



A Manual for Promoting Mental Health and Wellbeing:

The Educational Setting

ProMenPol Project

Final 2009

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1. Introduction

Emotional, behavioural and social problems are becoming more prevalent among school-aged children and appropriate methods for dealing with these issues need to be identified. A number of studies have estimated that approximately one-fifth of children suffer from developmental, emotional and behavioural problems, with higher rates found among children in the more disadvantaged population groups. Furthermore, children and young persons are likely to develop mental health problems from a surprisingly early age.

It is widely acknowledged that the early years of one's life have a major influence on a person's mental health and cognitive functioning. Good mental health during childhood is a prerequisite for optimal psychological development, productive social relationships, effective learning, the ability to care for oneself, good physical health and effective economic participation as adults in later years. There is growing evidence indicating the long-term value of promoting positive mental health in children and young people. Positive mental health is promoted through shaping during early childhood experiences, positive parenting, and more effective educational services and school programmes.

Studies suggest that the process of marginalisation and social exclusion which, for some individuals, becomes apparent in adulthood often begins to emerge during childhood and adolescence. Up to 50% of mental disorders have their onset during adolescence, frequently leading to aggressive and antisocial behaviour, delinquency, substance abuse, and teenage pregnancy and conduct problems. Mental health protection and promotion should not be regarded solely as enhancement of wellbeing in children and youth. It is also embracing the future wellbeing of these individual as adults.

School can be considered a setting in which there is ample opportunity to promote the mental health of young people. It is not just a place of educational learning, but also an important environment where children make friends, develop social networks and are introduced to adult role models. Schools are viewed as key settings, like homes and communities, in which to tackle mental health problems and promote positive youth development. Poor performance and under-achievement at school are associated with a range of potential health and social problems, including substance abuse, unplanned teenage pregnancy, conduct problems and criminal behaviour. A sense of connectedness with family and school on the other hand, is recognised as a protective factor for youth mental health. A positive educational experience and a good level of academic achievement can contribute significantly to enhancing self-esteem and confidence, better future career prospects, life opportunities and social support. Schools play an important role in protecting and promoting young people's mental health and supporting students' ability to cope with changes, challenges and stress during these years.

2. Main Principles of Mental Health Promotion in Schools

As the foundation for good mental health is nurtured during the early years, it is important to initiate mental health promotion during the opening school years. This is not to suggest that mental health promotion and protection is less significant for older students, but that different age groups require different approaches and interventions. Approaches for the lower grades (**children** aged approximately 7-12 years) should be playful and supportive. Talking about difficult issues (e.g. death) is also important, as it promotes changes in attitude towards death and dying and helps children to deal with possible tragic losses. Approaches during **pre-adolescence and adolescence** (approximately 13-18 years) should be supportive and knowledge-sharing, as this is the stage when adolescents develop attitudes. Adolescence - a stage of transition from childhood to adulthood – is a vulnerable period. It is associated with biological, psychological, social and cognitive changes – feelings of confusion, emotional outbursts, sadness or rapid mood changes are to be expected. Changed sensitivity, new thoughts and feelings, along with new behaviours may result in a lack of mental wellbeing for numerous reasons (i.e. conflicts with parents, siblings or at school; concerns about peers; bullying; vacillating body-image and self-esteem). Adolescents are strongly concerned about how peers view them, thus they may engage in risk-taking behaviours to attain other's approval. Risky behaviour on the other hand may result in further disadvantages and stress. Depression is a common mental health problem affecting teenagers. Adolescents, especially the ones who are going through puberty (approximately 10-14 years for girls and 12-16 years for boys), need additional emotional support. Approaches during **young adulthood** (approximately 18-24 years) should be in the form of intellectual dialogue, as this is what young adults value. Support is naturally relevant also.

It is essential to introduce positive models of mental health, which emphasise wellbeing and competence, rather than those associating mental health with illness – this will help overcome problems of stigma and promote the idea of mental health in a more open and productive manner. It is equally important to use language and terminology that is inclusive, normalising and avoids stigma and discrimination. For example, using a term such as „emotional and social wellbeing“ rather than „mental health“ has been useful in some countries, because it carries less negative connotations than the word „mental“. However, if signs of disturbed mental wellbeing are identified, it is important to meet the needs of children and youth and provide effective interventions. Individual needs can vary, from those requiring general support, to those in need of referral to a specialist – therefore, it is extremely important that stakeholders are familiar with the institutions/service providers from which to retrieve help. School staff must avoid making psychiatric diagnoses; only qualified professionals have this authority. While focusing on pathologies or problems is informative, it is also important to focus on the competencies and strengths that underlie health. These abilities include optimism, coherence, resilience, the ability to understand and explore the origins of stress and the ability to communicate effectively and make mutually satisfying relationships. These skills enable us to enjoy life and to cope with pain and disappointment.

