PROMOTING SCHOOL-WIDE MENTAL HEALTH

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Although schools are not traditionally designed to provide intensive mental health services to children, they are in a position to create systems that foster mental health. By creating school-wide systems in which students are academically, behaviorally and socially successful, schools can integrate those essential protective factors shown to contribute to mental health. The purpose of this paper is to thoroughly explore factors impacting the mental health development of students and then to examine school practices that foster mental health. This paper will identify those school-wide practices that are associated with mental health. Specifically, this paper will review current approaches in schools that promote mental health in students, including instructional practices, curriculum design, ecological considerations, teacher perceptions, and social competence building.

Emerging mental health concerns
According to the Surgeon General's Report on Mental Health (2000), children and adolescents in this country are experiencing mental health problems at alarming rates. It is reported that one in 10 children and adolescents will suffer from mental illnesses significant enough to impact social and educational functioning. Further, behavioral and emotional problems can have a disruptive impact on home, school and community to such a degree that mental health has become a public health concern (Brener, Weist, Adelman, Taylor & Vernon-Smiley, 2007). Despite this startling trend, it is estimated that one in five children actually receive mental health support. The gap between services and the emotional needs of children and adolescents is a known problem (Surgeon General's Report, 2000). Further, information compiled by the Global Burden of Disease of the World Health Organization found that over the course of the next decade childhood neuropsychiatric disorders will rise by over 50 percent internationally. If there is not significant international focus on this phenomenon, mental health problems will become one of the five most common causes of morbidity, mortality and disability among children worldwide (Murray & Lopez, 1996). In response to the disconnect between the mental health needs of children and adolescents and the services available, the President's New Freedom Commission on Mental Health was created (2003). The results of the Commission's study recognized the critical role schools need to play in promoting mental health in children and adolescents. Further, the report mandated that schools become more active participants in meeting the mental health needs of their students (New Freedom Commission, 2003). Although schools are not structured to provide intensive mental health services to children and adolescents, research has shown that features, such as school-wide intervention systems, can have significant positive impact on the social and emotional development (Brener, Weist, Adelman, Taylor & Vernon-Smiley, 2007).

Risks to students
Risk factors are those *negative or potentially negative conditions that impede or threaten normal development* (Keogh & Weisner, 1993). Risk factors are stressors that increase the likelihood of the development of emotional, social or behavioral problems. Risk factors include internal influences, such as biological and psychological risks, as well as external influences, such as family and community risks and stressful life event risks (U.S. Department of Health and Human Services, 1999; Werner & Smith, 1992).

Biological risks are those abnormalities that impact the central nervous system and impact development. These influences can be inborn predispositions, such as a difficult temperament, poor social competence or poor problem solving skills (Garmezy, 1993), or the result of environmental trauma, such as prenatal damage due to exposure to alcohol or tobacco, perinatal trauma, and malnutrition during pregnancy. (Nichols & Chen, 1981; Rowe & Kahn, 1998; Whitaker et al., 1997).

Psychological risks are those individual personality characteristics that are associated with poor future outcomes (Greene and Conrad, 2002). Critical psychological characteristics strongly associated with poor future outcomes are disturbances in the in the capacity to emotionally attach to others (Hanson & Lynch, 1995). Early relationships help to form the children's personality and emotional connectedness to those around them (Thurman & Widerstrom, 1990). Children growing up in abusive or neglectful environments develop difficulties forming nurturing and loving relationships, regulating emotions, and benefiting from social support (Barnett, 1997). The lack of attachment has been shown in the literature to put children at-risk of developing future depression (Toth & Cicchetti, 1996) and conduct disorders (Sampson Laub, 1993). Other psychological influences that act as potential risk factors stem from the effects of abuse and neglect. Children growing up environments in which they are continuously subjected to abuse (physical, sexual or psychological) develop long-term emotional and behavioral effects, including disregulation of affect, the avoidance of intimacy and provocative behaviors. Disregulation of affect refers to an inability to describe one's own feelings and a tendency to avoid displays of emotions (Lowenthal, 1999). Avoidance of intimacy refers to a propensity to avoid intimacy through behaviors such as avoiding eye contact, physical withdraw, hyperactivity or exhibiting inappropriate behaviors (James, 1994). Abuse and neglected children may also act out provocatively or aggressively. They inflict harm upon themselves or others, dress or act in an overtly sexual manner, or behave in a variety of antisocial ways (Lowenthal, 1999).

