

Healthy Transitions from High School Pilot Project – Report Summary

The *Healthy Transitions From High School (HTFHS)* pilot project was developed in response to growing concern about the mental health and well-being of Canadian youth. It was designed to support educators by providing them with resources to help promote and protect students' mental health and well-being, in line with national and provincial mental health strategies such as Ontario's *Open Minds, Healthy Minds*.

A collaborative, evidence-informed project

The *HTFHS* pilot project built on two previous phases of research, including:

- Extensive review of existing universal, school-based mental health promotion programming for youth;
- Adaptation for teens of the *Healthy Transitions* resources – originally developed by the Children's Hospital of Eastern Ontario (CHEO) for Grade 7 students – and consultation with youth, educators, and mental health experts.

The third phase of work was the implementation pilot of the newly adapted *HTFHS* resources, conducted between January 2015 and August 2017. As in the previous phase, the *HTFHS* pilot was a collaboration with CHEO, the non-profit Social Research and Demonstration Corporation (SRDC), and School Mental Health ASSIST, an intermediary organization of the Ministry of Education that supports school boards with their mental health and addictions strategies.

Integrated and engaging resources to build social and emotional skills

The *HTFHS* resources set out to help build social and emotional learning (SEL) skills among transition-bound high school students. SEL programming supports mental health promotion through development of five foundational skills:

1. Self-awareness
2. Self-management
3. Social awareness
4. Relationship skills
5. Responsible decision-making

Together, these SEL skills can help youth handle the demands of the classroom, engage fully in learning, and navigate their path through high school and beyond.

Over the course of nine modules, the *HTFHS* resources provide many different opportunities for students to develop these skills, through exposure to different media resources, and a variety of

exercises and activities. Students have the opportunity for both personal reflection and group discussion, as well as to engage in interactive activities such as puzzles and short projects.

The *HTFHS* resources are also fully integrated into the Grade 10 Career Studies course in Ontario, with direct links to the course's learning goals as set out in the provincial curriculum. The *HTFHS* resources were not designed as a separate intervention, but rather one that could support teachers in their course delivery.

A comprehensive pilot project

The pilot project served as an opportunity to determine if the *HTFHS* resources were appropriately designed, were feasible for educators to deliver, and could be evaluated as planned.

A total of seven schools participated in the project, representing all six regions in Ontario and a diverse cross-section of school and student characteristics. Mental Health Leads from participating school boards played a critical liaison role, from eliciting initial interest from pilot schools, to supporting approval from each board's Research Ethics Board (or equivalent process), to providing support to educators on content delivery, to helping administer research protocols for consent and data collection.

Information and feedback about the design and delivery of *HTFHS* resources was sought from everyone participating in the pilot – teachers, administrators, Mental Health Leads, and students – through a variety of different means. These included surveys, interviews, and focus groups (in two schools), as well as checklists to assess actual delivery.

In addition to assessing the design, delivery and evaluability of the *HTFHS* resources, substantial effort was dedicated to training and support. Teachers received training on resource content and delivery through online webinars, with input from educators who had reviewed and used the resources in an earlier stage of development. Throughout training and delivery, teachers were supported by Mental Health Leads, who themselves were supported by Implementation Coaches from School Mental Health ASSIST and the Leadership team.

Findings – *HTFHS* resources are relevant, useful, and feasible to deliver

The results of the pilot evaluation indicate that *HTFHS* resources were positively received by participants, and that the design, delivery model, and evaluation tools are suitable for continued implementation:

- 1. Educators, students, and Mental Health Leads all indicated that resources were appropriately designed and were relevant regardless of school and student characteristics.** Participants felt the *HTFHS* resources met their stated goals, fit well within the Grade 10 Careers Studies course, were practical to deliver in the classroom, and effectively engaged students.

“I found it really easy to say whatever it was that you wanted to say. Nobody was judging you. That made you feel more comfortable to share what you wanted to share. Nobody was making any fun of anything. It was just a very calm and relaxed class.” (Student focus group)

However, several students expressed a desire for more in-depth information, and a number of educators were interested in additional materials to reflect specific sub-groups, such as youth at risk, LGBTQ youth, or First Nations youth.

“I’d like to see that in some of the sub-groups like youth at risk, or LGBT or First Nations, that we see those populations represented in some way at least within the examples, and give the teacher some freedom and flexibility to insert their own local material. It’s important so those students who are more vulnerable do see themselves reflected.” (Mental Health Lead 5)

- 2. Teachers generally felt they were able to deliver the modules as designed, although they were interested in receiving ongoing support and additional materials.** While teachers reported making minor adjustments to the structure of the resources to meet timelines and accommodate classroom dynamics, they generally remarked that modules stacked well on each other and proceeded developmentally, while still allowing enough room for dynamic student discussions. Nevertheless, teachers were interested in receiving continuous support throughout delivery, including potential in-class support from Mental Health Leads or other subject matter experts.
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“If you want to make meditation work, you need to bring a professional in, who meditates and demonstrates to the class some true techniques. I can talk about meditation, I can show a video, but I have never used meditation so to me, I don’t know what the benefit could be.” (Teacher 4)

- 3. Preliminary results indicate the resources had a positive influence on student outcomes, although survey revisions may help increase our ability to measure results.** Both teachers and students reported positive changes in students’ self-awareness, self-management, relationship skills, social awareness, and attitudes toward mental health.
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“I realized that although everyone has their own problems, a lot of people have similar feelings about the same things. So when I was talking about it afterwards, I know that people understood me.” (Student focus group)

Following delivery of the resources, students also significantly increased their willingness to seek help if needed, particularly in terms of the range of people they were willing to seek out. In particular, a much greater proportion of students reported a willingness to seek out school-based supports after they had been exposed to *HTFHHS* resources, as seen in the table below.

Table 1 Students' willingness to seek out supports

Support	Pre	Post	Percentage point change
A friend	85%	89%	↑ 4%
A teacher	25%	40%	↑ 15% ***
School staff (e.g., office staff, principal/vice-principal, educational assistant)	14%	22%	↑ 8% **
A counselor/public health nurse	16%	28%	↑ 12% ***
A psychologist	10%	17%	↑ 7% *
A parent	68%	71%	↑ 3%
A brother/sister/cousin	49%	55%	↑ 6%
Another family member	33%	44%	↑ 11%
Another member of your community	9%	11%	↑ 2%
A member of your church or religious organization	7%	12%	↑ 5% **

Note: * indicates level of statistical significance.

It should be noted that some results emerged only qualitatively – that is, through the responses of teachers, Mental Health Leads, and students in interviews and focus groups – rather than through quantitative changes in students' survey responses before and after receiving the resources. This may indicate that the survey measures require some refinement in order to properly measure changes in students' SEL skills.

Moving forward

The positive reaction so far toward the *HTFHS* resources indicates they meet an important need and their design and delivery model are sound. The results of the pilot have identified several areas in which the resources and evaluation tools can be further revised, following which the resources should be tested with a larger sample of students in a demonstration project.

A demonstration project would use an experimental design that compares the outcomes of students who are exposed to the *HTFHS* resources in class with those who do not have this opportunity. This can test the *effectiveness* of the resources, allowing educators to use them with confidence, knowing they help students develop the skills needed for positive mental health and well-being. Many thanks to all those who participated in helping us generate these learnings so far.