Programmes that actively involve parents, local community and key local agencies have shown to be more effective in influencing children's behaviour, mental health and learning. Broad approaches generally utilise the holistic model of health. This approach investigates several aspects of school (curriculum, management, ethos, relationships, communication, policies, physical environment, relations with parents, relations with community and pedagogic practice), works with all relevant

parties (e.g. government, educational authorities, schools, families, community), includes school personnel as well as students, promotes coherence and teamwork and facilitates the acquisition of different types of skills.

To ensure that students feel safe and are open to communicating, it is essential to set up clear rules and boundaries. It is important that students do not feel oppressed by the rules. For that reason, one might discuss the necessity of rules with students and adapt them in respect to students' needs. Moreover, a set of rules can be developed by discussing what kind of environment students need – what do they require to make them feel safe (e.g. asking their opinion regarding the characteristics of a safe, secure environment). For good results, every student should accept validated rules (hearing everybody's voice). It might mean discussing the necessity of the boundary repeatedly. Finally, the key processes are listed in Table 1.

Table 1: Key Processes of Mental Health Promotion (MHP) in Schools

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| <ul style="list-style-type: none">▪ Integrating MHP into school curriculum▪ Beginning interventions early▪ Particular and distinctive attention in respect to age▪ Promoting self-esteem, self-confidence and life skills▪ Giving personal support, guidance and counselling▪ Building warm relationships▪ Set up clear rules and boundaries▪ Encourage participation and autonomy▪ Involve peers and parents in the process▪ Create a positive climate▪ Take a long term, developmental approach▪ Avoid language which is stigmatising▪ Avoid psychiatric diagnoses |
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Source: Barry & Jenkins (2007)

3. Ethical Issues in Respect to Mental Health Promotion in Schools

No matter how good the intentions, one must always adhere to legal mandates, regulations, contractual obligations, and ethical principles. Violations may represent a failure to promote the wellbeing of students and could lead to lawsuits, loss of licensure, and possible criminal prosecution. Ethical codes and standards for practice (e.g. the system of principles and specific rules that guide professional behaviour and aim to protect the interests of clients and uphold professional standards) provide quality guidance on professional conduct. The ProMenPol project adheres to seven principles (see [ProMenPol's ethical vision](#) for further information), which are consistently included in ethical guideline manuals:

1. Respect for human rights, equality and diversity
2. Social responsibility
3. Beneficence - 'do positive good'
4. Non-maleficence - 'do no harm'
5. Inclusion (as hearing everybody's voice)
6. Professionalism
7. Legality

In addition, students must have the right to refuse participation, as well as the right to withdraw from the programme. As mental health promotion at schools means working with under-aged participants, informed consent from a parent or legal guardian should be obtained. Informed consent means disclosing all relevant information to the participant and the parent/legal guardian. This involves providing adequate information about the aims, methods, anticipated benefits, potential hazards and any discomfort the programme might evoke for participants. If any problems occur during the implementation process, it is important to inform all involved parties as quickly as is feasible (including making decisions).

It is important to ensure the competence of the professionals who work with children, particularly those who will be responsible for introducing and implementing the mental health promotion programme in the school. Those who seek to promote mental health may require additional training (e.g. how to address possible problems; how to address individual differences in motivation and developmental levels; how to create positive and supportive relationships) or may even call on assistance from other services. It is important that these professionals also have the opportunity to avail of support services themselves. Staff development should be recorded and updated and access to informed consultation should be provided, should any ethical questions be raised. This will allow staff to deal more effectively with their own job stress and feel supported in their role.

To ensure that all collected data is stored safely and remains confidential, students' health records should be kept separate from all other records. Only those authorised to view students' files may be permitted access to these documents.

Apart from the general principles, ethical guidelines/requirements and data protection rules vary between countries. One should always be familiar with, and adhere to the guidelines specified for mental health promotion tools, considering the country in which one is practising.