Family risks are those dysfunctional familial characteristics that can threaten a child's development. Rutter & Quinton (1977) studied familial characteristics impacting child development and found several that were consistently linked to poor future outcomes, including severe parental conflict, overcrowding within the home, and a parental history of criminal behavior or psychopathology. Additionally, children experiencing or witnessing chronic violence in the home are much more likely to experience poor outcomes than children in violence-free homes (Hinton-Nelson, Roberts, & Snyder, 1996). Family economic factors have also been identified as indirect risk factors. Families experiencing economic troubles experience higher levels of stress, which in turn increases the likelihood of abuse and neglect towards children (Dutton, 1986). Another indirect family influence involves the neighborhood and community in which the family lives. Additional family characteristics associated with poor outcomes, include a history of maternal mental illness, parent(s) working in an unskilled occupation, and being of a disadvantaged minority status (Sameroff et al., 1998)

Community risks refer to those conditions and influences that turn neighborhoods and other populated areas into hostile environments. There is a direct relationship between the characteristic of the neighborhood children live in and levels of violence against children. Characteristics found to be a solid predictor or violence in neighborhoods is the concentration of poverty within a given community (Garbarino & Crouter, 1978; Garbarino and Sherman, 1980). Living in violent environments impacts children's emotional state and development. Children who are exposed to chronic fear of danger may live with high levels anxiety, see themselves as having limited futures, and feel that they have little control over their lives (Wallach, 1994).

Stressful life event risks refer to those unexpected circumstances that cause out-of-the ordinary levels of stress and hardship. Stressful life events identified in the literature as being associated with negative outcomes include parental death or divorce (Birmaher et al., 1996; Garrison et al., 1997), and surviving a life threatening experience (Hinton-Nelson, Roberts, & Snyder, 1996; Mandic-Martinez, 1998; Williams; 1999).

Protective factors
The sustained effects of risk factors depend on a child's ability to be resilient. (Christiansen, Christiansen, & Howard, 1997). A central theme within the definition of resiliency points to adversity being the stimuli that precedes the resiliency process. Therefore, once under stress, a mechanism is encaged that mediates the effects of these risks. This mediating mechanism is theorized to include variables known as *protective factors*. Protective factors are *those environmental context variables that buffer or mediate the negative impact of biological or psychosocial events over time* (Werner, 1986). Children who are resilient possess a number of protective factors that tip the scale in their favor for developing positive psychosocial outcomes despite exposure to risk-factors (Garmezy, Masten, &Tellegen, 1984; Rutter, 1985; Seifer, Sameroff, Baldwin & Baldwin, 1992; Werner & Smith, 1982). Protective factors are those environmental context variables that buffer or mediate the negative impact of biological or psychosocial events over time (Werner, 1986).

Werner and Smith (1992) identified clusters of five protective factors that distinguish positive and negative long-term outcomes for children living under similar circumstances of risk. Psychological characteristics found having an even temperament that elicits positive responses from family members and others, (2) having an affectionate relationship with a significant adult, (3) having an external support system, such as school, church, or youth group, which provides a sense of belongingness and fosters confidence, (4) having an overall disposition to set goals and actively participate in decisions regarding their life and future, and (5) having an average intelligence. Other research on protective factors supports and extends the research of Werner and Smith (1992). Masten (1994) found correlates of resiliency to also include a history of effective parenting, having areas of talent or accomplishments, a sense of self-worth and hopefulness, socioeconomic advantages, and attending good schools other community assets.

Families can provide vital levels of protection despite risks outside of the home. Masten, Best, and Garmezey (1991) argue that children's self-esteem develop within the family context. Homes characterized by open communication, emotional expression, warmth and support are more likely to rear resilient children (Hechtman, 1991). Parent-child interaction patterns that promote intellectual and social development have been identified, including providing children with opportunities to explore and gather information, mentoring children in developing new skills, celebrating developmental milestones, and avoiding harsh and ridiculing punishment.

In summary, resiliency theory attempts to address the observable phenomena regarding an individual's ability to adapt despite adversity. The central mechanism operating within resiliency theory is the interplay between risk and protective factors. There is a sizable knowledge-base that has identified specific types of risk and protective factors associated with resiliency. In turn, the specificity of this knowledge-base has proved schools systems with the opportunity to explore resiliency factors relevant to the school environment, as well as apply those resiliency principles already established within the literature.

