How do educators use a strength based approach to youth learning that promotes resiliency and positive mental health?

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Defining Our Terms

- **Strength-Based vs. Deficit-Based**: Practices that focus on a youth's strengths and competencies and work with students to mutually discover how their personal resources can be applied to address identified concerns (Belonging, independence, Mastery, Generosity : Circle of Courage).
- **Resiliency**: is the ability to bounce back or withstand stress. Resilient individuals have healthy expectancies, a sense of optimism, an internal locus of control, good problem-solving skills, and good self-discipline. It is the capacity to thrive despite adversity - to overcome the odds.

Protective Factors: Distinguish individual and contextual elements that make a healthy behaviour more likely.

- Emotional awareness
- Emotional management
- Stress Management
- Assertiveness Skills
- Conflict Resolution
- Optimism
- Self-determination
- Positive Healthy Habits
- School connectedness
- Mental Health Literacy

Defining Our Terms

- School Connectedness: Factors that increase a youth's sense of belonging in school. A youth attachment to school and caring adults at school are the most important factors in reducing risk related behaviour.

- Positive Mental Health: The Public Health Agency of Canada describes positive mental health as "the capacity of each and all of us to feel, think, and 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" (2006, p. 2).

What?

Mental Health Literacy

- Obtain and maintain mental health(tools)
- Understand and recognize mental disorders
  - Seek help from appropriate services
  - Remove stigma
- Foundation for mental health promotion, prevention and intervention

Connectivity

- Enhancing student-teacher engagement
- Enhances student participation and success in school
- Trusting, authentic relationships are a protective factor
- Provides opportunities to employ strengths in learning

W^2

- Mental Health Model and Response to Intervention(RTI/PBS)
- What is a “Strength Based Approach”?
- What is “Resiliency”?
- What is mental health?
- Stigma
- ADHD and Teens
- Anxiety Disorders
- Professional Resiliency and its impact on school professionals and students
- Understanding families and supporting their resiliency
- Panel of Q & A on outside services and how they work
- Fitting it Concretely into RTI(PBS)

Why It's Important?

- Most of the major psychiatric conditions begin during the ages of 10-15(Stan Kutcher,2013)
- Helpful to teachers to understand resiliency and mental health
- Teachers can play a positive role in MH promotion
- Affects student participation in school and quality of life
- Mental Health Literacy is the foundation of mental health(Stan Kutcher,2013)

