, 14 percent indicated they were too anxious or depressed in the past year to participate in sports or extracurricular activities.

Overall, 65 percent of students reported feeling happy all or most of the time in the past month, a quarter (25 percent) felt happy some of the time, and 11 percent felt this way only a little of the time or never. Students were less likely than in 2013 to feel happy all or most of the time.

According to our 2019 District Employee Mental Health Literacy and Self-Assessment of Mental Wellness:

- 66% rated their mental health as either excellent or good
- 30% rated their mental health as fair
- 4.5% rated their mental health as poor
- 26% reported they had high or extreme amounts of stress in their personal lives
- 37% reported they had high or extreme stress in their work lives

And according to Foundry Campbell River Service Utilization Statistics for ages 12-24 for June 2018 - August 2019 (706 youth in total):

- 144 youth accessed mental health and substance use services
- 122 youth accessed counselling or social services
- 82% indicated high or very high distress
- 45% indicated medium or high substance use
- 37% indicated suicidal ideation within the past month with an additional 28% indicating suicidal ideation within the past year

Protective Factors in Schools

The McCreary report also points to several protective factors that are in place in schools and that can be enhanced to support student in building their mental wellness (McCreary, 2018). When other protective factors were taken into account, family connectedness and school connectedness were the most consistently associated with positive mental health. For example, the more connected youth felt to family or school, the more likely they were to report excellent general health and higher self-esteem, and the less likely they were to have considered suicide.

Commitment to Indigenous Learners, Families and Communities

The Campbell River School District operates on the traditional territories of the Laichwiltach, Klahoose, and K'omoks First Nations. We honour our relationship with these First Nations, the Homalco First Nations and all other First Nations, Métis and Inuit peoples who reside in these territories.

This framework must prioritize the SD72's strategic plan to honour Indigenous world views and perspectives and by including specific goals, objectives and strategies.

We are in agreement with the First Nations Health Authority that "...through our relationships and partnerships [we] will ensure that all First Nations people have access to a culturally safe, comprehensive, and coordinated continuum of mental health and wellness approaches that affirms, facilitates and restores the mental health and wellness of [Indigenous] people..."

There are many societal factors that impact the mental health and wellness of individuals and communities, some key contributing factors include:

- Colonization and assimilation
- Systemic discrimination and racism
- Child apprehension
- Land dispossession
- Loss of tradition, language and culture
- The legacy of residential schools
- Intergenerational trauma and its effects

First Nations Health Authority – What We Do - Mental-Wellness-and-Substance-Use (2019)

As per the Truth and Reconciliation Commission's *Calls to Action*, we must:

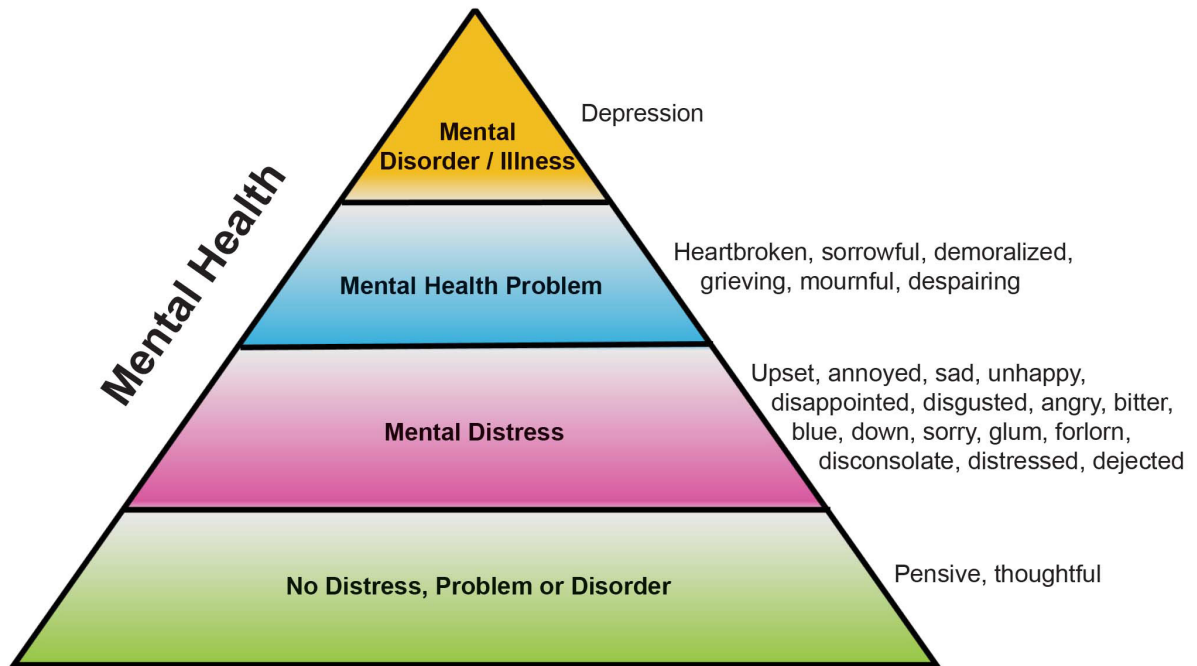
- make [and utilize] age-appropriate curriculum on residential schools, Treaties, and Aboriginal people's historical and contemporary contributions to Canada...
- provide the necessary [resources] to utilize Indigenous knowledge and teaching methods in classrooms
- ...recognize the value of Aboriginal healing practices and use them... in collaboration with Aboriginal healers and Elders...
- build student capacity for intercultural understanding, empathy, and mutual respect.
- ...provide cultural competency training... that includes... skills-based training in intercultural competency, conflict resolution, human rights and anti-racism.
- identify [educator] training needs relating to the above.

Learning ultimately supports the well-being of the self, the family, the community, the land, the spirits, and the ancestors.

– First Nations Education Steering Committee

What is Mental Health?
What is Mental Illness?
What is Wellness?

What is mental health? What is mental illness?



Mental Distress	<p>Refers to the common, expected, and normal response to the stresses of everyday life. Mental distress is normal, expected, and happens to everyone. It is necessary for adaptation and building resilience.</p> <p>Examples include:</p> <ul style="list-style-type: none"> • Writing an examination • Having an argument with a friend or family member • Failing at a task
Mental Health Problem	<p>Refers to the reactions we have to huge life challenges that may task our ability to adapt. Mental health problems may be substantial and prolonged but they are not mental disorders and they do not require medical treatment</p> <p>Examples include:</p> <ul style="list-style-type: none"> • Dealing with the death of a loved one • Loss of a relationship, such as divorce • Moving to a new country
Mental Disorder/ Illness	<p>Refers to clinically diagnosed illnesses. Mental illnesses require evidence-based treatments provided by properly trained health care providers.</p> <p>Examples include:</p> <ul style="list-style-type: none"> • Major Depressive Disorder • Panic Disorder • Bipolar Disorder

What is wellness?

Wellness is an active process of becoming aware of and making choices toward a healthy and fulfilling life. Wellness is more than being free from illness, it is a dynamic process of change and growth.

There are at least eight dimensions of wellness:

- Mental/intellectual
- Physical
- Spiritual
- Emotional
- Social
- Environmental
- Financial
- Occupational

Each dimension of wellness is interrelated with another. Each dimension is equally vital in the pursuit of optimum health.

“... a state of complete physical, mental, and social well-being, and not merely the absence of disease or infirmity.”

— World Health Organization



“A conscious self-directed and evolving process of achieving full potential.”

— National Wellness Institute

Our Focus: Four Components of the Framework

FOCUS 1

Understanding mental health and wellness.

This area focuses on the identification of key content and curricular areas where mental wellness can be a focus, integrated and taught throughout the year. Training and capacity building for system professionals is key to the success of this initiative. Capitalizing on existing work and the identification of key resources as a starting point for continued growth will be an important and ongoing task. Indigenous knowledge and perspectives are fundamental to the design, implementation and review of the framework.

FOCUS 2

Promoting mental health and wellness.