School-wide practices that foster mental health
Within the current school climate, students come to school with diverse learning, behavioral and emotional needs (Christiansen, Christiansen, & Howard, 1997). Although individual characteristics put a child at-risk for poor school outcomes, research indicates that the probability of a student's success in school correlates positively to the effectiveness of the school itself (Rutter, 1983). Ineffective schools generate their own set of risk factors that can negatively impact student's educational and social development. Ineffective schools have overcrowded classrooms, inadequate materials and supplies, frequent changes in staff, high rate of staff absenteeism, frequent moves by pupils, and few resources or special programs (Kasdin, 1992). Ineffective schools are not successful in providing basic educational opportunities for a large portion of their student population. Research has shown that poorly educated students have low academic achievement, retention in grade, poor school attendance, and low self-esteem (Frymier, 1992; Slavin, Karweit, & Madden, 1989; Waxman, deFelix, Anderson, & Baptiste, 1992). Conversely, research has demonstrated that effective schools can play a critical role in ameliorating the impact of risk factors.

The growing expectation is that schools will deliver socially acceptable, effective, and efficient interventions to ensure safe, productive classroom environments where norm-violating behavior is minimized, and pro-social behavior is promoted (U.S. Department of Education, 2000). The research on resiliency has suggested that schools provide an ideal environment in which to promote academic, personal, and social competencies that are associated with resilient children (Powers, 2002). Further, effective schools have been found to exemplify a range of protective factors through instructional practices, curriculum, teacher perceptions, the ecology of the school and classroom, and the promotion of social competence.

Instructional practices
Many at-risk children enter the school setting with limited opportunities and experiences, therefore in order to promote resiliency in classrooms, students must experience a sense of success (Miller, 1995). Barbara Keogh (2000), in a paper exploring issues surrounding children at-risk for acquiring developmental and educational problems, suggested that instructional practices should be based on the results of major research programs in order provide best practices that impact the greatest number of students. For example, research in reading instruction has provided evidence of the effectiveness of phonologically based instruction for most beginning readers and many children with reading problems

(Alexander, & Yaffe, 1997; Lyon, 1995; National Reading Panel, 2000). Additionally, instruction geared towards enhancing reading comprehension and fluency have shown to be successful for at-risk students (National Reading Panel, 2000; Pressley et al., 2000).

Teachers' interactive and supportive practices contribute to the overall classroom environment. Research has shown that supportive practices (e.g., positive praise during academic instruction) have been associated with increased student achievement (Brophy & Good, 1986), and appropriate task behavior (Nowacek, McKinney, & Hallahan, 1990). The positive influence of teacher praise becomes an expected and important factor within the environment that can set the occasion for pro-social and pro-academic behaviors. Research has demonstrated that increases in teacher praise have resulted in desirable classroom behavior, such as increased task engagement (Sutherland, Wehby, & Copeland, 2000) and fewer disruptions (Gunter et al., 1993). A teacher's style can also function as a risk factor by contributing to a poor learning climate. For example, negative teacher practices (e.g., verbal reprimands, physical restraint) have been linked to increased (a) disruptive behavior (Thomas, Becker & Armstrong, 1968) and (b) negative behavior (e.g., disruption, off-task behavior of students) (Beyda, et. al., 2002, Van Acker, Grant, & Henry, 1996). Henderson and Milstein (2003) suggest that teacher practices should promote and communicate high expectations. The procedure for encouraging high expectations should include identifying clear outcomes, supporting and providing feedback, providing cooperative learning opportunities, celebrating successes, and developing supportive partnerships with the community.

Curriculum
The content of the curriculum is often determined at the school district and state level. Teachers are obligated to instruct on the materials defined by the curriculum but students whose skills are discrepant from the content of the curriculum face daily failure. The content of the curriculum should allow for variations across the learning continuum so that individual differences can be addressed. Despite the push for individualization of instruction, school districts determine curriculum content according to grade level (Keogh, 2000). Another variable to school protective factors is the availability of adequate materials and supplies. And for those who are not succeeding in the regular curriculum, the availability of special resources and programs (Krasner, 1992).

Another protective factor that should be considered when developing or selecting curriculum is the availability of access to and support of student interest areas. Katz (1994) reported that children who successfully meet the challenges of trauma or other difficult life events often report an interest, a hobby, or a skill for which they receive positive recognition. Children do not have to excel in a chosen interest, but they must have the opportunity to achieve and be given attention and be acknowledged for the achievement.