Now What

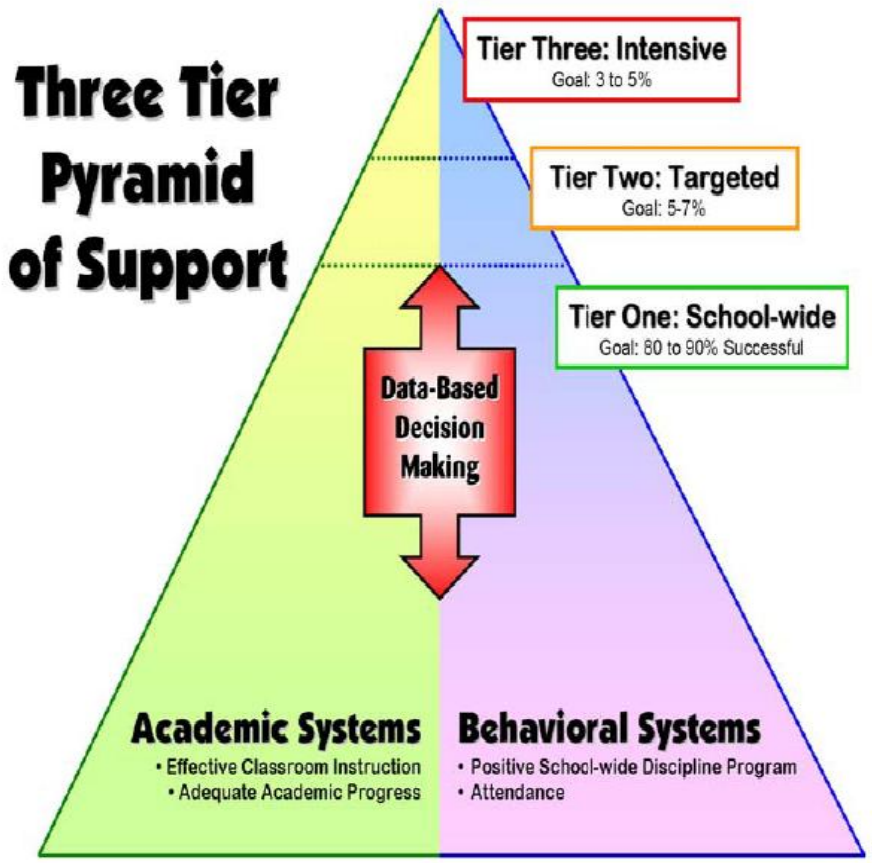
- Pulling it together…

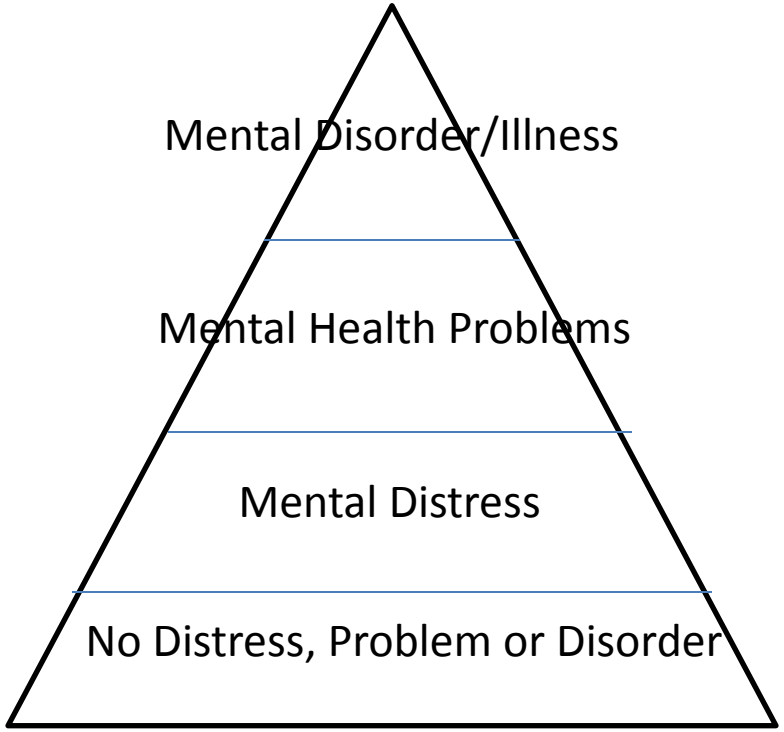
Future Direction

- Implementing universal understanding at schools of practical steps to “connectivity”
- Teaching students…Mental Health Literacy
- In our programs implementing teaching CBT “Tools” for self-regulating
- Trainers in Mental Curriculum Guide

Positive Behavioural Support Response to Intervention

- Interventions





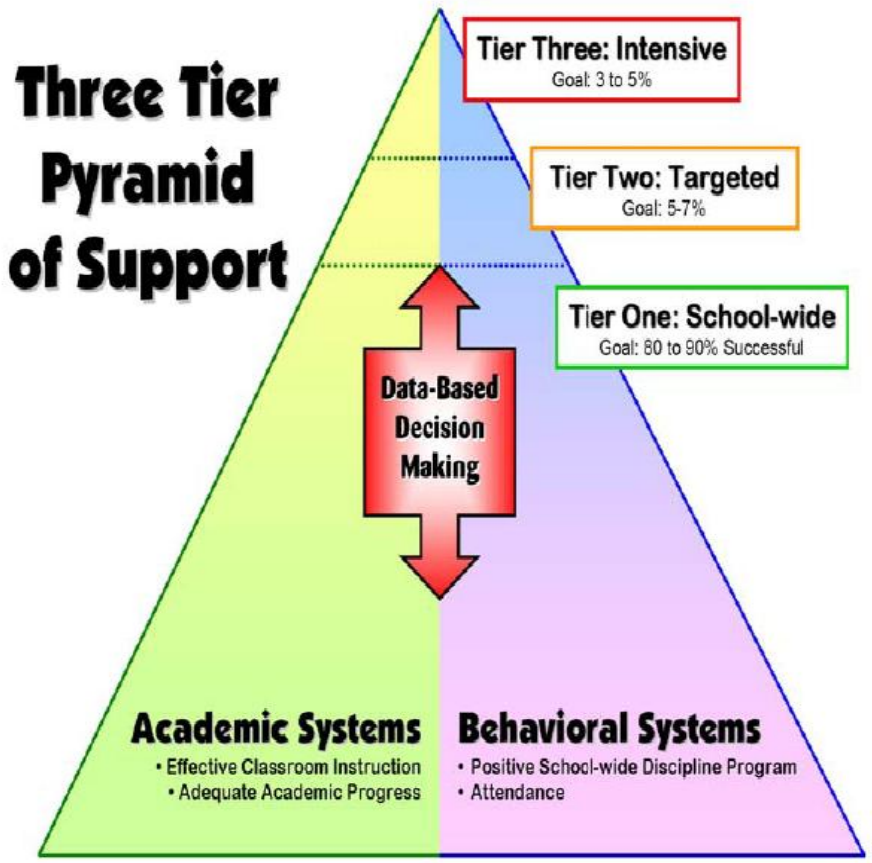
The inter-relationship of mental health states