4. Parental Involvement

The influence of the family is an important dimension that needs to be considered when addressing young peoples' development and growth. The family is the primary and most influential system to which a child belongs. Parents and families should be involved in mental health protection and promotion because:

- Families want to be included and informed of their child's/children's progress
- Families can provide comprehensive information about the child, including
 - information about health, development, background, history, strengths, and
 - weaknesses
- Families can introduce changes in the home environment and can contribute to
 - treatment planning and positive development
- Families can assist by monitoring progress and providing feedback to the therapist
- Students feel that families are interested and available
- Family involvement in mental health care has been linked to improved service coordination
- Family involvement in mental health care has proven to reduce stress on the family unit
- Programmes that involve families have a higher success rate

However, resistance from families is not uncommon. A number of factors may hinder family participation in the mental health programme, including the perceived stigma associated with mental health services, concerns about confidentiality, transportation issues (distance, costs, time), conflicting work schedules, concerns about losing control over the family members, resistance on the part of the child to involve the family, time constraints on school staff, pre-existing tension between schools and community members, and the lack of formal training of school staff.

Therefore, parents should be informed about the ethical vision (including confidentiality) and the aims of the mental health promotion action. It is equally important to highlight that parents are regarded as allies of school staff, health providers, other families and relevant institutions. It is wise to ensure that parents are equally involved at every stage of the mental health promotion action - planning, implementation, and evaluation. It is also important to highlight that the child and the family are viewed as a unit, and that problems should be approached in such a way so as to include all family members, rather than focusing on the problems of a single individual.

Fostering family involvement may be more successful when the following principles are adhered to:

- Develop a philosophy about family participation and involve families in all aspects of the programme (programme development, implementation and evaluation)
- Be accessible, useful and sensitive to cultural issues, continuously foster relationships, be user-friendly (avoid technical jargon)
- Establish ongoing communication channels (meetings, phone calls, letters)
- Develop a knowledge base of resources for families

- Accommodate services to suit the family schedule (e.g. offer evening hours, early morning appointments, etc.)
- Recruit parents as advocates and systematically contact them (e.g. identify parent leaders)
- Accompany parents to meetings relevant to their child's education and emotional health (special education, juvenile justice, psychiatric evaluations)

5. Relationship with Health Authorities

Co-operation with health authorities can be advantageous as certain institutions may help with funding, monitoring, providing relevant facilities, contacting skilled/experienced professionals and building up a good network. Health authorities may also facilitate disseminating mental health education in the community, which will promote effective intervention results. Educating people about mental health will help ensure that children's needs are recognised and appropriately met. Children will be provided with knowledge that helps them to understand themselves and will be encouraged to talk about their feelings and worries, in a supportive, safe and comforting environment.

Additionally, it needs to be highlighted that discussing complex issues with other professionals is encouraged and strongly recommended – as long as the consultation does not identify a particular student.

6. Steps for Implementing Mental Health Promotion in Schools

6.1 Phase 1: Making Preparations

Main Issues	Building Collaboration	<p>MHP in schools is a challenging task. Involved parties may experience certain bias, hesitation and fear. Constituting a core group of people committed to the project and convincing school management and staff of the value of the intervention is extremely important.</p> <ul style="list-style-type: none"> ▪ Ensure that the school management, staff and parents are aware of the importance of mental health and convinced of the value of the MHP. This may include arranging meetings, making phone calls, writing letters, etc. ▪ Build support for the project with the main stakeholders (parents or guardians, teachers, boards of management, health authorities, and students) ▪ Identify potential members of the project team. It is important to keep in mind that it is far better to have a small number of people who are genuinely committed to the project rather than spreading the network too wide so that it contains people who are only lukewarm supporters of the project
	Communication	<p>Communications and appropriate channels should be set up at an early stage to promote the effective participation of all stakeholders.</p> <ul style="list-style-type: none"> ▪ Establish what groups and which persons need to be communicated with about the project ▪ Develop a communications plan for the project which includes materials, communications channels to be used and a schedule
	Scoping the Project	<p>Scoping the project is about understanding the setting: identifying the nature and extent of the problem the project is expected to solve, mapping available resources, current and previous health related activities. This step should produce a clear definition of what has been and what should be done.</p> <ul style="list-style-type: none"> ▪ Examine the school's profile in terms of existing structures, programmes, policies, committees etc. And investigate other school health activities that may have an impact on mental wellbeing, e.g. leisure time activities; programmes to promote a healthy lifestyle; programmes to promote life skills; programmes against truancy and drop-out ▪ Establish the scope of the project, i.e. what areas it will operate in, what time and resources are available, how it should fit in with other school health initiatives ▪ Establish what kinds of MHP interventions are possible ▪ Establish reporting relationships for the project ▪ Establish where the proposed MHP programmes fit in to existing activities