Teacher perceptions and behaviors
Teachers' perceptions and expectations are influences that can form protective factors against risk. UCLA researchers were able to show that the frequency and nature of interactions between teachers and students are related to teachers' beliefs about children's potential for achievement and students' personal attributes, including temperament (Keogh, 1982; Keogh & Burstein, 1988). Both teachers and peers perceive antisocial children as negative and coercive. There is evidence that teachers and non-antisocial peers retaliate coercively (Reid & Eddy, 1997). Protective influences to reduce both the escalation and impact of behavior problems is to train adults in effective management skills for the immediate social setting, such as clarity and appropriateness of rules, clear and fair and immediate consequences, and adult supervision and follow through. Additionally, protective influences within peer groups would include teaching all students social problem solving skills, and strategies for effectively monitoring and responding to children with behavior problems (Reid & Eddy, 1997).

Further, studies have shown that teachers who are interested in and spend time with at-risk students are serving as important protective factors. Mentors serve as a critical support for children who are at-risk. Children who have a significant attachment to or bond with an adult tend to face their challenges more productively and are more likely to experience success (Garmezy, 1987, 1992; White-Hood, 1993). In a study conducted by Vance, Fernandez, and Biber (1998) exploring the role of risk and protective factors in students with aggression and emotional disturbance, it was shown that having an adult mentor at school was also predictive of school success for these youth . White-Hood (1993) used a mentoring program to intervene with children who were identified as academically or behaviorally in trouble. White-Hood found that in addition to the positive, personal benefits gained by participating

students, the state assessment outcomes for writing and reading improved, school attendance increased, and suspensions decreased. Christiansen, Christiansen & Howard (1997) suggest that schools can train staff to provide attention for students who are at-risk or experiencing trauma.

Ecology of schools and classrooms
Schools are complex social systems. To improve and ensure positive long term outcomes for children at-risk, it is necessary to create school environments that promote resiliency in students (Keogh, 2000). Researchers have reported that environments that promote resiliency build and sustain a strong sense of community throughout the school. (Battistich, Schaps, Watson, & Solomon, 1996). A strong sense of community has been positively associated with fewer academic, social and behaviors problems (Battistich & Hom, 1997). Developing a sense of community within the school setting is done by creating classroom and school climates that embrace children, ensuring a sense of safety and security, and enabling each child to participate and learn more effectively (Keogh, 2000).

A component of creating effective school communities is providing students with well-managed classrooms. A well-managed classroom promotes resiliency by assuring that learning in the classroom is a priority (Phi Delta Kappa, 1998). Enhancing structure and organization are universal preventative measures frequently discussed in the literature pertaining to a sense of security and protection. Teachers who establish rules and procedures to support teaching and learning create an effective learning environment (Evertson & Emmer, 1982; Mayer, 1995). Conversely, when teachers select punitive classroom management responses (e.g., the overuse of time outs, detention and suspension), these responses can interfere with a sense of safety and caring where students perceive teachers' intentions as hostile (Hartman & Stage, 2000).

Opportunities for social interactions
Social support is considered a pivotal component of resiliency in that it serves as a stress-buffering function. Children with adequate social support may be resilient in the face of stressful events and life conditions (Dubow, & Tisak, 1989; Heller & Swindle, 1983). Resilient children have a network of personal relationships with supportive adults and peers. Werner (1989) found that resilient children have friends who give support in times of crisis. Similarly, Kauffman, Grunebaum, Cohler, and Gamer (1979) found that competent at-risk children had extensive relationships with adults outside the family, and had at least one close friend. Developing social competence is a principle goal of children's educational experience. The resilient child is able to establish relationships with adults and peers that are positive (Bernard, 1993). Schools need to provide at-risk students with multiple opportunities to develop relationships with peers and adults. A supportive social network provides students with opportunities to develop their social skills and develop their understanding of the functions, expectations, and dynamics involved in different relationships (Janas, 2002).

Conclusion
To help combat the growing international trend of childhood and youth mental health problems, schools must reorient their systems to play an active role in promoting mental health and well-being of students. Specifically, schools need to examine their practices to develop school-wide systems in which students are academically, behaviorally and socially successful. Schools are in a unique and important position to integrate the essential protective factors shown to contribute to mental health development and maintenance. Research has shown that the protective factors associated with greater school success include instructional programs that are based on the results of major research programs; curriculum that allows for variations across the learning continuum so that individual differences can be addressed and curriculum that accesses and supports student interest areas; enhancing teacher perception towards students with problem behaviors through skills training in effective management, social problem solving skills, and mentoring; and, developing the ecology of classrooms and school settings to incorporate a continuum of proactive interventions, as in positive behavior support.

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