A Little History Lesson

- PBIS formerly know as EBS and PBS
- University of Oregon
- George Sugia and Robert Horner primary researchers
- VSB first pilot 1999-2000
- New district initiatives for PBIS

Positive Behavioural Support Response to Intervention

- Interventions



Understanding PBIS and RTI

Positive Behaviour Support(PBIS)

- Evidence Based Practices
- Use systems to support adult practices to support students(Sugia & Horner 1999)
- Data based decision making to inform next steps
- Collaborative school, family and community partnerships

Response to Intervention (RTI)

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Positive Behavioural Support
PBIS

- Seeks to improve the quality of life of the individual by building an understanding of behavioural symptoms
- Model helps us understand contributing factors to behaviour and the function or purpose of Behavioural symptom
- Enables us to consider the role of the environment, instruction and human relationships in a child's behaviour
- Builds the professional capacity of educators through knowledge and collaboration

Key Understandings

- Look past the behaviours and see the child (behaviour is predictable and manageable when we understand the child's needs)
- Focus on earning their trust and respect
- Be proactive:95% of our efforts are focused on prevention
- Includes School Wide Behaviour Supports(SWBS)
  - Goal is to achieve socially important behavioural change by developing competencies and creating a positive school culture

Defining Response to Intervention

This practice of…

- Providing high-quality instruction and intervention matched to student need,
- Monitoring progress frequently to make decisions about change in instruction or goals
- Applying child response data to important educational decisions (NASDSE,2005)

Response to Intervention

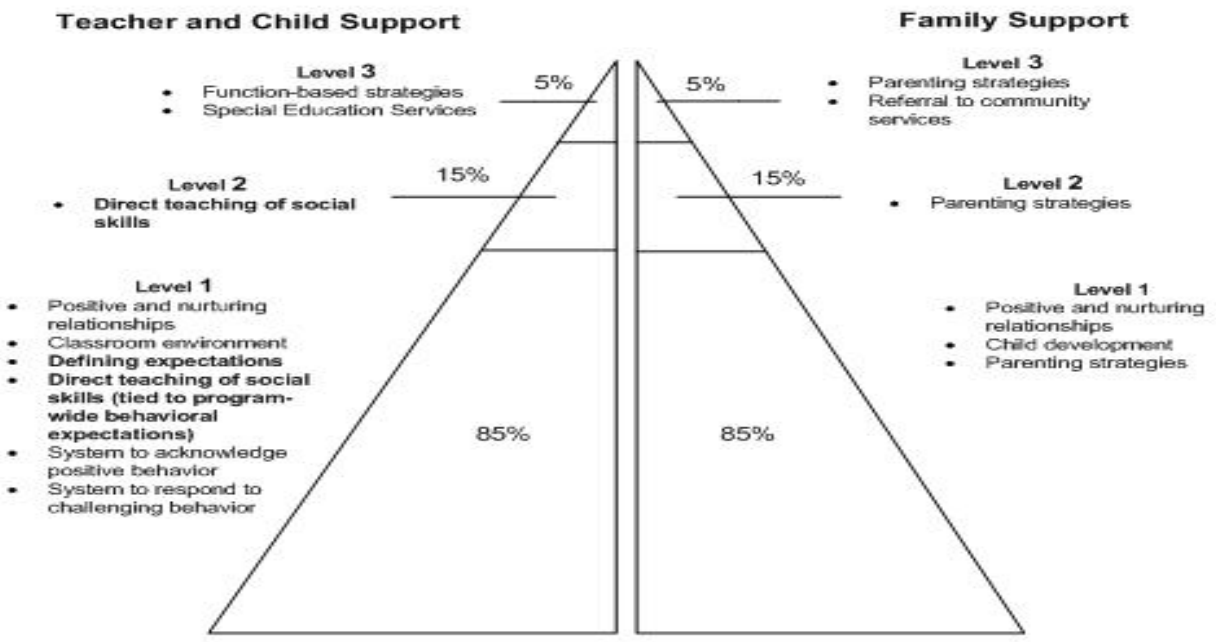
- Focus originated in learning disabilities or academic achievement…grew into behavioural interventions
- IDEIA 2004-05 regulations no longer required severe discrepancy between intellectual ability and achievement for determining if a child had a specific learning disability.
- Allowed for a process for determining whether a child has a specific learning disability. However must be evidence based.