		<ul style="list-style-type: none"> Establish a working picture of mental health promotion needs from data on existing activities
	Developing the Project Team	<p>Establishing a project team is the key element to a successful project. The more secure the foundations which are built here, the more far-reaching effects the project will carry.</p> <ul style="list-style-type: none"> Select members for the project team Ensure representation of the major stakeholder groups Develop a preliminary project plan to cover the early stages of the MHP process Assign roles to the members of the project team, e.g. project manager, communications and reporting, liaison with external stakeholders (where envisaged), data analyst Manage any ethical issues that apply
	Getting Agreement	<p>Agreements in the preparation phase involve setting out an explicit agreement (may take the form of a contract) between the project team and school management.</p> <ul style="list-style-type: none"> Develop an agreement between the project team and the school management which covers the main points of the project plan Communicate the agreement to all of the major stakeholders

6. 2 Phase 2: Needs Analysis and Planning

Main Issues	Needs Analysis	<p>In all cases the initial planning for the programme/project requires that there is a clear understanding of why the intervention is needed. It should consult previous research and theory in the area, as well as collect new data on specific mental health promotion needs in the school.</p> <ul style="list-style-type: none"> Identify the information already available (e.g. research and theory in the area; student attendance, teacher reports) Review the school's strengths and weaknesses Involve key stakeholders (e.g. teachers, parents and students) to identify the current status of the problem, the respective needs, and assist in the decision-making Involve the entire project team in the development of the needs analysis instrument (e.g. questionnaire, interview schedule, focus group instrument) Field test the instrument for acceptability and practicality Provide training for interviewers if necessary Ensure the standards of anonymity and confidentiality Analyse gathered data, summarise, and communicate the results to all parties. It can be also useful to collect feedback on the composed report as it provides an opportunity and rationale for changes or adjustments if necessary.
	Setting Targets	<p>The main task here is to set achievable, measurable and agreed targets for the MHP intervention and it should be based on the results of the needs analysis. The constraints of the project and the likelihood of being able to meet the targets should be also taken into account.</p>

		<ul style="list-style-type: none"> ▪ Clearly indicate the target group(s) ▪ Set targets in terms of how the process of implementation should proceed and in terms of its expected and measurable outcomes (e.g. reduction in reports of bullying or truancy) ▪ Specify the duration of the intervention and the expected benefits. Organise the plan in relation to short-term and long-term goals, set timeframes. ▪ Communicate the results to all stakeholders
	Selecting Tools MHP	<p>Selecting the right tools for the project is essential for success. You may need tools to support any activity of the process of implementation, e.g. project management, needs analysis instruments, problem solving guidelines, etc.</p> <ul style="list-style-type: none"> ▪ Ensure as far as possible that the tools selected are of a high standard ▪ Ensure the availability of expertise needed to operate the tools. Organise training if necessary ▪ Seek advice from professionals or people who have previously used the tool(s)
	Project Planning	<p>Developing a project plan is an important means of ensuring that the project is run professionally, it is taken seriously, and that all relevant parties have a clear understanding of what will happen, when it will happen, who will be involved and what resources will be applied.</p> <ul style="list-style-type: none"> ▪ Include all relevant details (aims, targets, activities, responsibilities and accountabilities, budget, schedule, expected outcomes, contingency plans, training needs, resources available and required, monitoring procedures) to the project plan and confirm it with the school management ▪ Communicate the main elements of the project plan to all relevant parties ▪ Ensure that planned activities are consistent with the ethical principles and laws