Mental health promotion uses a comprehensive framework to promote anti-stigma initiatives within school communities to create an atmosphere of trust and support that represents mental wellness as a normal facet of life; just as physical health is. Information and practices that promote protective factors and resilience building are key to this work. It is critical to build a shared understanding of the importance of language used when discussing mental wellness. In doing so, the intention is to embed positive mental wellness into daily life and to increase our ability to address mental health and wellness within the school community.

FOCUS 3

Supporting caring school communities.

A focus on mental wellness and well-being is central to the development of a caring community – a school community that is safe, inclusive and connected is central to our work. Schools will be supported to create school mental health and wellness plans that consider current school supports and initiatives and identify strengths and areas for growth.

FOCUS 4

Community and collaboration.

Working in partnership with community agencies and parents and caregivers ensures a broad perspective on the current and future work. Opportunities to partner with and learn from community agencies will strengthen our ability to support and respond to student needs. Ensuring parent/caregiver knowledge and understanding ensures consistent messaging both at school and at home. Through the use of an advisory committee structure with broad representation, the district strategy will be enhanced and strengthened.

Multi-Tiered Systems of Support

The district's model of support is based on three levels of supports and services: universal, targeted and specialized. It is used to identify pathways through services and a continuum of supports, including mental health promotion, early identification, interventions and specialized services. All students need universal supports provided through high-quality teaching and whole-school approaches. Some students will need additional targeted services, such as small group support or counselling services.

Specialized Supports and Services

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

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

Targeted Supports and Services

For: **some students requiring additional supports**

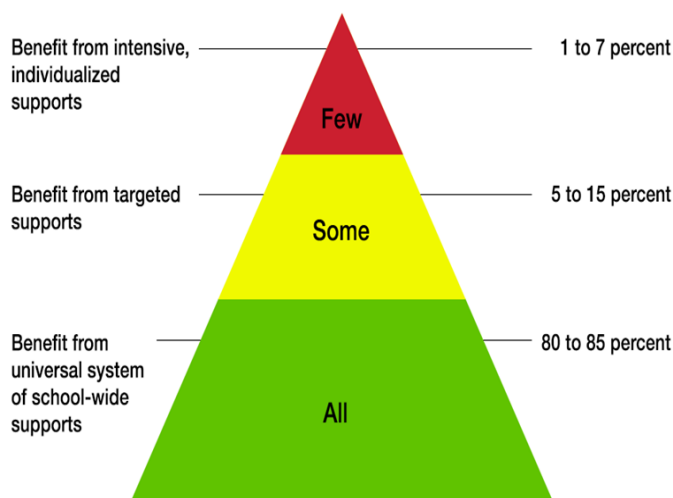
- Policies, processes and practices are in place to ensure early identification of students who are not making progress when universal supports are in place.
- Evidence-informed, short-term, individual and small group supports and interventions are available within the school setting.