Response to Intervention

- Allows for Dual Discrepancy Model
  - Performance is significantly below his or her peers
  - Despite several well designed, well implemented specific individual interventions there is a discrepancy in the rate of learning relative to peers.
  - Data collection and assessment monitor progress such as Criterion-Referenced Benchmarks e.g., DIBELS or Basic Early Literacy Skills for reading

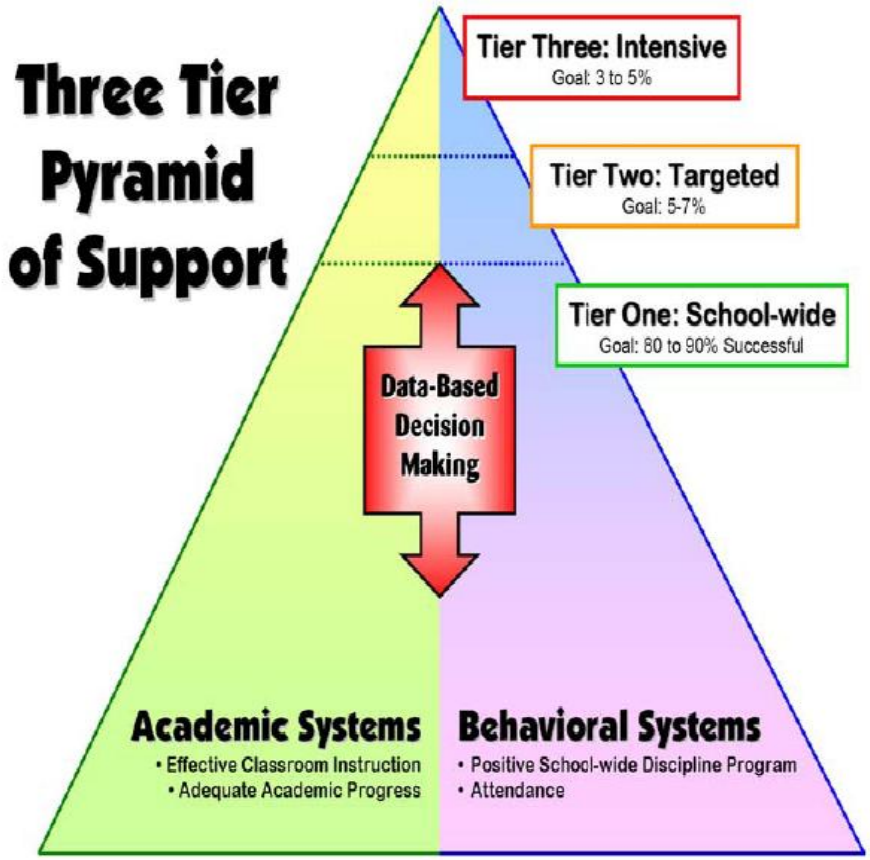
Pyramid Model for Social/Emotional and Behavioural Development