6. 3 Phase 3: Implementation

Main Issues	Assigning Responsibility	<p>Good project management involves making clear plans for action and assigning the necessary resources and responsibilities for implementation of activities. Although a general project plan will have been already developed, there is also a need to develop a specific plan for each element of the implementation.</p> <ul style="list-style-type: none"> ▪ Assign resources, personnel and a schedule to each activity ▪ Make use of existing resources where possible – this keeps costs down and it helps to integrate the project/programme into the normal school environment. For example, it might be a good opportunity to collaborate with the school therapist, nurse or teachers ▪ Ensure clear lines of reporting on the activities that take place
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<p>Carrying out Plans</p>	<p>out</p>	<p>Before implementing any of the activities of the MHP programme/project it is important to ensure that all facilities are available and ready for use. You should consider the following:</p> <ul style="list-style-type: none"> ▪ Ensure that what is needed is available in sufficient quantities and is ready to use (including training if needed) ▪ Conduct a meeting to ensure that everything is organised and that all participants are clear as regards their responsibilities ▪ Ensure adequate communications regarding activities to be carried out ▪ Provide sustained support (supervision) to implementers ▪ Give your best in order to create a positive atmosphere at school ▪ Monitor the actual implementation of the intervention and the support system for the implementer. This includes the amount, frequency, quality of implementation and the level of student engagement ▪ Keep activities manageable and highlight positive features and successes. Break down large tasks into smaller, more manageable components if necessary ▪ Be flexible during the implementation of activities – change activities that are not working optimally
<p>Targeting the Actions</p>	<p>the</p>	<p>This step relates to setting targets for each of the activities that take place. You should consider the following:</p> <ul style="list-style-type: none"> ▪ Set easily measurable targets for each of the activities that take place (e.g. in terms of outcome and process: a decrease in bullying, an increase in participation level). Be realistic and allow interventions enough time to work as instant results cannot be expected. Set targets for the short, medium and long-term ▪ Explore ways of involving parents/caregivers in school activities ▪ Incorporate learning activities for students and families ▪ Ensure that the communications system is able to effectively reach the entire target group to successfully engage them in the activities. In some cases it might be appropriate to devote some time for the communication during certain classes. But it has to be agreed beforehand with teacher(s) and shared information cannot contain confidential information ▪ Consider using multiple methods to reach the target group (e.g. phone calls, e-mails) and use the communication channels that are common to the target group ▪ Consider any special barriers that may exist for the target

		group (e.g. some information may be preferred to be shared anonymously, especially if the programme/project is targeted to a specific group)
	Providing Feedback	<p>Providing feedback to both participants and stakeholders is essential as they need to be informed about the process of implementing MHP and about its results. When considering feedback, you should:</p> <ul style="list-style-type: none"> ▪ Provide feedback and communicate results to the school community. You might consider holding regular meetings in order to do so or keeping the school community informed about developments via the newsletter ▪ Maintain feedback about the progress to key people to ensure support ▪ Ensure that the feedback for students is provided, the positive side is highlighted and the confidentiality rules are followed

6.4 Phase 4: Follow up and Evaluation

Main Issues	Monitoring	<p>A procedure for monitoring the progress of the MHP project needs to be established early in the project lifetime. This should be done at the same time as the project plan is written as this allows for a comprehensive and proactive monitoring process to be undertaken. Feedback from the monitoring process should be available during the programme which can be used to redirect programme activities if necessary. You should not forget the following elements:</p> <ul style="list-style-type: none"> ▪ Target indicators, e.g. reports on bullying/truancy, changes in grades, to determine successes and failures. You might consider holding project team meetings (you may include gatekeepers, students and guardians) to discuss the progress, successes and failures. ▪ Include both qualitative and quantitative indicators ▪ Compose a schedule of monitoring activities ▪ Compose feedback mechanisms and schedules ▪ Review and monitor progress.
	Evaluating	<p>Evaluation refers to the process of analysing the data from the monitoring process and using it to address questions such as; Has the process worked? Has it worked efficiently? Has it improved the health of students?, and so on. Areas of specific interest in evaluation include:</p> <ul style="list-style-type: none"> ▪ Cost-benefit and cost-efficiency assessment – do the benefits of the programme/project outweigh its costs, could it be run in a more efficient way, could another programme/project be more successful? ▪ Impact assessment – what are the immediate impacts of the programme/project in terms of, for example, attitudes of teachers/students/parents or guardians, awareness of

		<p>teachers/students/parents or guardians, changes in grades, satisfaction with the MHP intervention?</p> <ul style="list-style-type: none"> ▪ Outcome assessment – what are the longer term outcomes of the programme/project in terms of, for example, changes in reports on bullying/ truancy or subjective health complaints? ▪ Process assessment – how did the MHP process of implementation work in terms of, for example, the numbers participating, levels of satisfaction with the process and levels of awareness of the programme?
	<p>Ensuring continuous progress</p>	<p>One of the goals of any MHP programme must be to improve the programme/project and to ensure that the programme/project continues beyond its original lifetime as far as possible. Evaluation data is essential for ensuring that continuous progress is made.</p> <ul style="list-style-type: none"> ▪ Ensure feedback to all key players (stakeholders, policymakers). Try to provide regular feedback early enough to influence the progress of the programme/project ▪ Go back to the planning stage and propose new action plans to improve the intervention ▪ Ensure that all stakeholders are involved appropriately