Universal Supports

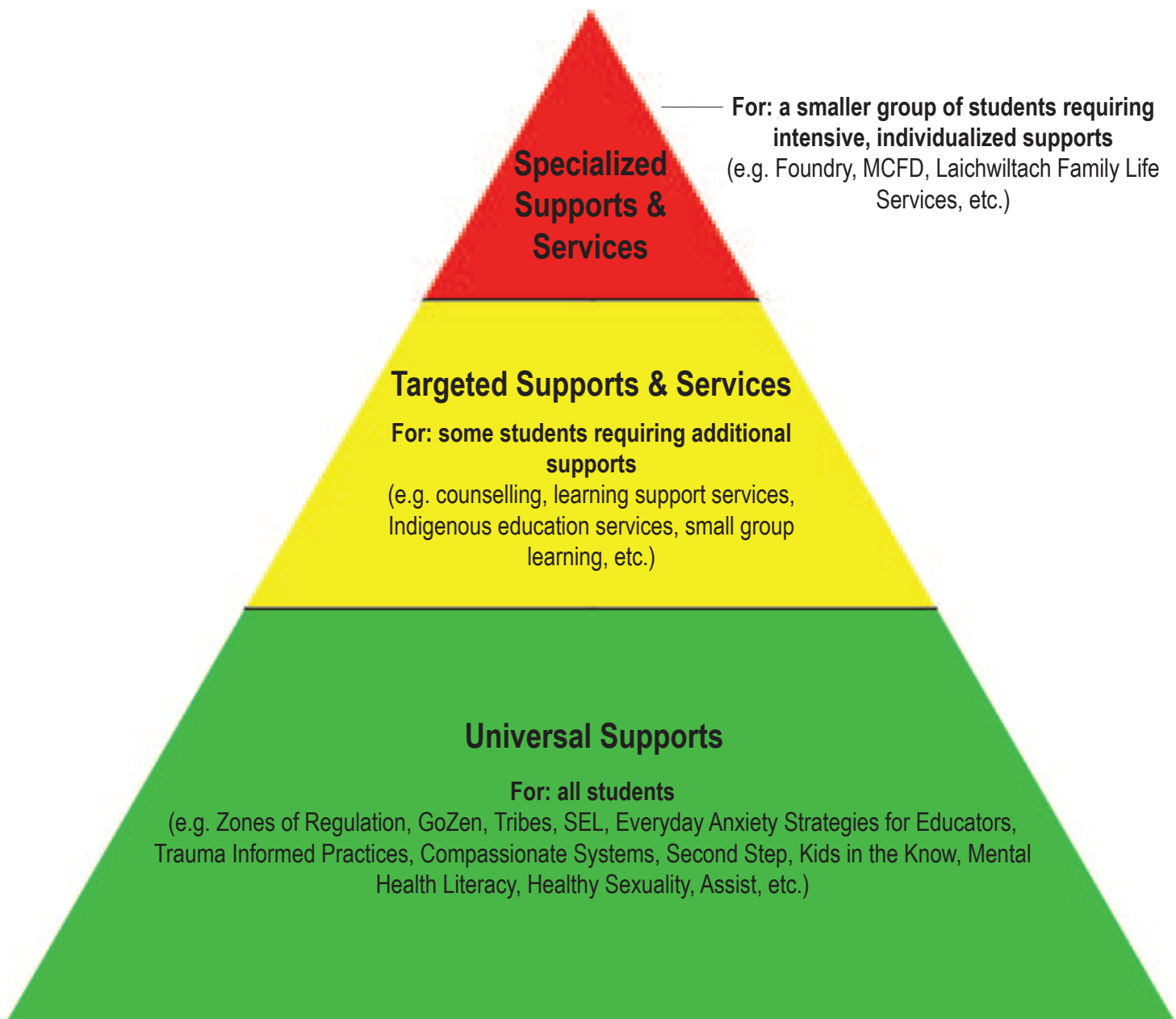
For: **all students**

- Whole school approaches are in place to create welcoming, inclusive, safe and healthy learning environments.
- Quality instruction responds to a diverse range of learning strengths, needs and challenges.
- Social emotional learning and regulation practices for teachers and students are embedded into instruction and classroom activities. This includes strategies for social, emotional, cognitive and physical development.
- Peer supports are available and supported by qualified school staff members.

Schools will create their own school-based mental health action plans (see appendix) that consider all tiers of the pyramid.



Mental Health and Wellness Plan for Schools



A three-year operational plan will accompany this framework. The operational plan will identify goals, targets and timelines.

References

Include but are not limited to:

Social Emotional Learning and Mental Health: A Framework for Dialogue - NVSD
Navigating Mental Health - Edmonton Public Schools
School District 72 Strategic Plan: 2019-2023
Public Mental Health Action Framework - Sudbury and Districts
Mental Health Framework for Students - Manitoba Association of School Superintendents
Public Health Agency of Canada - www.phac-aspc.gc.ca/cd-mc/mi-mm/index-eng.php
Assembly of First Nations and Health Canada
World Health Organization
First Nations Mental Wellness Continuum Framework - Health Canada
Mental Health/Illness Dual Continua Model - Keyes, 2005
BC Healthy Schools
BC Ministry of Education
Mental Wellness in Saanich Schools: A Strategic Approach
FNHA's Policy on Mental Health and Wellness
Results of the 2018 BC Adolescent Survey - McCreary Foundation
Foundry Campbell River
System Leadership in School Mental Health in Canada - CASSA Discussion Paper, 2017
Leading Mentally Healthy Schools: A Resource for Administrators - School Mental Health ASSIST
First Nations Education Steering Committee



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