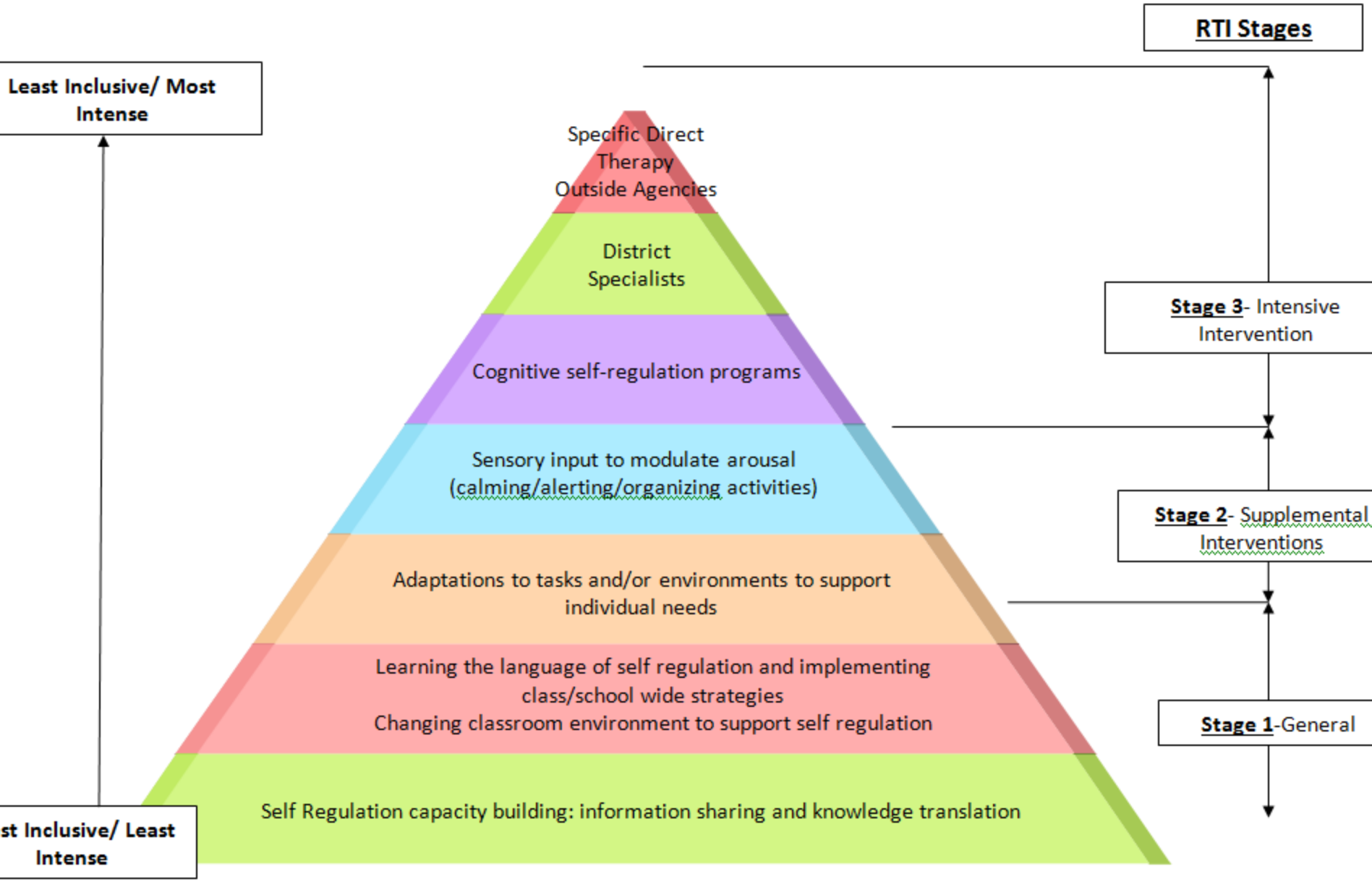
ECE



Positive Behavioural Support PBIS

- Interventions

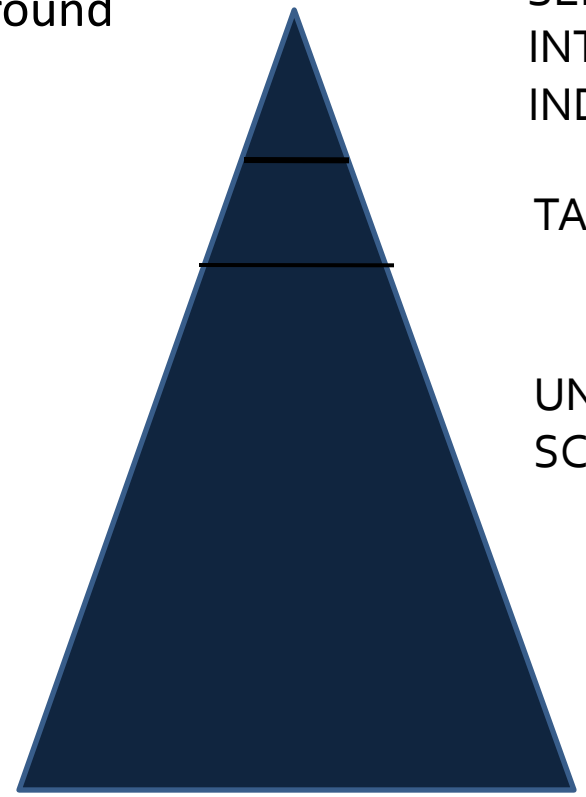



RTI Stages
Least Inclusive/ Most Intense
Specific Direct Therapy Outside Agencies
District Specialists
Cognitive self-regulation programs
Sensory input to modulate arousal (calming/alerting/organizing activities)
Adaptations to tasks and/or environments to support individual needs
Learning the language of self regulation and implementing class/school wide strategies