7. Sources

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8. Appendix 1 - Useful MHP Tools in the Educational Setting Available on ProMenPol Database

The Name of the MHP Tool	Preparation	Needs Analysis	Implementation	Follow-up
Ergebnismodell- Modell zur Typisierung von Ergebnissen der Gesundheitsförderung und Prävention		X		X
Gewalt-Deeskalationstraining-Gewaltprävention in der betrieblichen Ausbildung			X	
Leiser lernen - Handlungsleitfaden zur Lärmreduktion in Grundschulklassen			X	
Allianz für nachhaltige Schulgesundheit und Bildung in Deutschland (anschub.de)	X	X	X	X
Aktion Glasklar - Trinken steht keinem!	X			
Gesundheit aktivieren – Schatzsuche statt Fehlerfahndung			X	
Soester Programm (Suchtpräventionsprogramm für die Sek I und II)			X	
Zippy's Friends	X	X	X	
The "Friends" Programme			X	
Olweus Bullying Prevention Program	X	X	X	X
The Good Behaviour Game	X	X	X	X
Sandwell Healthy Schools Scheme (SHSS)	X	X	X	
Wired for Health	X	X	X	
Children's Depression Inventory (CDI)		X	X	X
The Flemish School-Based Anti-Bullying Programme	X		X	
Vaimse tervise probleemide ennetamine ja märkamise koolis	X	X	X	
Enesetappude ennetamine: abiks õpetajale ja muule koolipersonalile	X	X	X	
Kool ja koolivägivald	X	X	X	
Kooliväsimus ja stress	X		X	
Psühhosotsiaalse keskkonna juhendmaterjal koolieelsetele lasteasutustele	X	X	X	X
Laste ja noorte kriisiprogramm		X	X	X
Haapsalu projekt: koolilaste (pre)suitsidaalse käitumise ennetamine		X	X	X
Lahendus.net		X	X	X
Gesund leben lernen-Schülerinnen und Schüler lernen gesund zu leben		X	X	
OPUS NRW- Netzwerk für Bildung und Gesundheit	X		X	

The Name of the MHP Tool	Preparation	Needs Analysis	Implementation	Follow-up
Training mit Jugendlichen zur Förderung von Arbeits- und Sozialverhalten (Handbuch inkl. CD-ROM)			X	
Primakids - Primärprävention und Gesundheitsförderung im Setting Schule	X	X	X	X
Streitschlichtung durch Schülerinnen und Schüler			X	
„Verrückt? Na und!“ Prävention und Förderung der Seelischen Gesundheit in der Schule für Jugendliche ab 15	X		X	
Lehrer stärken - Kompetenz erweitern (Trainingsprogramm für Sek I Lehrkräfte)			X	
Leipziger Programm - Unterrichtsvorschläge zur Anwendung des Soester Programms und ALF			X	
Handlungsanleitung zur Durchführung einer individuellen Vorsorgediagnostik für Lehrkräfte		X		
PIT - Prävention im Team			X	
Skala zur Erfassung von Lehrer- und Schülermerkmalen (Selbstwirksamkeitserwartungen)		X		X
Qualitätskriterien für die gesundheitsfördernde Schule		X		X
Fit for Life (Trainingsprogramm für die Förderung sozialer Kompetenzen bei Jugendlichen)			X	
Kidscreen Fragebögen (KIDSCREEN-52, KIDSCREEN-27, KIDSCREEN-10)		X		
Fit for Differences (Training interkultureller und sozialer Kompetenz)			X	
Buddy-Projekt (Aufeinander achten. Füreinander da sein. Miteinander lernen.)			X	
Deine Stärken. Deine Zukunft. Ohne Druck!		X		
Lebensraum Schule - Methoden und Perspektiven für ein gutes Schulklima			X	
AZUBIAKTIV- Betriebliche Gesundheitsförderung-ein Workshop für Azubis		X		
Kidscreen questionnaires (KIDSCREEN-52, KIDSCRREN-27, KIDSCREEN-10 Index)			X	
Sozialtraining in der Schule (Trainingsprogramm für die 3.-6. Klasse)			X	
LARS&LISA - Lust an realistischer Sicht & Leichtigkeit im sozialen Alltag (für Jugendliche)		X	X	
Online Elterntaining			X	

