



MHP-Hands: Focus groups' report from Estonia

Estonian-Swedish Mental Health and Suicidology Institute





Introduction

The objective of MHP-Hands project is to enhance the amount of mental health promotion taking place in school, workplaces and older people`s settings. While other partners are in charge for settings such as workplaces and elderly care facilities, the Estonian-Swedish Mental Health and Suicidology Institute (ERSI) is in charge for school setting. Professionals working in school (mostly teachers) are supposed to acquire appropriate skills and knowledge in order to implement effective mental health promotion. The purpose is to maintain and promote the mental wellbeing of the target groups (indirect beneficiaries-pupils) within schools. This report describes results of the workshop with focus groups and also strong points, limitation and conclusion of this work.

On 19th of September 2010, a workshop with two focus groups was held in one castle out of Tallinn. In total, 17 participants were divided into two focus groups. According to profession, participants were teachers, psychologists, social pedagogues and school nurses. Afterwards, in order to complete tasks in proper manner, each focus group was divided to smaller groups and each small group had it` own rapporteur during common discussion time.

The workshop consisted of: presentation about the MHP-Hands project, introduction to mental health promotion, stages of needs analysis (roles and professions, roles and activities, roles and knowledge requirements, discussion) and evaluation. In addition, participants received handouts – folders with printed worksheets, printed project description and introduction to mental health promotion. Participants were very interested in presentation held by Dr. Merike Sisask about mental health promotion, and wanted to obtain more detailed knowledge about mental health promotion.

Needs analysis

Stage 1 (roles and professions)

Professions in school that could have important roles in mental health promotion were proposed by focus groups. Comparing answers from both focus groups, similar professions were considered as important for mental health promotion projects in school. In addition, the roles assigned to those professions were quite similar with some minor differences. In general, needs analysis of roles and professionals cleared out who could be involved in implementation of mental health promotion projects and programmes in school setting.

Stage 2 (roles and activities)

Participants were supposed to describe the task and activities of different roles (Decision-maker, Implementer, Marketer, Expert, Developer, Change-maker, Monitor) in mental health promotion. Although focus groups mostly had similar role description, focus group 2 was in general more descriptive. In this part of needs analysis, participants numbered activities that need to be carried out by role while implementing mental health promotion in schools.

Stage 3 (roles and knowledge requirements)

In stage 3, participants have decided about relevant knowledge and skills that are required for performing mental health promotion activities. Those skills could be divided according to the roles. Focus groups had common opinion about required levels of knowledge and skills for different roles in mental health promotion, although with some minor differences.



Strong points, limitation and overall conclusions of focus group work

Participants were very interested in introduction to mental health promotion in general (what it is, why is important, why school setting), tools to assess mental health, strategies for promoting mental health at school, possible resources (ideas, funding, project evaluation), network and collaboration, information on kind of roles that different positions have, algorithm to recognize mental health problems among pupils with recommendations for following actions, legislation in respect to child mental health.

Strong points were participants` strong wish to participate at workshop, demonstrated interest during workshop, activity, questions raised and discussed, open, positive communication with proper and immediate feedback.

Possible limitation is participants` interest in assessing mental health and tools for it. At first sight it might seem that they are more interested in determining whether pupil has some mental health problems than in promoting positive mental health. In addition, participants showed a lack of knowledge about positive mental health and project implementation. A lack of funding for health promotion in schools and unequal level of basic knowledge about positive mental health raised the issue about possible success of positive mental health programmes in schools.