Changing classroom environment to support self regulation
Self Regulation capacity building: information sharing and knowledge translation
Stage 3- Intensive Intervention
Stage 2- Supplemental Interventions
Stage 1-General
st Inclusive/ Least Intense

What Do You Call It?

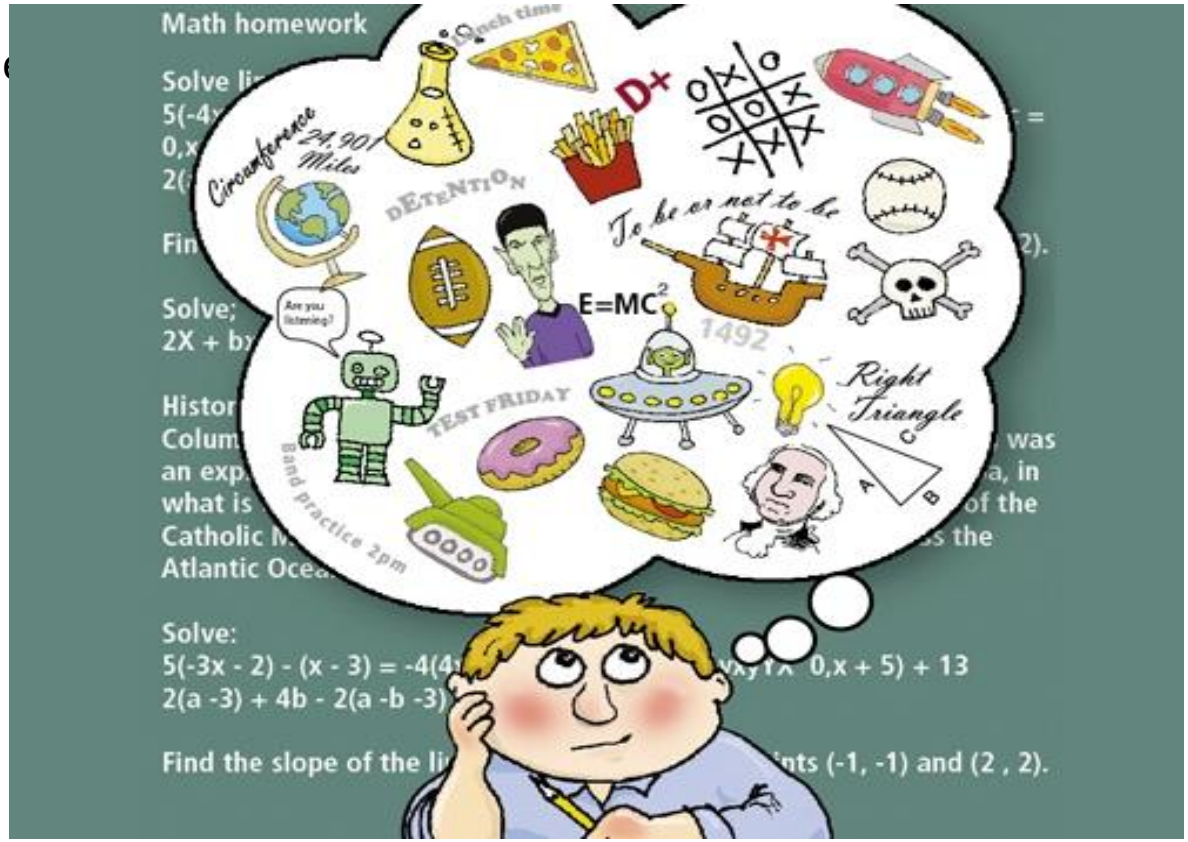
*Mind Up, Strong Teens, Check In-Out,

Worry Dragons, Wrap Around



SELECTED ?
INTENSIVE ?
INDIVIDUALIZED ?

TARGETED ?

UNIVERSAL ?
SCHOOL WIDE ?

So many great ideas!