The Name of the MHP Tool	Preparation	Needs Analysis	Implementation	Follow-up
Prævikus - Konzept zur Gesundheitsförderung von Kindern	X	X	X	X
Empfehlungen zur Gesundheitsförderung in Schulen	X			
„Wir werden eine Gesundheitsfördernde Schule“ – Leitfaden	X	X	X	X
Maailman ihanin tyttö - valokuvaprojekti	X		X	
Koulupihakilpailu: Yhdessä opittua – pihalla tehtyä!			X	
Eigenständig werden (Unterrichtsprogramm für die Grundschule)			X	
Fit und stark fürs Leben (Suchtpräventionsprogramm für die 1.-6. Klasse)			X	
Just be Smokefree – Selbsthilfeprogramm zur Raucherentwöhnung			X	X
Lions-Quest "Erwachsen werden" (Life-Skills-Programm für die Sekundarstufe 1)			X	
Klasse2000 (Unterrichtsprogramm für die Grundschule)			X	
Zukunfts- und Versagensängste von Kindern und Jugendlichen. Aktuelle Unterrichtsmaterialien Jugendrotkreuz für die Sekundarstufe 2007	X		X	X
Deine Stärken. Deine Zukunft. Unterrichtsmaterialien für die Primarstufe zum Thema Ängste von Kindern	X		X	X
Fragebogen zur Erhebung der Emotionsregulation bei Kindern und Jugendlichen (FEEL-KJ)		X		
(SVF-KJ) Stressverarbeitungsfragebogen von Janke und Erdmann (angepasst für Kinder und Jugendliche)		X		
Yläaste-, yläkoulu- ja lukioikäisten nuorten terveyden edistäminen - Materiaalikeskus kouluterveydenhoitajalle	X			
ILK- Inventar zur Erfassung der Lebensqualität bei Kindern und Jugendlichen		X		X
QPR Intervention (Question, Persuade & Refer)	X	X	X	X
Folkhälsans tjejgrupper			X	
Hyvä elämä – hyvä mieli Lasten ja nuorten henkinen hyvinvointi	X			
Friends - mielen hyvinvointia edistävä ohjelma koululaisille	X		X	

The Name of the MHP Tool	Preparation	Needs Analysis	Implementation	Follow-up
Friluftsliv	X		X	
Föräldrakraft	X		X	
Vänelevs- och tutorverksamhet - Andra stadiet	X		X	
LärärKraft	X		X	
Vänelevs- och tutorverksamhet - Grundläggande utbildning	X		X	
MÄ OON JEES! Aineisto itsetuntemuksesta tukioppilasohjaajalle	X		X	
Perhe-elämälle eväitä - vanhemmille ja muille kasvattajille tarkoitettu kurssi	X			
Steinerpedagogiikan seura ry	X	X		
VI GÅR ALLA OMKRING MED EN VINGE - Drama och teater i gymnasiet – en rapport, en färdbeskrivning och ett inspirationsmaterial	X		X	
STEP - ungdom møter ungdom			X	
Sexsnack			X	
Faces - ett hälsofrämjande material	X		X	
Folkhälsans pojkgrupper			X	
Lions quest			X	
Osaan ja kehityn-hanke (Lasten ja nuorten arkinen mielenterveysosaaminen)			X	
Kantti kasvuun – oppitunteja hyvinvoinnista	X		X	
Mielix-peli			X	
Koulu-yhteisön terveyden edistämiseen liittyviä säädöksiä ja suosituksia - Tukimateriaali koulu-yhteisön terveys- ja hyvinvointiohjelman suunnitteluun	X			
Unipäiväkirja		X	X	
Terveyttä edistävän koulun tarkistuslista	X	X		
VÅGA säga nej till droger och våld	X		X	
Frågor om föräldraskap- Folkhälsans forum på internet	X		X	
E-peli - Elämän peli			X	
Verhaltenstraining in der Grundschule (Präventionsprogramm zur Förderung emotionaler und sozialer Kompetenzen)			X	
Verhaltenstraining im Kindergarten (Programm zur Förderung sozial-emotionaler Kompetenzen)			X	
Ecstasy-Präventionsprogramm für SchülerInnen			X	
Bewegungsfreudige Schule	X	X		

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Die Schatzsuche – Ein Modul für eine gute und gesunde Grundschule			X	
Überblicksartikel der Stiftung Warentest zu Gesundheitserziehungsprogrammen an Schulen	X			
"Schuldetektive" des Netzwerkes "Gesunde Schulen"		X	X	X
TeenScreen Program	X	X	X	X
Social and Emotional Learning (SEL)	X	X	X	X
Depressed Little Prince	X	X	X	
LivingWorks	X	X	X	
Beyond Blue Schools Intervention		X	X	X
Prima Klima! Miteinander die gute gesunde Schule gestalten			X	
Papilio. Ein Programm zur Vorbeugung gegen die Entwicklung von Sucht- und Gewaltverhalten	X	X	X	
ALF Allgemeine Lebenskompetenzen und Fertigkeiten. Präventionsprogramm für SchülerInnen der 5. und 6. Klassen	X	X	X	
Berliner Programm zur Suchtprävention in der Schule (BESS)	X	X	X	
Das Gruppentraining sozialer Kompetenzen (GSK)	X	X	X	
Ein partnerschaftliches Lernprogramm (EPL). 1000 Kleinigkeiten und den Mut, darüber zu reden. Gesprächstraining für junge Paare			X	
Beyond the Basics: A Sourcebook on Sexual and Reproductive Health Education			X	
Families & Schools Together (FAST)			X	
Identifying and Responding to Students in Difficulty. A Guide for Staff	X	X		
Make it Happen. A Guide to Delivering Mental Health Promotion.	X			
Promoting Mental Health and Preventing Suicide in College and University Settings	X		X	
Mental Health Promotion and Prevention of Disorders	X			
Increasing Family Involvement for Special Populations			X	

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Positive Behaviour Support: A Classroom Wide Approach to Successful Student Achievement and Interactions			X	
Creating an Environment for Emotional and Social Well-Being		X		
Children's Mental Health Week			X	
MindMatters Booklets			X	X
MindMatters Booklets Tools for Schools			X	
Feeling Good. Promoting Children's Mental Health			X	
Pathways to Policy. A Toolkit for Grassroots Involvement in Mental Health Policy		X	X	X
Quick Training Aids. Behavior Problems at School	X			
Bullying and Bullying Prevention			X	
Health Visitors	X			
NASP Toolkit - School-Based Mental Health: From Research to Practice: Information and Resources You Can Use		X	X	
Mental Health and Emotional Well-Being of Students in Further Education - A Scoping Study	X			
Freunde für Kinder - Angst und Depressionsprävention für das Grundschulalter			X	
Faustlos - Curriculum zur Förderung sozial-emotionaler Kompetenzen und zur Prävention von aggressivem Verhalten			X	
MindMatters - Förderung der psychischen Gesundheit aller Schulmitglieder	X	X	X	X
Verhaltenstraining für Schulanfänger (Prävention von aggressivem und hyperkinetischem Verhalten)			X	
Komm, wir finden eine Lösung (Gewaltpräventionsprojekt für Grundschüler)			X	
Ich bin ich (Programm zur Gesundheitsförderung durch Selbstverwirklichung)			X	
Gatehouse Project: Promoting Emotional Well-Being: Team Guidelines for Whole School Change		X	X	

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Steps to Respect: A Bullying Prevention Programme		X	X	
Ahead4Life: Practical Problem Solving			X	
Addressing Barriers to Learning: A Set of Surveys to Map What a School Has and What it Needs				X
I Can Problem Solve [ICPS]			X	
Circle Time Solutions			X	
Suicide Prevention in Schools, Best Practice Guidelines				X
Lifelines			X	
Seasons for Growth			X	
How Schools Can Help Students Recover from Traumatic Experiences A Tool Kit for Supporting Long-Term Recovery			X	
CMHA (Canadian Mental Health Associations) Mental Health Promotion Tool Kit		X		
Guidelines for Mental Health Promotion in Higher Education		X		
The ABCs of Bullying: Addressing, Blocking, and Curbing School Aggression		X	X	
Early Warning, Timely Response: A Guide to Safe Schools		X	X	
BFW - Berner Fragebogen zum Wohlbefinden		X		
Voices and Choices: Planning for School Health		X		
Mindmatters: A Mental Health Promotion Resource for Secondary Schools	X			
Second Step: A Violence Prevention Curriculum			X	
Promoting Children's Mental Health within Early Years and School Settings	X	X	X	
Coping with Stress Course (CWS)			X	